

Gauging Community Sentiments and perceptions of Alternative forms of Child care/Non-Institutional forms of Child Care



An Assessment Report on
"Community perception on Alternative Child Care"
conducted by Srijan Foundation
with the support of Jharkhand Task Force For Alternative Child Care

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Note of Thanks:

Srijan Foundation would like to extend our thanks to all those involved in making this project possible. We would like to thank Reshmi Nath for her contributions to the study design and questionnaire design. In addition, her role in data collection, translating, and transcribing. Without her support and guidance this study would not have been possible. We would also like to extend our thanks to our Task Force partners who organized interviews with local stakeholders and community members. This includes the teams at; Jharkhand Gramin Vikas Trust-JGVT, Chotanagpur Sanskritik Sangh-CSS, Jago Foundation, and Child in Need Institute-CINI. We would also like to extend our thanks to Sanjay Kumar of Srijan Foundation. Sanjay's guidance throughout the process, input into the study design, and his coordination with both local stakeholders, community members, and the Task Force partners was instrumental in ensuring that this project was completed in a timely and efficient manner. We would like to thank our donor agencies for providing the required capital to support this study and all other initiatives concerning child protection and alternative care. Last but not least, we would like to thank all of the community members, caregivers, and key stakeholders that were willing to contribute to this study by completing the questionnaire. They all provided valuable insights into perceptions of alternative care, current implementational challenges, and possible avenues for expansion and change.

Background Information:

Srijan Foundation is an organization that has been working to create a better world for women and children since its registration in 2001. Srijan Foundation works to build the capacities of the communities it works with and views them as equal partners in this process. It takes a holistic approach to solving dynamic challenges which include sensitization and training, grassroots mobilization, shifting norms and values, income generating activities and other activities focused on ensuring the realization of rights for all especially women and children.

Since 2013, as part of its commitment to realizing the rights of children, it has been engaged in various projects relating to non-institutional forms of childcare. These include acting as an implementing NGO for the DCPU and CWC in identifying and tracking vulnerable children as well as providing training and sensitization to grassroots workers such as members of the VLCPC, BLCPC, anarwadi workers, and even members of the DCPU and CWC themselves. Srijan Foundation also provides private sponsorship to children and runs a specialized adoption agency as well as two child care institutions. Srijan Foundation was a founding member of The Jharkhand Task Force on Alternative Forms of Childcare and has also been involved in the development of state level policies and guidelines. For example, Srijan Foundation was one of many NGOS invited to comment and provide input into the development of the Jharkhand State Guidelines on Foster Care and the Jharkhand State Guidelines on Sponsorship.

Srijan Foundation's commitment to alternative forms of childcare stems from its commitment to realizing the rights of children, ensuring that they have a safe and supportive environment to develop in, and that they are given opportunities to both express and advocate for themselves. In addition, it stems from the increasingly prevalent research done which showcases that institutional care has long term detrimental effects on the psycho-social and cognitive development of children. As such, it is focused on ensuring that the Model Guidelines for Sponsorship and Foster Care implemented while also seeking new and dynamic solutions that complement these guidelines. Srijan Foundation is committed to providing care solutions which are culturally cognizant, research driven, replicable, and rights based.

As such, this study was commissioned in order to better understand community perceptions of alternative child care to evaluate the feasibility of different models, received feedback from current beneficiaries, and identify possible roadblocks and alternative avenues for implementation.

Research Question:

The study sought to assess and identify community perceptions of alternative care models with a focus on perceptions of foster and kinship care.

Research Methodology:

The study was conducted in 5 districts in 6 distinct locations over a period of three weeks. The districts covered were Khuti, Hazaribagh, Ramgarh, Giridih, and Dhanbad. The distinct locations include Kujju and surrounding blocks in Ramgarh, Hazaribagh, Dhanbad, Bero, Giridih, and Khuti. Each visit was for one day and participants were informed about the visit and purpose of the study prior to the study team's arrival. Directly prior to the interviews, the purpose and scope of the study was also reiterated to the respondents. Respondents were identified by Srijan Foundation and Task Force members working in their respective districts. Srijan Foundation and Task Force Members organized the respondents and selected neutral and comfortable locations for the interviews to be conducted. Some interviews were conducted at the home or work place of select respondents.

The study consisted of semi-structured focus group interviews and semi-structured one-on-one interviews. The study was semi-structured in that questionnaires were designed but the interviewer was free and even encouraged to ask additional questions depending on the flow of the interview. The design of the questionnaires went through several stages. Initially, the questionnaires were created for four distinct categories; Foster parents, non-foster parents, foster children, and Key stakeholders. However, after an initial use of the questionnaire in Ramgarh, it was found that foster parents were not prevalent and that even using the term foster care brought some confusion while interviewing. As such, the questionnaire was redesigned a total of three times with the final questionnaires consisting of six distinct categories; Kinship caregivers, Children living with kinship caregivers, Parents, teachers, stakeholders involved in child protection (VLCPC/CWC/DCPU), and general community members. All questionnaires were translated into Hindi by Reshmi Nath and all interviews were conducted in Hindi. Brandon Conner, a team member did not speak Hindi. As such, if he had additional questions, he would express this to Reshmi Nath who would then translate them in real time to Hindi. She would record the responses and then translate the answer to Brandon. However, real time translation of the main interview was not conducted as this would have increased the amount of time to complete the questionnaire and could alienate our respondents.

Like any research study, there are limitations involved in the project. One of the limitations of the study was geographic spread. All districts visited in this study were located in the central and north central part of the state. Though each district had difference demographics and a point of the study was to ensure that respondents came from various religious communities and tribal communities, a more robust geographic

spread would have only enriched the data and would have possibly identified challenges, solutions, and perceptions.

Another limitation was time and timing. Each district visit was only for one day which limited the amount of respondents that could be interviewed as well as hindered rapport building. As such, we were required to depend on the Task Force members to identify and organize meetings. If there was more time in each district then longer interactions with respondents could have occurred or multi day interviews with respondents. More respondents and perhaps a greater variety of respondents could have been interviewed. In addition, more time could have increased rapport between respondents and the study team which may have led to more in-depth answers because the respondents felt more comfortable around the study team. Concerning time, the study was conducted during Parliamentary elections as such government officials and workers were preoccupied with the elections. This hindered the stakeholders we could talk to especially in Giridih. In addition, given the political climate surrounding elections, respondents may have been more apprehensive to answer questions though based on the report, respondents were quick to criticize the government. However, the elections did impact our ability to interview key stakeholders and may have influenced respondent's answers.

Language also presented an issue for one member of the team. As mentioned above, Brandon did not speak Hindi and could only communicate with the study team and respondents in English. This severely limited his initial understanding of the respondents' answers and curtailed his engagement with them. In addition, being a foreigner may have impacted the respondent's answers and the degree that this occurred can not be ascertained. However, even given these circumstances, measures were introduced that were meant to help mitigate this. For example, the study team

Key Findings by District:

A. Ramgarh

Background:

We visited Ramgarh district on 9/4/19 and conducted 5 focus group interviews; 1 interview with 2 children in single parent households receiving support from Srijan Foundation, 1 interview with an unmarried adult teacher, her mother, and another non-kinship care mother, 1 interview with the head of the District Child Protection Unit and the CWC Chairperson, and 2 interviews in different panchayats with various stakeholders. The first stakeholder interview consisted of Anganwadi workers, VLCPC members, Sahaiya, and Sahayika. The second stakeholder interview consisted of VLCPC members, the Secretary of VLCPC, three kinship carers, a person supported under IGA of Srijan Foundation, and three community members.



Focus group interview in Ramgarh

These interviews were conducted in the following locations; the 1st and 2nd interviews were conducted in the home of the respondents which was located in the village of Jodha Karam, the 3rd interview was conducted at the District Child Protection Committee Office, and the stakeholder interviews were conducted near the Srijan Foundation Kujju office and at a school in Ratway Panchayat, Mandu Block.

The amount of children in kinship care, foster care, and sponsorship had varying statistics which will be described as done in the various interviews. Through the interviews, it was stated that no child in the district is under a formal foster care arrangement and that no child is receiving support from the government sponsorship scheme yet families are receiving private sponsorship/support through Srijan Foundation.



Small group interview with kinship caregiver and adult daughter

1. Perceptions of family based care:

There is a clear preference for family based care and all respondents identified the importance of children growing up in a family or family like environment. This was preferred because family based care was

viewed as providing the required love and support to raise a child and that traditions and culture can be more easily transferred. For example, a respondent stated “ that family should look after the interest of the children and take proper care of them and meet their needs...”, and that “even if the parents are not there such children could get care and support from the family....”, “since the child has better opportunities to grow in family therefore they are supported so that they can be properly taken care of and also learn their culture and customs. The child can be taken care in a better manor in a family and receive the love, care, and guardianship...” and “the best environment to a raise is child is first of all family, joint family in Indian community.” These quotes showcase that family based care or a family environment was viewed as the best care arrangement for children because it provided proper care, support and love while also allowing children to engage with their culture. In addition, one respondent explained that she had provided long term care (defined as primary caregiving for more than 6 months) for the children of relatives. However, she was more tentative in assessing if society at large would be willing to do this. This is captured in her response that “Yes, society might be willing to provide short term care (less than 6 months) for a child that is related to them”

The respondents expressed that most family based care is either done by grandparents (paternal and maternal) or aunts and uncles (both paternal and maternal). Of the interviewed kinship carers, all three were grandparents caring for grandchildren. Though the respondents viewed kinship care positively, they also expressed some challenges surrounding kinship care as it is currently practiced. They stated that many kinship carers are grandparents and are quite old. As such, it can be challenging for them to provide care especially to younger children. The respondents also mentioned that most of these caregivers have limited resources themselves and they really aren’t able to provide support to the children. For example it was stated “what help can the relatives provide if they themselves are poor.”

These two dynamics can be illustrated in the following case:

Case Study 1: (All names are changed to protect the identities of those interviewed and discussed)

Krishna’s daughter in law remarried and left her two small daughters behind in the care of their grandparents. The grandparents are quite old, live in difficult circumstances and are unable to meet their basic necessities. When their mother left, one granddaughter was 4 years old and the other was 2 years old. Currently, they are attending school and in class 6 and class 3 respectively and have been receiving care from their grandparents all throughout this period of time. The grandparents have a small piece of land where they grow some vegetables like cucumber and tomato meet their needs. They are receiving support from Srijan Foundation in order to provide better care

In addition, there is the perception that society and family should make up the main systems of support for children in need of care and protection. However, these structures are not necessarily reliable. For

example, it was stated “There is a lack of community feeling. There are people/families who give consent and agree in front during [the] meeting [to care for children] but do not mean to and refuse to oblige when the need arises.” Collaborating this statement, another respondent stated “It is the responsibility of the family and society for caring for children without parents but people do not respond.” In addition, one respondent explained that there are also issues of comparability which must be taken into account between the child and the kinship carer. “There is issue of compatibility also of the children with foster family or with relatives if in the kinship care ” and one instance was described where “one child was placed in the kinship care of his *chacha-chachi* but all of a sudden he refused to live with them.”

As such, though family based care (specifically kinship care) was viewed as the best environment to raise a child in the absence of parental care, however the sustainability of the model was called into question because of the advanced age of most of the kinship caregivers and the economic marginalization faced by the caregivers and the community as a whole. Additionally, issues of compatibility between potential kinship carers and children were brought up as well. Again, even given these unique challenges, family based care was viewed as a viable and possible avenue for care of children with parental support. The implementation of the sponsorship scheme and other incoming generating activities should help to alleviate some of these challenges.

2. Perception of foster care:

Views on foster care were generally mixed with some respondents expressing that it would not work in their community. For example, one stakeholder stated “...due to unawareness parents don’t take care of their own children, so how can it be expected that they would take care of other’s children.” In addition, in the interview with a DCPU member it was said that “In our country it is seen that kinship care is more prevalent than foster care as there is a feeling of belongingness in the kinship care.” and that the concept of foster care “is not popular at all.” The respondent continued that ‘Even though the new guidelines does discuss about and the implementation of the program is in the process but nothing much has been done on kinship and foster care as income is a big issue.’ The DCPU member continued by stating that “ There are orphan children with no family members it is very difficult to find a foster family for them. Families do not find it feasible to take care of infants and small children of 2-3 years. It is also difficult to continue it in the long run as there are issues of property and other things.” The first comment by the DCPU concerning the age of the children is quite interesting as, according to the guidelines, children under 6 can not be placed in foster care and can only be adopted. The DCPU may have misspoke in this moment but the comments concerning “property and other things” raises possible legal or cultural roadblocks to implementing foster care and should be further investigated.

Other respondents stated that foster care was possible but only under certain circumstances i.e if the foster parents were “educated”. This respondent stated “If some responsible people from the society volunteer

then they can take up some responsibility. Educated people in the society provide the guideline and people with means and those with benevolent heart should come forward and take responsibility” These comments reflect similar tensions found in the perceptions of family based care albeit tilted towards the idea that foster care is currently impractical i.e foster care sounds like a good idea but given the situation of the community is not really feasible. Foster care was viewed as a system that could work in specific circumstances such as with “educated parents” but that those types of parents were viewed as not prevalent in the community. In addition, the conversations with respondents revealed that there exists both financial and socio- behavioral barriers to the implementation of foster care.

3. Perception of Institutional care:

Attitudes to institutional care are somewhat ambiguous. Though all respondents interviewed stated that family based care is the best form of care and that children in institutional care face difficulties. For example, the DCPU respondent had quite a telling quote. The respondent stated “ For the Development of the child, the child should get love of the family; because if he stays alone in the orphanage then he will get neither love nor a family atmosphere. *It would be like growing in a dark closed room or development with no light where as in the family they will get more human atmosphere.*” [Emphasis added] However, respondents were quick to point towards residential schools as a key component of care for children without parents. For example, residential schools, such as Kasturba schools for girls, were frequently mentioned. Though they were not exactly conceptualized or viewed as institutional care even if they function in a similar way. In addition, it was stated that “family members, relatives and the community send good food, clothes, and other utilities during festivals [to the girls in the Kasturba school].” However, we were not able to ascertain if children stayed with relatives, stayed exclusively in the residential schools, or a combination of both. In addition, shelter homes for boys were viewed positively especially the work of one CCI called the Divine Omkar Mission. It was stated by a respondent from the DCPU that “ There is one very big and good organisation called Divine Omkar Mission which has 80-85 children brought by the government, CWC, etc. Some children have gone there directly and even otherwise and they provide protection to these children have been approved by the CWC.” In both of these situations, it was stated by a respondent from the DCPU that “As could be seen noted in the CWC register that most of the children are from families having single parents. Moreover, it is clear during the counselling whether the parents or grandparents of the child are there or not.”

As such, though institutional care was viewed less positively than kinship or foster care, it still was utilized in the caring of children and viewed as one option of many for children in need of care and protection. However, in line with the guidelines, it seemed to be used as a last resort or at least this seemed to be the position taken by child protection officials. In addition, it seemed that short term or temporary institutional care [residential schools] was also common especially for children of single parents. However, the longevity of their stay in this type of care is not known.

4. Stakeholders understanding of the ACC process:

Of the key stakeholders interviewed, there was a general understanding of the Foster care process and guidelines. For example, key stakeholders were able to differentiate between foster care and group foster care and accurately describe the amount of children that could be cared for in the respective arrangements. Stakeholders were also able to describe some of the documentation required to become a foster family such as the medical certificate and the police verification. Stakeholders were also able to differentiate between foster care and adoption stating that “Adoption is different from Foster care which is temporary.”

Stakeholders were also able to describe the sponsorship program; the amount of money per child received as well as the income requirements. There was one insistence during the interview with the DCPU that was described above, however, this could have been a similar mistake. Many of the stakeholders credited their knowledge to the work of Srijan Foundation.

5. Perception of children in need of care:

Children in need of care and protection were viewed with a negative lens but also with pity and as victims of their circumstances. For example, in the first interview it was stated that children from economically poor families struggle with basic necessities such as food. As such, “it is least expected from them to do well in studies, games, sports, and their overall development.” In order to rectify this, respondents stated that “special support is needed for children with poor economic background. They should be adhered to school, education, and given special care so that they do not feel the dearth of guardianship, resources or opportunities or be devoid of anything.” Though they were described as engaging in negative behaviors more often than their peers i.e not going to school Each respondent was clear to emphasize that this was because of their lack of guidance and that they wouldn’t engage in this behavior if they had clear guidance and support.

6. Perceptions of Parents of children in need of care:

The perception of parents of children who are in need of care was much more negative. Respondents clearly emphasized that biological parents were not able to care for their because they were ignorant or because they engaged in selfish or anti-social behavior. One respondent explained that there is even a clear difference between the parenting styles of children that send their children to private school and those that send their children to government schools. It follows “ When the kids study in a private school with high fees then even parents feel responsible and send their children diligently to school whereas family with children in government school are not very particular resulting in poor study, dress up, lack of interests.” The respondent continued “ Mother of the child who is studying in private school takes paper care whereas the mother of the child who is studying in government school does not take proper care.”

7. Perceptions of NGOS in regards to ACC:

The work of NGOS was generally viewed very positively with many people expressing gratitude at the work that Srijan Foundation has done in the district. They viewed the NGO as a source of guidance and training. For example, it was stated “ they [stakeholders]. In addition, they viewed Srijan Foundation as filling in the gaps created by the government.

8. Perceptions of Government in regards to ACC:

Though respondents had a favorable view of government programs and schemes they expressed frustration with their implementation. A respondent stated

There is ambiguity in the introduction and the implementation of the scheme. There should be permanent solution as the administration just introduces the schemes and fulfill their responsibility but it does not reach the genuine people due to lack of proper implementation. It is seen that people who should get benefit are mostly deprived.

This quote illustrates the frustration that respondents had with accessing and understanding government schemes with an emphasis that the most needy are usually not reached by the programs. For example, a respondent stated that the government scheme does not reach the needy people therefore cooperation [with NGOs] is needed so that such children get support and become something in future.”

This was illustrated further by challenges that key stakeholders had with securing income certificates. Income certificates are one of the required documents in order for a family to qualify for sponsorship. Respondents repeatedly mentioned that obtaining an income certificate was cumbersome and took weeks to receive. This has significantly stalled the sponsorship process with no families receiving sponsorship from the scheme as of now. These delays also eroded confidence in the viability and usefulness of the schemes. It is important to note that concerns not directly related to ACC but to child care in general were raised by two categories of stakeholders: Angarwadi workers and teachers. Angarwadi workers were quick to express that they felt overburdened and that they were required to take on too many tasks which impacted their ability to adequately care for children. Teachers expressed that they had not been paid for 6 months and that this impacted not only their livelihood but their interactions with their students. Two respondents who were teachers stated that they wanted to do more for their students but were not able to because of the lack of payment.

Key Findings by District:

B. Hazaribagh:

Background:

We visited Hazaribagh district on the 10th of April 2019. Srijan Foundation is the alternative care implementation NGO in this district. The research team conducted 5 distinct interviews which was as follows 1. One interview with an assistant teacher and principal at the Kronch Kanya Madhya Vidyalaya 2. An interview with a member of the CWC in Hazaribagh. 3 A meeting with a community members and a kinship care family consisting of 5 respondents which was conducted in their home. 4. An interview with two caregivers and 5. An interview with four members of Childline.



Interview with educators in Hazaribagh



Interview with members of Childline Hazaribagh

1. Perceptions of family based care:

Family based care was once again viewed as the best option for children in need of care and protection. All respondents viewed family based care positively. For example, in the first interview, the respondents stated “ Parents/Guardians should be prompt and attentive so that the students are punctual. They should take care of the child who are under Kinship care as their own child and should set them to school on time regularly.” It was also stated in the final interview that “ kinship care was better than institutional care. They [the respondents] have talked to many children who have lived in the CCI and most of them said that they wanted to stay in the family. “ The respondents continued “Their[the children’s] behaviour shows that family is better. Within the family environment the child gets information about how to I’ve in the family, learns about their customs and culture, behavioral learning etc.”

However, respondents were more open to speaking about issues that they had seen with kinship carers or in kinship care arrangements. For example, in the first interview, the respondents stated that there was a

child in kinship care who was still not attending school. In addition, in the interview with Childline workers, it was mentioned that they have witnessed instances where kinship care children are treated different than biological children in the household. However this is only on the case “if the family in which the child has been put is not economically strong then they treat the children in alternative care differently and there is a partiality in treatment between outside child and their own children in the family.” This is mitigated though when economic support is provided according to the respondents. The respondents in this interview also stated that there is a sense of competition between the children (biologic and kinship care) and if the families are not properly trained and sensitized then these attitudes persist. They expressed that this can cause mental-emotional pressure on the child, “He feels the disparity in behavior with the other children in the family. The child is always pointed out that parents are not there.”

2. Perceptions of foster care:

Foster care was viewed negatively and key officials expressed the sentiment that though family based care is more beneficial to the child, the potential family must be heavily scrutinized because sponsorship provides an economic incentive. In addition, it was mentioned that it may be a challenge for the child to adjust to a new environment and that they have different behaviors than their foster parents. It was also assumed that foster parents would be afraid to use physical means to discipline a child and said in no uncertain terms “In case the child is beaten it is a problem for the foster family. There is fear that what would be their reaction.” This statement came from the CWC which is quite alarming. The CWC member in addition mentioned that they had applications for foster care but that “one or two response have come for foster care. Some of them had applied but did not turn up or comply when they were called upon to take charge.” Foster care was expressed as a concept that was still not clear in many communities.

3. Perceptions of Institutional care:

Institutional care was viewed more positively in this district or at least viewed as a more uniform alternative. It was stated that

There is a need for foster care but if we do a comparative analysis we have to see the purpose behind them for keeping the children. One has to see whether they are getting emotional support in foster care or not. In institutional care the child would be taken care as per rule whereas in personal care until and unless there is a sentiment or emotion involved they cannot take care of the child.”

Once again residential schools and even shelter homes were viewed positively as alternative methods of care by both teachers and members of the CWC. Again, residential schools are not defined as institutional care though they function in a similar way. Though they stressed that it should be a last resort, they admitted that this care arrangement served some utility. Childline workers expressed concern that in their interaction with the CWC, it seems like it seemed to favor institutional care and that institutional care was the first resort in many instances. Childline workers and other caregivers however expressed that institutional care was not beneficial to the child and stated “They have talked to many children who have

lived in the CCI and most of them said that they wanted to stay in the family. Their behaviour shows that family is better.” The expressed the notion that institutional is only provided until age 18 and that this type of care does not prepare them for life outside of the institution. It seemed that there was tension between Childline and the CWC with the CWC pursuing institutional care whereas Childline viewed alternative care as a more beneficial route for the child.

4. Stakeholders understanding of the ACC process:

Stakeholders had a deep understanding of the ACC process which was credited to the work of Srijan Foundation. They were able to explain the requirement of the sponsorship scheme and the needed documents. Foster care was not discussed in depth but key components were able to be explained.

5. Perceptions of children in need of care:

Children without parents were viewed as victims of their circumstances and though it was expressed again that they engaged in anti-social behavior it was stressed that this was not through the fault of their own but rather through not having the proper guidance and support.. For example, the teachers mentioned that “There are some children who do not get supportive Society and conducive environment to develop and so they get mislaid and become vagabond therefore supportive society is very essential.” In addition, the teachers discussed how children from these environments are less likely to go to school but again, emphasized this was not the children’s fault but rather the fault of parents/guardians, “They are very small children and do not understand about their rights. These children want to study but their Guardians lack orientation. They do not follow up or bring them to school.” However, it is interesting to note that sponsorship was viewed as beneficial because it would reduce crime i.e. “Sponsorship is good as the children will get support, be with safety net and the crime rate would decline.” which indirectly relates children who are in need of sponsorship with supposed criminality.

6. Perceptions of Parents of children in need of care:

Perceptions of parents with children in need of care fell into two major categories: parents were viewed negatively and perceived as negligent or parents were viewed cautiously stating that they needed sensitization and training mostly. In the first category, comments mainly from stakeholders such as the teachers and the CWC expressed these sentiments. They viewed the parents as not caring about their children. For example, the teachers stressed that children only attended school when the government was hanging out free things and that after that the parents didn’t care about sending their children to school. The respondents stated “..many children are not regular to the school and they come only to get free things. Crow can be seen in the school whenever the government resources are distributed like uniform, books, but afterwards they are not punctual.” In term of the second category. mostly childline workers explained the struggles they had with parents and community members where community members were not quick to give up their children even if they were engaging in problematic parenting practices. They

mentioned that parents would still have their children engage in child labour and that it took a lot of convincing and sensitization training to change these behaviors. In these instances, the parents are viewed somewhat negatively but also viewed as products of their circumstances and that with the right support then they provide adequate and needed care.

7. Perceptions of NGOS

Perceptions of NGOS and their role in the alternative childcare system were positive. Srijan Foundation was thanked for its efforts and mentioned as provided training and support. It was stated in the fourth interview that both the government and NGOs have a role to play in “creating awareness and motivating the community members.”

8. Perceptions of the Government

The perception of the government was generally positive though there were points of contention with how the program was being implemented. The issue of the income certificate being a challenging document to obtain or miscommunication on how to obtain sponsorship was mentioned as a challenge. This will become a requiring issue throughout the districts in which respondents were interviewed.

In addition, there was the need for more support to the CWC in order for it to function properly. This would take the form of training and sensitization.

Key Findings by District:

C. Dhanbad

Background:

The research team visited Dhanbad district on 12/4/19 and conducted two focus group interviews. The first interview was with Jharkhand Gramin Vikas Trust which is a Task Force member NGO. The second interview was with community members and stakeholders such as Angarwadi worker, Ward Councillors, Mahila, and Sevikas.

The interviews were conducted at the JGVT office located in Mahuda, Dhanbad and at Lakadka Village, Katras Anchal, Dhanbad Nagar Nigam.

Dhanbad is an industrial area with coal mining making up a large percentage of the economic activity

Jharkhand Gramin Vikas Trust was able to identify and present 110 children to the CWC for sponsorship and care but the process has stalled and they have not received any new support.



Focus group interview with angarwadi workers in Dhanbad

1. Perceptions of Family based care:

Family based care was viewed ambiguously with a slight negative stance and not viable in all circumstances in Dhanbad. For example, in the first meeting, a clear distinction was made between family ties in the village and in the town. "...the village has different culture than town." In the village, community and familial ties were considered quite strong with kinship care regularly practiced. For example, a respondent stated "In a village the relations are closely knit and if the parents of any child have died then the relatives like grandparents, uncle and aunt of the child provide support and take care, so not much problem in the village" and "It is seen that the village is strong in matters related to child protection. Community people say that they are there for such children even if the government does not provide any incentive." This is in stark contrast to town culture in which familial ties and community ties were viewed as limited and children in a precarious situation. For example, a respondent stated "But in the slum area the situation is really inextricable. Child pick coal, earn and get food to eat but they do not get education, nutrition, proper upbringing and environment/surrounding and thus their future is in danger and the growth and development of the child is hampered." This was built upon in the second meeting in which key stakeholders stated

Though there are children who are staying with relatives but they do not get upbringing in a proper manner as there is lack of personal care. There is no proper arrangement for studies, nor any guidance and persuasion for studies and nobody to take personal care. They do not have a set routine. There is lack of information on personal care and adoption among the family members."

Two case studies were discussed which explored negative experiences with kinship care:

Case study 1.

In the first study. A local boy without parents stays with his married elder brother. His Bhabhi (sister-in law) ill treats him and does not give him food to eat. He was to work as a rag picker to earn a living. Since he has no alternative means of living he is struggling to sustain and stay alive.

Case Study 2

In the second case, "there is a girl in class 6 who does not have parents. Her Chacha-Chachi used to keep her earlier but now they don't want to keep her."

These two case studies illustrate that kinship or family based care is not without its negatives and that more support and sensitization has to be provided to ensure that children are cared for and that relatives have the needed tools and support to provide for them.

The third case study explores a positive example of kinship care while also exploring how remarriage affects children.

Case Study 3

In the third case study, there is a child whose mother passed away and the father remarried. This resulted in a lot of problems for the child and the child was transferred to the care of his elderly grandmother. It was stated that there is approximately 5 to 7 matters similar to this in the whole area. It was stated that “if any of the parents remarry then the child becomes vagabond.”

This case study is a positive example of kinship care but also showcases that in Dhanbad, when parents remarry, it seems to have a negative effect on the child with the child transferred to the care of another relative. The degree at which this occurs can not be inferred by the sample size or these two interactions but it is important to note.

In conclusion, family based care was viewed as somewhat viable in the village where family ties and community support remained but was not viewed as viable in the town because of the lack of community and family ties. Kinship caregivers were viewed as negligent and unable to currently provide the care needed for the development of children. This was viewed as endemic and language that in previous districts was applied only to parents was applied to kinship care givers in this situation. The families continued economic marginalization and migration patterns were viewed as the source of this instability.

2. Perceptions of foster care:

Foster care was viewed ambiguously in the community though not negatively. One respondent in the first interview stated that “ It is hard to get people to care for children that are not their own. However, another respondent in the first interview stated that they did see instances of community members caring for children unrelated to them even in the slum areas. This stands in contrast to the village-town dichotomy discussed above and situation of slum children. For example, the respondent stated “Community people say that they are there for such children [without support] even if the government does not provide any incentives. Some such cases were also seen in the slum areas where the families had been keeping and taking care of orphan children.” ” Specific discussions of foster care were less common in this community with conversations mainly surrounding kinship care or institutional care as such it is hard to gauge community perceptions of this type of care.

3. Perceptions of institutional care:

In Dhanbad, institutional care was viewed positively in both meetings. In the first meeting, respondents stated “ Institutional care was better because if children are put in some institution they would be taken care of in a certain way and in a better manner and there would be 100 percent improvements and they would be able to do something significant in the future. “ The respondent elaborated further

But their families resist such steps and do not want their children to stay in any institution. It can be said that there is better growth opportunities and environment in the family but it depends how much care they are taking. If they go even now, 2 to 3 children could be found roaming and playing with not much concern with

the family and the families are not much bothered about their wellbeing. Large scale unemployment and poverty could be a big reason behind such behavior of the family.

Through this quote, we can see that institutional care was viewed as a more viable option because it is assumed to offer uniform care and quality care whereas as family based care is dependent upon the family. Underling this perception was the belief that families in the area generally do not provide quality care because of their socio-economic situation. This will be discussed further under section 6. In addition, shelter homes were viewed as positive and needed in the community. A respondent stated "... there are shelter home but for girl[s] only and there are 15 girls in the home. There is an approval for such shelter home for boys also but has not been made."

In the second meeting, the respondents viewed institutional care as a beneficial but temporary solution because of the context of the community. For these respondents, institutional care was conceptualized as shelter homes or child homes which would provide temporary support for children when parents migrate for work. Long term institutional care was viewed somewhat negatively. This is evident in the following statement by respondents. "There are not institutions to take care of such children in Katras. It is essential that there should be such shelter homes at the local level. The growth in institutional care is very mechanised therefore shelter home or kinship care is quite essential for children whose parents go out to work to live there for temporary basis." It was further elaborated that children homes were needed because many people migrate to the Dhanbad area for work and as such do not have the familial or community ties which could provide support to their children. This was stated " It is very essential to have a children home here because they have to go to Dhanbad for that. 75% of the people have come here from outside from different—different places to work and earn their livelihood since Dhanbad is an industrial area. They do not have any relatives or community support to look after their children. " As such, in the second meeting industrial care was actually criticized for its uniform or "mechanic" approach to care in the long term. However, it was viewed as a viable temporary option because parents migrate out for work and many parents migrate in for work who do not have a social support network to care for their child. Though only tangential related, it is also important to note that one of the key things asked for by the stakeholders was the creation of a day centre similar to the AWC but for older children. It was stated " Many children pick and sell coal to earn a living. If there is a Day Care Centre specially for children beyond the age group of Anganwadi centre for 4 to 10 years of age then education be provided and these children..can be taken care of in a proper manner. "

As such, it is important to note that institutional care in this district was viewed positively but only in a short term context which was necessitated because of the community labour market It was not necessarily viewed as a first choice but definitely a care arrangement that was needed in the community given the circumstance.

4. Stakeholders understanding of the ACC Process

Stakeholder understanding of the ACC process was adequate with respondents able to explain the income requirement and document requirements in order to receive sponsorship. The intricacies of foster care were not touched upon in the meetings but respondents in the second meeting were able to accurately describe the monitoring process for children in sponsorship and the home visit process.

5. Perceptions of children in need of care:

Children in Dhanbad who were in need of care were viewed sympathetically and once again as victims of their circumstances. They were also viewed as persistent. This is illustrated in the following quote from a respondent in the first interview. The respondent stated “

Here many children do not have family members, i.e. either father or mother are not there. They do not get any cooperation in education. They somehow manage to study in Government schools but they do not get any support. If they get support then they also can study well and could have better future.

In addition, children in need of care in Dhanbad weren't described by respondents as engaging in any antisocial behavior such as not attending school or engaging in substance abuse. However, it was common for respondents to state that children pick coal and work in the mines as evident in section 3. As such, it is likely that they do not attend school, however, this connection was not made explicit as compared to responses in the other districts.

As such, children in need of care in Dhanbad were viewed sympathetically and in need of caring and supporting environments. In addition, they had no major negative connotations associated with them as compared to previous districts.

6. Perceptions of parents of children in need of care:

In the interviews in Dhanbad, parents of children in need of care were viewed more positively or at least more neutrally than in other districts. The descriptions of parents as negligent and engaging in substance abuse was not found in these interviews. More emphasis was placed on the economic situation of the parents which affected their ability to care for their children. For example, in one of the interviews, a respondent stated

the families here are very poor and have poor economic resources. Parents go out to work and children are left behind with nobody to look after them. In many such cases it is the single mother to look after their children as the father is either dead or has remarried. They want help from the government. There is lack of education among children.

As such, it seems that parents of children in need of care in Dhanbad were predominately single parents and it was emphasized that parents did leave their children without a caregiver when they went to work

but this didn't have the connotation of the blame being placed on the parent rather it was on the economic situation of the parents. There was also positive changes in the community discussed related to the development of SHGs which were positively impacting children. It was stated that the creation of SHG groups empowered women "who were confined to home and did not come outside interact or participate in any social issues and work." but were now actively engaging in public life and taking an increased interest in their child's education. The respondent stated " Earlier did not pay much attention on education of their children as they were illiterate but now they can sign also."

As such, the respondent's descriptions of parents of children in need of care were more positive or at least neutral in their assessment. They didn't mention the parents engaging in antisocial behavior or outwardly neglectful practices and were more willing to conceptualize or explain why parents may have adopted certain parenting behaviors.

7. Perceptions of NGOs in regards to ACC

The perception of NGOs was positive with NGOs viewed as providing support and training. It must be mentioned that only one non NGO group interview was conducted so this could have skewed the answers given by our respondents.

8. Perceptions of the government in regards to ACC

The perception of the government implementation of schemes especially in regards to ACC was very negative. In the first interview it was stated that the government has not provided adequate training and that organizations such as the VLCPC and the DPCU do not function. In whole the respondent stated "

Nothing much is being done by the state for training on Foster care, sponsorship program and providing information to VLCPC at the village level. The DPCU does not show interest or is not active on this issue. In Dhanbad a list of 150 children were presented to CWC out of which 110 were presented by the NGO itself, being a member of the Task Force, but not a single child has been provided any support due to laggardness at the administrative level. Even the people, members at the District Level Approval Committee do not have much to do with the issue. If they had been more active the money granted by the Central Government would not have returned back (since no children were given support under the scheme). Had there been better monitoring at the State level then some benefit could have been provided to at least even 10 children. Due to administrative apathy the program is not being effectively implemented. There is one hitch in the program that the income of the applicant should be less than Rs.75,000 therefore the NGO got a written confirmation that the family live below the poverty line so they should be provided support. They have applied for the income certificate at the C.O level and the things are in the process.

Frustration at the slowness of the implementation of the scheme and the perceived inaction of the government was reinforced in the second interview where it was stated by respondents:

There is the one big problem in sponsorship program. The poor families have to run from pillar to post to get the income certificate made. The income certificate is not being made due to demand for money and even in

Pragya Kendra they try to take 200 to 300 rupees for application. Similarly they ask for money at the block level. Income certificate is essential support. But they are facing lot of problem in getting it made. Until now only 17 Income Certificates have been made which have been submitted. The officials do not oblige and are evasive. On an average they have to run for 10 to 15 days in the block but they say that they would keep on pending. Most of the children here are rag pickers and they work in coal mine and earn upto 200 to 300 rupees.

As such, it can be seen that the general perception in Dhanbad of the government's implementation of Foster care and sponsorship was quite negative and respondents were visibly frustrated. This frustration stemmed from inadequacies and long wait times for the processing of documents related to sponsorship and foster care. In addition, it was perceived that the DCPU was apathetic in carrying out its duties. It is also important to note the issues surrounding the income certificate. The processing of getting the document is viewed as cumbersome and impeded the implementation of the scheme. This sentiment has been stated before and will continue to be a facet of these interviews.

Key Findings by District:

D. Bero

Background:

Three discrete interviews were conducted in Bero on 23/04/19. The first two interviews were focus group interviews consisting of respondents who were key stakeholders and kinship carers. They included members of CSS, members of the Panchayat Samiti, village Pradhan and Mukhiya. The first and second interviews were conducted in Jaria Panchayat. The third interview was conducted with children in kinship care and the fourth interview was an one-on-one with a kinship care mother. The respondents were selected with the support of Chotanagpur Sanskritik Sangh (CSS) who is a Task Force Member organization. The first interview was conducted in Jaria Panchayat

According to the data collected in the interviews, there was no children receiving sponsorship in the area and no children in formal foster care settings.



Interview with members of CSS

Some important dynamics to mention in this area that are related to child protection include; Migration patterns and child marriage/ elopement

Concerning migration, unlike previous districts, respondents asserted that children generally migrate with their parents for work. This was viewed as a challenge because it disrupted the child's education. A respondent stated " Children migrate along with the parents which hampers their growth both physically and mentally as they are unable to avail the facilities of AWC

and primary education."

Child marriage was viewed as being on the decline in the community, however, elopement was quite common.

CSS provides support to 40 families and 100 children from 24 villages in Bero.

1. Perceptions of Family based care:

Perceptions of family based care was generally positive in this district and viewed as the initial intervention. For example, it was stated in the first interview by a respondent that “Family members like Nana-Nana, Dada-Dadi, and other relatives take care of such children at their own level.” In instances where no direct relatives were available, it was stated “If these children don’t have no grandparents, uncles or aunts, etc, some or the other relatives generally look after them” and that in instances where no relative can be identified then adoption is sought. The respondent stated “if anybody does not have children they they adopt them[the children] as in the case of the girl whose parents had died in fire and she was adopted by a co-village.” The respondent continued that both these practices were common prior to the introduction of the Guidelines, “Earlier there were no guidelines or official rules to be followed like presentation of child before CWC etc.” This showcases that family based care was viewed as the first intervention and was commonly practiced in the district with little or no hesitancy.

It is also important to note that in the first interview, it was stated that extra support was given to children who have older kinship caregivers by CSS and older children in these arrangements were given skill development training in order help support the family. The respondent stated “ The selected families have been provided some means of livelihood to take proper care of children who have been staying with them and also initiated some skill development to elder children so that they can earn if their grandparents are old.” As such, this intervention is a possible solution to issues described in previously districts where the sustainability of kinship care was questioned.

In the second interview, a unique description of family based care was explained where the community was gathered to determine the care arrangement for children and then relatives would claim responsibility for the children. The respondent stated “...Gram Sabha takes the decision and somebody or the other from the family takes responsibility and takes of the child in need.” This worked, however it was mentioned that generally families were more quick to offer care to boys than girls. It was stated by the respondent that “the families did not have problem keeping the boys but to keep the girls is a difficult proposition and defined it risky as many aspects were involved.” This is important to mention because it showcases possible gender differences in the type of care provided or possible insight into the ways in which kinship caregivers give care or provide care to different children.

As such, Family based care was viewed positively in the district with a plethora of examples mentioned. In addition, solutions were described to address the economic marginalization of family based caregivers especially in the context of older caregivers. A gendered difference in the willingness of family based

caregivers to provide care was mentioned and only mentioned in this district. This is an important dynamic that should be explored further.

2. Perceptions of foster care

In Bero, Foster care was viewed positively and as a cultural cognizant form of care though the line between foster care and kinship care seemed to be semi fluid in respondents' descriptions. For example, during the interview with the DCPU, it was stated that the foster program and the right to a family are a repackaging or a new take on an older system related to the joint family. The respondent stated

Foster care program has been initiated because it is presumed that a family is very essential for up bringing a child and it is their right. It is not that this is a new concept. Today we are living in a nuclear family but there used to be a culture of joint family earlier and somebody or the other took care of the child. This has been prevalent in our society since long and a child was everybody child in the family. This new phenomenon is just a revival of the old tradition and culture which had been prevalent existing in our society.

The respondent continued by stating that “There are some children who are being looked by the community in absence of their parents. It will take some time to revise these rituals.” As such, foster care was viewed a positive care arrangement that has a basis in traditional practices though there is some ambiguity in the first quote as to if the respondent is focusing on foster care or kinship care. Other respondents expressed that foster care was viable but that it required certain factors in order to work. For example, the respondent stated “ Only if somebody has the willingness, benevolence and wants to take the responsibility of other children they can do it otherwise it is very difficult to take the responsibility of other’s children.” This quote captures the idea that foster is a tenable solution in the district but acknowledges that there is some inherent challenges related to the provision of care for “other’s children.”

Even though foster care was viewed as a positive care arrangement, respondents from the first interview were quick to point that no foster families had yet been identified. It was stated “...no such family has been identified till now who would come forward to foster care a child.” This quote showcases that there has to be more discussion surrounding foster care as well as even though perceptions of foster care seemed to be positive this has not directly translated to the uptake of the care arrangement. However, this is complicated by case studies from the field that described a care situation that seemed to be between fostering and adoption. It is presented below;

Case Study 1

ACC child, Srishti Kumari, Age 4 years - She is living in a foster family near CHC Bero Hospital. Her biological parents were not able to look after her. Currently, the girl is studying in school and the foster family takes care of her quite well. When her mother was not able to take care of her and abandoned her then this family came forward to take care of the child and the mother

Anju Kacchap, the mother who has adopted her worked in a hospital during the time she was born. Her real mother was very poor and worked as a migrant laborer in a brick kiln and was in very bad shape during the time of delivery. She was very poor and did not have any family support. The mother was not

in a position to take care of child and wanted to abandon her. As nobody was there to take care of the child the mother handed over the child to Anju Kacchap. She has taken care of the children since then. Anju has three children of her own, two boys and one girl ages, 18 year, 14, and 15 respectively. After 2 and half years, the real mother came back for child and took the child away for 4 days. But Shristi used to cry a lot and wanted to come back to Anju.

A meeting was held and keeping the welfare of Shristi in mind the Gram Sabha, villagers and the relatives of the child and other community members handed over the child to Anju. Both the parties approved and came to a compromise through mutual understanding and the bond paper was also signed. The child was presented before the CWC and the child was allowed to stay with them. Relatives come to visit the child regularly. Before adopting her, Anju had talked to her family members and they approved of her caring for the child. Even Anju's sister is willing to adopt any such child if she comes across one through the legal process.

Shristi is happy in her new home and goes to a Convent Public School and she is quite good in studies. The family takes proper care of her.

Case study 2

In a similar situation, a girl was orphaned when her parents died in a fire in Katarmali village. One Shukra Oraon who did not have any children was perturbed by seeing her condition. The Mukhiya who used to run the Anganwadi Centre that time felt sorry for the girl and suggested Shukra to care for her and so he started taking care of her in all his capacity and now the girl is 17 year old and studies in a School.

In each of these cases, fostering or at least non blood related kinship care was conducted. In the first instance, the process transitioned from an informal to a formal care situation whereas in the second situation, the care arrangement was not formalized through the usual channels but was still sanctioned by an authority figure. This shows that no foster families have been formally identified, however, there are people engaging in foster like care arrangements and once identified can be brought into the formal processes.

As such, foster care was generally viewed positively by the respondents interviewed with a few caveats related to the challenges of caring for other's children. In this district, respondents also mentioned that no foster families had yet been identified. However, there were cases of community members caring for other's children with varying degrees of formalization. Thus, it seems likely that foster families can be identified and that it may make sense to target these community caregivers and bring them into the fold.

3. Perceptions of institutional care:

Perceptions of institutional care had high variations in this district. On one hand, institutional care was viewed negatively and ineffective. For example, a respondent in the first interview stated that “ Even though institutional care is there but it is not much effective.” However, further along in the interview, the respondent (who was a member of CSS) stated that VLCPC members had pushed for institutional care but keeping with the ethos of the organization they view it as a last resort. The respondent stated “There has been suggestion on behalf of the Prakhand Pramukh and VLCPC members for Institutional care but since the organisation is working on family best care therefore institutional care should be the last option. They can opt for family foster care or group Foster care.” As such, there seemed to be a push for placing children in institutional care in some of the villages so there was some positive view of this care

arrangement though CSS pushed back on this. In addition, during the interview with families, some stated that institutional care was beneficial but only compared to parentless care situation . They viewed it as a last resort. A respondent stated “That Institutional care is better for the development of the child if there is no one in the family, community or foster to take personal care of them. There they will have at least a balanced life and the State will be responsible for their welfare.”

As such, perceptions of institutional care were varied. In some instances, respondents viewed it as ineffective, in other instances it was something that was demanded by members involved in child protection and care, and in other instances it was viewed as a last resort but still tenable care arrangement.

4. Stakeholder understanding of the ACC Process

Stakeholder understanding of the ACC process was generally good, concerning sponsorship. It was stated in interviews that meetings were conducted on the different care arrangements, conceptualized as kinship care, foster care, and sponsorship, however there was still a lack of understanding. Key stakeholders were able to explain documentation needed for the sponsorship scheme along with the income requirements and the amount given to care givers. In one instance there seem to be confusion surrounding group and family based foster care. The respondents stated that “In foster care, family can keep up to five children which are known as group foster care”. This is not an accurate description since family based foster care is limited to four children including biological children per family whereas group foster care is placement in a family like setting with generally less than 8 children in the care setting.

Stakeholders seemed to be most familiar with the requirements of sponsorship but the nuances and details of foster care were more limited.

5. Perceptions of children in need of care

Perceptions of children in need of care followed a similar pattern in other districts where the children were viewed sympathetically and victims of their circumstances. In one interview, a respondent stated “The children are misguided due to lack of proper care and many a times run away.” and that “If they[children] could be provided some support and tuition it would be of great help to the children...” In addition, children in kinship care were interviewed and one respondent stated “In case, the children do In case the children do not have any support the community should take initiative and provide support through some contribution. They can help in the marriage, their studies and could provide their families some support. The relatives should take proper care of such children.”

Overall, perceptions of children in need of care were generally sympathetic and negative or antisocial behavior was not mentioned in describing children in need of care.

6. Perceptions of parents of children in need of care

Perceptions of parents of children in need of care were somewhat sympathetic. Parents were still described as engaging in parenting behaviors that were negative. However, these behaviors were

explained by lack of knowledge and that some of these behaviors develop from the parents preoccupation with work. For example, a respondent stated that

Guardians are busy in their work and agriculture therefore they might not provide time to the children which results in loneliness among children. Besides they lack information regarding taking proper care and upbringing of children. The children do not listen. The family insists for financial support but personal care of the child is also important.

In addition, the precarious situation of single mothers was touched upon in this district and their situation was described sympathetically. It was stated that “if she[single mothers] has land then it is alright otherwise if she is working outside then it is difficult for her to take proper care of her children.” This was further elaborated when a respondent in the same interview discussed that single working mothers who have girl children are in a very precarious situation because “There are many anti social elements who take this as an opportunity to waylay these innocent girls[girl children] on the pretext of marriage and they elope along with the girl.” Finally, one respondent stated that overall “some of the families do take care of their children.”

Taken as a whole, perceptions of parents of children in need of care was somewhat sympathetic to the plights of the parents. Parents were still described as engaging in negative parenting behaviors but they were not described as doing this maliciously and they were not described as taking part in behaviors such as abuse or substance abuse. Respondents tried to conceptualize why parents might be providing the care that they are which was explained as ignorance and just the preoccupation with work in order to survive. Single mothers were singled out and described in a more sympathetic tone than the general population and their struggle to both provide care and have a livelihood at the same time was touched upon.

7. Perceptions of NGOs in regards to ACC

Perceptions of NGOs in regards to ACC were positive. CSS was viewed as providing tremendous support to the community. In the second interview, respondents stated that CSS “has been working with these categories of children and other forms of child protection in the community like ACC and Handicapped children even before the initiation of the Foster care and sponsorship program.” and respondents who were parents stated that “only CSS is helping them and no other organisations. They have been providing support to 100 children from 40 families. There is no government organisation.” However, respondents in the second interview were also keen to point that though NGOs play a prominent role, ultimately, responsibility is with the government and they should work in tandem with each other. The respondent stated “The organisation should help but basically it should be the Government's responsibility because if the NGO is not there after the project ends then the future of these supported children would be jeopardised thus the Government should take over and support should continue for them.”

As such, NGOs were deemed to play an important role in regards to the implementation of ACC and CSS's efforts were highly praised by the communities in which they worked in. However, respondents viewed that ultimately the government should be main structure accountable for the implementation and

development of programs related to ACC because they have continuous funds to make the intuitions long lasting. It should also be noted the CSS was waiting for the renewal of funding for their ACC project as such, this could have influenced respondents responses.

8. Perceptions of the government in regards to ACC

In Bero, it was much harder to ascertain the perception of the government in regards to ACC.

Respondents were not as critical as in other localities about the implementation of the ACC program through the government, however, as described above in section 7, it seemed like CSS was the main contact point for families and provided most of the support. As again discussed in section 7, respondents viewed that NGOs and the government needed to work together to implement programs and that the government should be the main driver and supporter of these programs.

E. Giridih

Background

We conducted 4 interviews in Giridih on 24/4/19 with the assistance of the Task Force Member Jago Foundation. Two group interviews were conducted in different locations (Chaitadih Mohalla and Simra Dabh Village, Karanpura_ The first with female members of a micro-finance group and the second with community members. In-depth interviews were conducted with a member of Childline in the same location as the second group interview and a member of the DCPU in their office.

The first two group interviews were somewhat challenging. In the first interview, we conducted our questioning during/directly after a meeting of the microfinance group. Understandably, they were more engaged with completing their meeting than answering our questions. It is also interesting to note that in the first interview, participants stated there were no issues related to children in their locality and were quite adamant about it. For example, Respondents stated

There was no such issue related to children, no rag pickers in and community and no such children over here. All the children go to school and no such All the children go to school and no such issues related to children. Even the families which used to send their children to work as coal pickers have stopped doing that and now educate their children.

However, Jago Foundation, was quick to rectify that this was not the case. The respondents could have responded this way for a variety of reasons ranging from indifference especially considering that they were engaged in other work while the interview was conducted or even distrust of the study group.

In the second interview, there was a large community gathering and interest in what we were doing but participation was low partially because of the amount of people present. People were interested in seeing the meeting but not particularly interested in participating in the questioning. In addition, there was some level of distrust present. For example, the Panchayat leader was even very reluctant to initially speak to us

because “a lot of people came and took information but nothing has been done for the children by anybody and no support has been provided at all. “

In addition, it was challenging to interview key stakeholders because of the parliamentary elections that were occurring surrounding the time of our study. However, we were still able to meet with a member of the DCPU who provided robust and enriching answers.

None of the children in Simra Dabh village were receiving sponsorship. However, the member of childlike stated that a home study report had been done on 99 to 100 children and that of those 35 have been forwarded for sponsorship though they had yet to receive it. These children were from “Bengabad Block, Badhwara panchayat, Golgon village, Peparwa tand, Telodih village, Moosmunda, and Grande Bazar, etc.”

Additionally, child labour, child marriage and prevalence of children with handicaps were mentioned in this district

1. Perceptions of Family based care

There was an overtly apathetic tone throughout the group interviews in Giridih concerning all forms of care. However, family based care was viewed as a more positive care arrangement. For example, in the first interview, respondents stated that “children will definitely have a better care if they stay in the family.” However, the viability of family based care was viewed tenuously because of the continued economic marginalization of people in the community and the disintegration of social structures. For example, in the second interview, a respondent stated “ There are poor families who work in field and mines so how can they feed their large family and children.” This quote speaks to the economic marginalization that people in the community face and how it might to be challenging for families to provide support for additional children without economic support. Similar sentiments were expressed in the fourth interview with the member of the DCPU. However, this respondent focused on the disintegration of social structures related to economic marginalization. The respondent was also clear that these support networks haven’t completely dissolved and are still present in the village. The respondent stated

This concept[alternative care] was in practice even earlier when the extended family, like Grandparents, Chacha, Mama etc. took care of children in the extended family as their own. This base was there but disintegrated somewhere during the process of development but still some residue of it could be found in the present scenario in close knit community and supportive family members. Our base is there and this feeling is still strong at the village level and they come forward to help and support children in case of need. Nobody wants that their relative or child should go to institutional home if they are orphan. But we are not able to popularise it. These systems of care and support have started disintegrating because of the not being financially strong and disintegrating social structure.

The respondent also made it clear that the policy of the DCPU is when dealing with orphaned children is to provide family based care and possibly adoption. The respondent stated “ If there are any orphan

children they try to put them in family support and if they are unable to do so they send the children to SAA for adoption through CWC.

As such, family based care was viewed positively as a care option but similarly to other districts, a disintegration of social structures and economic marginalization has weakened the ability for families to provide this type of care.

2. Perceptions of foster care:

Given the lower response rate in the district, foster care was not discussed as often as either kinship care or institutional care. However, some community perceptions were able to be ascertained. Generally, foster care was viewed positively and as part of a cultural cognizant care system along with kinship care. For example, the respondent during the DCPU interview stated “ This concept of foster care, kinship care, alternative child care is not new here and imbibed in the culture and tradition since centuries and was also prevalent in the mythological history of India.” However, it has been a challenge to actually implement it with the respondent stating “Foster Families have not been identified yet.” The respondent gave two broad reasons for why the implementation of foster care was a challenge. The first was that it was challenging for foster parents and even adopting parents to adjust to the patterns of the new foster children and vice versa. The respondent stated “

It is seen that orphan are not treated properly as compared to own children in a foster care or by the adopting family. It is a challenge to find a Foster family since families and children are not able to mould themselves in accordance with each other. Either the children are not acceptable in the family or do not adjust amicably in the family. For example a woman had adopted a girl child in Bokaro but after 6 months they are not ready to stay together. It all depends on the behaviour of both the parties.

The second issue was related to the requirements to become a foster parent. The respondent stated “And if the family wants to keep these children then they have to go through a lot of process like health checkup, residential certificate, income certificate etc therefore they are reluctant to keep children with themselves in Foster care.” However, even given these challenges, the respondent was hopeful that the foster program would continue to function with a few changes. For example, the respondent stated “The DCPU said that results have not been up to the expectations but the attempt is on to improve things. He said that they are in the process of identifying the sponsors, and the foster families. They want families which have strong family and financial support and don't withdraw if the sponsorship or support is delayed.”

Though not directly related to foster care, one respondent in the first meeting discussed how it was challenging for step children to be accepted in a family. The respondent stated “ It is obvious that people with step children will not take care of them as they would prefer looking after their own children.” This illustrates one of the possible roadblocks to the implementation of foster care because if there is a wide

spread difference in care between stepchildren and non-step children in a family then it can be inferred that this difference in care might also occur between biological children and foster children in a family. Statements from other districts support this possibility.

Overall, Foster care was viewed as one of many culturally cognizant forms of care and in a positive light at least from policy implementers. However, issues surrounding parent-child compatibility, supposed stringent criteria for foster parents, and differences in care between foster and non-foster children were possible roadblocks to the expansion of the model.

3. Perceptions of institutional care:

Institutional care was viewed positively and it seemed like this was the form of care that community members were most familiar with. In the first meeting, respondents once again mentioned the Kasturba School and explicitly linked it to a care giving arrangement. It was interesting because a case study explored the relationship between residential schooling and care.

Case Study 1

In Bengabad, in Bhalkudar village there are 5 sisters. Their father had died and they are staying with their maternal uncle. Two of these sisters were presented before CWC and they were admitted to the Kasturba School. They are very good in their studies and their maternal uncle supports them. The rest of the siblings are studying in the government school and are provided rice as a ration with the rest of the support provided by their maternal uncle.

In this case study, the five sisters have different care arrangements with two attending and staying at a Kasturba School while receiving support from their maternal uncle and the other three sisters residing with their maternal uncle and attending government schools.

In addition, it was stated that boys in the community do not have a similar residential option available. The respondent stated “ There is a Kasturba School in Chaitadih for the girls but for boys who are [in] need of care and support, there is no such facility and the boy who do not have means to study work in garage or elsewhere.” The respondent continued “Had the Government provided any facility, home or Institutional care these boys wouldn’t have wandered.” This links residential school as one form of care and a type of care that was viewed positively by respondents because it could have ensured that boys continued their schooling.

The respondent in the fourth interview explained that two residential schools for tribal boys were found in the district though the respondent did not comment on the quality of care

In the third interview, the respondents explained how institutional care is monitored by members of Childline and implied that they provide adequate care "...children in the child care institute get satisfactory food. They[Childline member] regularly visited them and conducted open house programs with the children freely discussed about their problems related to various issues ranging from home to the schools."

As such, institutional care carried less negative connotations and was viewed as one way to provide support to children in need of care and protection

4. Stakeholder understanding of the ACC Process

Again, stakeholder interactions were less prominent in this district and it is hard to ascertain actual stakeholder understanding of the ACC process. However, respondents were able to explain the sponsorship scheme, identify the amount of money given to caretakers, and the income requirements. The DCPU respondent had a robust understanding of both sponsorship and the foster care guidelines.

5. Perceptions of children in need of care

Perceptions of children in need of care was hard to identify given the limited interactions. Children in need of care and protection It was stated that "Handicapped children are there[in the community] and there are some who does not have either of the parents and face difficulty in food, education, etc.... there are many difficulties which the children face." It was also mentioned that "there is lots of child labor in the Mica mining and also in the hotel sector". As such, it can be stated that children in need of care and protection were viewed as in the majority in the community given the context. Children were not described as engaging in negative behaviors and there was a general sympathetic overtone to the plight of children in need of care. That being said, the interactions were too limited to gauge the community's actual perceptions.

6. Perceptions of parents of children in need of care

Similar to the other categories in this district, perceptions of parents of children in need of care was hard to determine based on the data collected. There was one reference to parents which was overtly negative in that a respondent stated that parents actively discourage their children from attending school and instead would want them to engage in child labour. The respondent stated "Even their family's promote child labour and say that if the child will study what would they get whereas if they will work they will get money which would help them financially." As such, there seemed to be a negative perception of parents in the community but no conclusive statements can be made given the limited responses.

7. Perceptions of NGOs in regards to ACC

Respondents did not discuss the role of NGOs thus community perceptions on this topic can not be discussed.

8. Perceptions of the government in regards to ACC

In regards, to respondent perceptions of the government. Respondents in this district expressed frustration with the government in regards to the documents required for sponsorship. One respondent stated their are "problems faced in in making the Residential and Income and other documents. They are not able to

process it. It was said that if the process is smoothened then it would be of great help. People said that there are many cases here but people are facing problem in filling and submitting the format.” In addition, a respondent mentioned that in Odisha, a BPL card functions as a proof of income and this could be an alternative to the income certificate but “this understanding and perception is not in Jharkhand.” The DCPU addressed the delays in sponsorship processing by stating that “ many of the forms which have been submitted were incomplete.” and additionally that “stringent rules have been formed and the documents are minutely scrutinized so that the deliverables reach the genuine people and those with influence or better means do not take under advantage.”

Additionally, respondents expresses concern about the functionality of the VLCPC. It was stated that “The VLCPC is formed on paper but not active. Training has not been given on functioning, formats and filling the register and no regular meetings are held”.

As such, though this district had little responses to draw upon in order to evaluate perceptions of government, issues concerning the income certificate were once again brought up as well as issues pertaining to the functioning of the VLCPC.

Key Findings by District:

F. Khuti

Background:

We conducted 5 interviews in Khuti on 25/4/19 with the assistance of the Task Force member CINI. Two group interviews were conducted with members of the community including VLCPC members, Mahila Mandal, Anganwadi workers, Swasthya Sahaiya, and members of CINI.



Two focus group interviews conducted in Khuti

The individual interviews were conducted with a VLCPC secretary, a member of the DCPU, and a member of CINI. The group interviews were held in two different panchayats located in Murhu block, Khunti district.

1. Perceptions of Family based care:

Similar to other districts, family based care was viewed as the best option for children. It was stated that “if the children stay outside then they will be treated like a bonded labour but if they stay in the village with the family and community members they get the love and care and they will also learn the social culture and behavioral aspect besides education and other support.” This details once again that family based care is viewed as providing a more stable environment for children to develop in while giving them an opportunity to retain and learn about their cultural traditions. Also, unique to our discussions in this district was the description of group family based care conducted in the area. For example, one stakeholder explained how her uncle has been caring for 13 children in the village. He provides food and lodging free of cost and even supplements their education. Two other stakeholders in the first interview explained positive examples of kinship care. For example, one respondent explained that her father in law is caring for two young children of a relative who passed away. Another respondent explained that her father in law’s brother had 9 children and that none of them were receiving care and affection from their parents. As such, she and her family began caring for three of the children.

2. Perceptions of foster care:

Perceptions of foster care were varied and reflected similar views found in the other districts. On one hand, in an interview with the secretary of a VLCPC, the respondent viewed both foster care and sponsorship positively and stated that currently it has not been adopted but with more support and positive examples of it working then the community would buy into the program The respondent stated

Though People in her Village have being provided information about the foster care and sponsorship program by her but not much has been conceived as this program has not been implemented properly and people have not started getting benefits and support for this program. Once the process starts taking concrete shape and starts giving results it would gain trust and people would start responding and volunteer for Foster care or provide support in Alternative Child Care.

Training has been held in Murhu and the VLCPC member said that they have received training on sponsorship but it has not been disseminated much. She said that even if one family starts getting the support others will come to know of it and have trust in the scheme.

This positive view of foster care was continued in other discussions For example, one of the respondents stated that foster care would be an option but only “if there is no one to support the child in the village then the need is to select such families who can come forward and look after the children.”

On the other hand, respondents stated that ‘there are very few people in the society who would come forward to take care of other’s children.’

As such, foster care was viewed a possible and tenable care situation but only after it was demonstrated to work. Once that hurdle was crossed, some respondents were positive that that would increase community buy in. However, other respondents were more skeptical that people would willing care for other's children.

3. Perceptions of institutional care:

The hierarchy between family based care, foster care, and institutional care was somewhat ambiguous. Generally, institutional care was viewed as a last resort, however this is a new shift. Previously, a respondent stated "Earlier when there was nobody to look after a children they were sent to orphanage" and that "Many children are there whose parents are not capable to look after them or have left them or have migrated to work." This is in contrast to now where institutional care was viewed as a last resort.. It was stated that children who grow up in CCI's have different characteristics than children raised in a family or family like environment. In addition, a respondent explained that if there was no caregiver then institutional care could be an option but only as a last resort. The respondent stated "But in case there is no one at home to look after the child for their proper upbringing and care...Institutional home is better if there is any issue in keeping the child"

An interesting dynamic that was touched by multiple respondents was that many children in institutional care have parents or family members available to care for them but this is only revealed after a series of counseling sessions. For example, in our interview with a respondent from the DCPU, the respondent stated

It is seen that many of the children living in institutional care have family of their own. They are trying that those children should be shifted in their family atmosphere. Therefore after providing them temporary short stay shelter they analyse and provide counselling from time to time after which they open up and disclose about their family. Initially the children in the Institutional care were reluctant to discuss about their family and would not disclose their name since they elope with pre-plan intention. After counselling they gain confidence and open up and disclose the reason of their elopement.

As such, institutional care was viewed as a last resort by the respondents interviewed. However, it seems that institutional care is not practiced as a last resort by parents.

4. Stakeholders understanding of the ACC process

The stakeholders had a good understanding of the foster care and sponsorship guidelines and they had trainings done by NGOs at the village level concerning these guidelines. CINI produced pictorial flip books with text in Hindi for VLCPC members to use to explain both sponsorship and foster care. There were some mistakes however concerning the sponsorship guidelines. The DCPU mentioned how each district is allowed 10 lakhs for sponsorship and that only 40 children can thus be sponsored. However, the sponsorship rate is 2000 INR a month as such up to 50 children could be sponsored. The DCPU mentioned that no children were receiving sponsorship under the scheme yet however six children were finalized and will received sponsorship after a few additional documents are included. The DCPU

stressed that this process is long in order to ensure that the most needy of society are able to avail themselves of the scheme and that it doesn't go to other people. Adoption models were also accurately explained.

5. Perceptions of children in need of care:

Children who were in need of care were again viewed with a sense of pity and as victims of their circumstances i.e due to lack of familial or societal support. However, in this district, children in need of care and protection were more likely to be described as engaging in negative behaviors such as not attending school and having substance abuse problems stemming from their lack of guidance and support. For example, it was stated by a respondent that “The children are neglected and some of them abstain from going to school and also indulge in substance abuse and alcoholism.” and another respondent stated “...children with no proper family support tend to become addicted of substance abuse since there is no guardianship.” This lack of societal support was explained further by a respondent who stated

Children need guidance and somebody to show them the right way but there is no atmosphere for study. Children who are adolescence and teenagers do not listen to the elders in the family and tend to lead a life of their own as there is no one to properly guide them of the correct path. They get misguided and make mistakes. There is no one to show them the right path and they have no willingness to be stable in life. They have no source of income and are leading a life anyhow.

As discussed in the respondent's quote, this is the first time where children in need of care and protection are described as being adolescents and teenagers who don't listen to familial elders. This was a new dynamic as in previous districts most of the perceptions concern younger children. However, it continues the trend that blame is not particularly placed on the children for their actions but that because of the lack of societal support they act in antisocial ways. In addition, concerning school attendance, respondents stated that there was a gendered difference, “The girls go to school diligently but the boys do not go to High School (at Gambharia) for higher studies and tend to drop out after class 8. There is peer influence and other boys also tend to drop out.” Thus it seemed that respondents viewed boys in need of care as more susceptible to peer pressure and more likely to engage in negative behaviors.

6. Perceptions of parents of children in need of care

Perceptions of parents of children in need of care were generally viewed very negatively with parents viewed as engaging in substance abuse, not providing adequate care to their children, and being negligent. For example, in the first interview, a respondent started that “Parents do not take much care of the children and there is substance abuse in the society on a large scale. The children are neglected...” In the second interview, a respondent collaborated this opinion by stating “Very few families pay care and children also get inspired get influenced by wrong cultural practices prevalent in the society” and that “children are malnourished as some of the mothers do not take proper care of their children and do not take them to healthcare centers for proper check-ups.”

When discussing with the DCPU respondent, the respondent once again reiterated these negative parenting practices, however, this respondent tried to conceptualize why families may be engaging in these behaviors. The respondent stated “

Khunti is a tribal belt and most of the families are single-family. It is found specially in the tribal culture that the male members do not do any work and women indulge in major household responsibilities therefore the children are neglected because of these social norms and culture. The[y] (families) move out to big cities and get trapped. General Social scenario are big family, poverty, lack of awareness, substance abuse, culture and other social factors because of which they[children] migrate, elope or become child labour. Even though there is awareness and education but due to traditions, poverty, and peer pressure the children also get influenced..

As such, this quote describes the interconnected problems of migration, single parenthood, and poverty interspersed with assumptions of social norms and practices which limit the parents abilities to provide care to their children. This response functions as a possible explanation why parents may be engaging in parenting practices that have negative consequences and though it makes some assumptions about tribal culture, it is a softer perception of parents of children in need of care. This is in stark contrast to other respondents who seemed to not differentiate between the parents and the practices resulting in the general negative perception of parents of children in need of care. This is an important attitude to unpack because one of the key components of foster/kinship care, as outlined in the guidelines is the reunification of the family. At least, in Khuti, it seems that reunification may be challenging because of the perceptions of these parents.

7. Perceptions of NGOs in regards to ACC

The role that NGOS play in regards to ACC was not discussed prominently among various respondents. However, during the interview with the DCPU, it was mentioned that NGOs play an important part in providing on the ground information to the DCPU and other implementing bodies. The respondent stated that “they[the DCPU] do not have much interaction with the community therefore they are dependent on the VLCPC and NGOs working at the local community level.”

8. Perceptions of the government in regards to ACC

The perception of the government in regards to ACC was actually much more positive than in other districts visited. Once again, the issue of the income certification was brought up along with long processing times. A respondent stated that

that there are hurdles in completing the paperwork. Families of children in need do not have proper income certificate especially those from the agricultural background. They need to have the receipt of the khatiyani from the agricultural field and face problem to get income certificate. They also need residential certificates

The DCPU in this district responded that “ government mechanism has to work very cautiously so that the funds should be properly utilised and only those children should be provided help who are genuinely in need of absolute care and support. They have a very critical role and their responsibilities increases. It

takes time to process things. " The DCPU also explained that there were issues with creating community buy in which hindered the implementation of programs. The respondent stated

The demographic structure of the community in Khunti consists of tribal population like Munda, Oraon etc, with more or less similar culture and belief. They do not want much intervention from others. Therefore the state has to decide upon how to bring in development other interventions based on their needs, behaviour and traditions. Effort is being done at every stage and many changes could be seen. Now they are working on a larger scale and extensively in the deep pockets of the society and are providing help for convergence of various departments. Earlier there were some political unrest and disorder and disobey at the community level in Khunti but now they understand the significance of the government support. They are taking the benefits provided by the government.

Conclusion:

Similarly, to the key findings, the conclusion will be summarized in respect to the 8 outlined topics.

1. Perceptions of family based care

Overall, family based care was viewed positively and perceived as a culturally cognizant form of care which provided love, support, and opportunities for growth. A family based care environment was viewed generally as the best environment to raise a child. However, there were challenges in the current implementation of family based care that were expressed and must be taken into account. These include increasing kinship caregivers access to financial strengthening through IGA, sponsorship, and other methods. Also the development and support of parenting skills for kinship caregivers including sensitization and trainings to increase their abilities to provide care for children in alternative care. In addition, family strengthening programs should be implemented as well as increasing the social connections of caregivers in order to combat the degradation of social structures. Family based care was viewed as the most implementable model for alternative care and the model in which respondents were the most comfortable explaining. That being said, more oversight and support of this care arrangement would allow it to function more effectively and ensure the rights of all children, caregivers, and parents are protected.

2. Perceptions of foster care:

Perceptions of foster care varied throughout the districts. Of the three types of care discussed, foster care was the least familiar to the respondents (with the exceptions of implementing bodies such as the CWCs and the DCPUs). There were two main trains of thought when it came to foster care. The first was that foster care would be a tenable solution but was not implementable in its current form. According to this train of thought, once positive examples of foster care were implemented and the communities were sensitized to it and understood foster care then it would be adopted as a practice. Respondents of this train of thought mentioned that there were examples of caregivers caring for children that were not related to them. The other train of thought was that foster care would not be tenable because the concept was foreign to many of the communities and that it would take significant shifts for people to care for children that were unrelated to them. As such, it seems that foster care implementation may be best saved for the future in Jharkhand with work focusing on building the groundwork for its later implementation (i.e

sensitization of the community and key stakeholders, system strengthening in regards to the CWC and DCPU).

3. Perceptions of Institutional Care

Perceptions of institutional care were mixed. Though there was a general negative towards institutional care with respondents viewing it as detrimental to the development of a child and only viable as a last resort, it can not be whole discounted as a form of care. There were three major instances where institutional care was viewed positively. The first is in the context of the residential schools which function ambiguously as institutional care for children without parental care. Respondents did point out that caregivers, relatives, and even members of the community supported children in residential school but it was ambiguous as to what degree they did so and if students in residential schools periodically resided with these caregivers, relatives, or members of the community or if they merely played a more distance supportive role. The second instance where institutional care was viewed positively was in the context of short and long term shelter homes. This was especially prevalent in Dhanbad which viewed institutional care as a viable option because of the migratory nature of the community which meant that many times children did not have relatives or kin in the community to care for them and the immense socio-economic marginalization which left children with very few suitable caregivers. As such, these homes would provide them a somewhat stable and supportive environment to grow up in. The third instance relates to the second in that institutional care was viewed positively when the social and community ties were viewed as being weak. In these instances, family based care was viewed as sporadic with the quality of care provided varying from family to family. In contrast, some respondents viewed institutional care as static and uniform. As such, it was viewed as a more safe and secure form of care than family or foster care. Going forward, understanding the role that institutional care plays in different communities and the nuances in how it is implemented will allow alternative care methods to be designed to address the variety of community needs while still ensuring that institutional care is a last resort.

4. Stakeholders understanding of the ACC process

Key stakeholders generally had a good understanding of the ACC process especially in regards to sponsorship and the needed documents/process in order to enable sponsorship. The details of foster care as expressed in the Jharkhand State Guidelines were generally known to key stakeholders though there was some misinformation in regards to the number of children that took be cared for in a foster setting. In addition, there was some confusion surrounding family and group foster care. However, overall, it seemed that members of the CWCs and DPCUs interviewed had a good grasp of the Guidelines as well as an understanding of what was happening at the ground level.

5. Perceptions of children without parental care

Children without parental care were generally described as victims of their circumstances in which they did not have a supportive home environment or the support of society and as such, they were easily

mislead or lead astray. These children were viewed with pity by respondents but they were also described as engaging in anti-social behavior such as not attending school and engaging in substance abuse. There was also an assumption that these children would have a harder time assimilating into mainstream society and face stigmatization and alienation. This only furthered their anti-social behavior. That being said, overall, children without parental care were viewed with pity and that they were deserving of help and support.

6. Perceptions of parents of children in need of care

Perceptions of parents of children in need of care were mostly negative with these parents viewed as negligent in their caregiving. Many respondents viewed these parents as engaging in substance abuse and ignorant or unaware of proper ways to care for their children. However, there were instances where respondents used less harsh terms to describe these parents and instead attempted to understand the marginalization and struggles which could have caused parents to act in ways that may not be beneficial to their children. Overall though, there was a negative perception of parents of children in need of care.

7. Perceptions of NGOS

NGOs were viewed positively by respondents as playing an important role in implementing alternative forms of childcare. In addition, the supplemental work that NGOs played in training, sensitization, and the provision of family support (economically, materially, etc) was viewed with a sense of gratitude from the respondents. Respondents believed that NGOs should be involved in the ACC process and that they should work with and support the Government in order to ensure the long term stability of the program.

8. Perceptions of the Government

Perceptions of the Government varied with most respondents in the districts surveyed stressing the importance of government programs and schemes and expressing gratitude for their existence. However, they were more vocal about the lack of implementation or even the slow implementation of many government programs and schemes. For example, in every district surveyed, respondents viewed the lack of the implementation of sponsorship negatively. They expressed frustration surrounding the procurement of the income certificate and viewed the process as overly complicated. There was also a sense of frustration at the disconnect between different bodies of child protection and there was a sense that more training needed to be done in order to ensure the proper functioning of these institutions.