

INDIA ALTERNATIVE CARE NETWORK NEWSLETTER

Our Mission

Facilitating the exchange of learning, dissemination of knowledge and formation of partnerships on the issues related to children without parental care or who are at risk of being separated, to inform better policy and practice.

About IACN

IACN is a collective dedicated to the spread of interest and exchange of learning and knowledge on issues related to children without parental care or at risk of separation. IACN comprises of professionals from diverse fields such as civil society organisations, academicians, researchers, practitioners and policy-makers working on the care and protection of children in different settings. Through the online and offline exchange of information and knowledge dissemination, IACN aims to strengthen policy and practices for the protection and well-being of children without parental care or who are at risk of being separated. IACN Secretariat is hosted at Butterflies and is supported by UNICEF.



Dear colleagues,

We wish for the safety and well-being of everyone as we continue to navigate our way through these challenging times for our communities, families and ourselves.

We welcome you to the first edition of our quarterly newsletter at a time when the exchange of information and learning among civil society becomes significant as we are dealing with rapidly changing situations due to COVID-19 pandemic. This newsletter will serve as a medium for the exchange of information, learning and experiences on issues of protection and well-being of children without parental care or at the risk of separation. We hope that this newsletter and IACN at large will build on a community of organisations and practitioners on alternative care work in India, create collective momentum and shared understanding of pertinent issues and act as a catalyst to inform concerted policy and action.

We hope that you would actively participate in this initiative to build a body of knowledge, amplify voices, exchange learnings and experiences on issues related to children without parental care or at risk of separation. If you wish to contribute to the newsletter or want to discuss an issue of mutual concern, we would like to hear from you. Write to us at iacnsecretariat@gmail.com.

Together, we can do more!

Sincerely,
IACN Secretariat

About this edition of the newsletter

This newsletter focuses on resources and response on COVID-19. As the COVID-19 tests the strength of civil society making us adapt our interventions to the challenges that we face, we bring you voices and experiences from the field on response to COVID-19 from Udayan Care, Miracle Foundation, Youth Council for Development Alternatives, and Catholic Relief Services.

Knowledge resources

Technical note on immediate measures on protection of children in alternative care or at risk of separation during the COVID-19 pandemic

This technical note aims to support child protection practitioners and government officials in their immediate response to the child protection concerns faced by children who are at risk of separation or in alternative care during COVID-19 pandemic. The note outlines the immediate response plan and prioritises the actions that can be undertaken as part of the programme response to ensure the protection and well-being of children in different alternative care settings. It has been developed by interagency Task Force of practitioners specialised in child protection and care. It builds on the Technical Note: Protection of Children during the coronavirus pandemic developed by The Alliance for Child Protection in Humanitarian Action.

Prevention and Management of COVID-19 in Child Care Institutions

This SOP is designed by Udayan Care and is aimed at organisations and caregivers working with children in care institutions. It provides precautionary management measures, preparedness tips and guidance on psychosocial support for the safety and well-being of children in child care institutions amidst the COVID-19 pandemic. This resource is available in both Hindi and English languages.

Psychosocial support for children during COVID-19: Manual for parents and caregivers

This Manual is designed for parents, caregivers, support persons, and children and adolescent themselves. This tool will enable them to understand what is COVID-19 and how it can be prevented, help them manage related to stress, fear and anxiety, and recognise the increased risk of violence, which can help them to stay safe. The manual is activity-based and requires minimal supervision. The activities are designed for two age groups of children: ages six to ten, and 11 to 19, and contains exercises and play methods to keep children engaged positively and provide them platforms to express their emotions.

End Violence at Home Technical Note

This technical note is prepared by The Alliance for Child Protection in Humanitarian Action, UNICEF, End Violence against Children, and WHO. Protection in Humanitarian Action, End Violence Against Children. The technical note is informed by reports from the field. It examines issues that children may face as countries implement lockdowns and stay-at-home orders to curb the spread of COVID-19. Protective prevention and response strategies are then outlined with the goal of strengthening the protection of children in all types of homes.

Response to COVID-19: Reflections and updates from the field

Udayan Care

By Dr Kiran Modi, Founder and Managing Trustee

As a practitioner and care provider to vulnerable children and youth, as someone managing and running 17 Child Care Institutions (CCIs), group homes, as we call them, for children without parental care, as well Aftercare Programmes for youth, across four states (Delhi, Uttar Pradesh, Haryana and Rajasthan), the past few months have been hugely challenging. At the same time, this period has provided continual learning for us. The unprecedented crisis brought on by COVID-19 meant enormous concerns, immense stress and overwhelming uncertainties all around: health and education concerns, safety, social and technological concerns, and also, legal and financial concerns. It has highlighted the significant need in the CCIs, for timely coordination and immediate decision making to ensure a timely response for services and interventions. The caregivers are juggling between various tasks and are overburdened. They are ensuring that the homes do not run out of essential supplies, developing and imparting training on safety measures to children and the residential staff on COVID-19, and also, keeping up with the latest information and guidelines, issued by various government and non-government agencies, to deliver a coordinated approach to caring and protecting our children and youth in lockdown. It has been particularly challenging as no senior staff is on the ground. An additional challenge has been to adhere to the protocols when a new child arrives in the already packed CCI, or when a child is ordered to be sent back to the family. It also brought home the fact that COVID-19 is not going to leave without making colossal constraint on the financial resources of organisations, dependent on or independent of government funding. With life on a spin, we need to break out of the mould and create practices to support children, at a time when they have become even more vulnerable to alienation, deprivation, abuse and even infection.

There has been a slew of advisories, guidelines from court and government and civil society, instructions from various DCPOS and CWC members, as our 17 homes are in different districts of the four states, some confusing, at times even at cross purposes, but mostly helpful in understanding and dealing with the crisis. As a quick response, the team at Udayan Care put together a Standard Operating Procedure (SoP) to manage and respond to the Covid-19 crisis in CCIs. This SoP has brought together all the major orders, guidelines, advisories and directions issued by various bodies in the form of a concise booklet that is easy to understand and guide care providers at CCIs and is available in Hindi and English.

It is heartening to see the child protection functionaries being so responsive and live up to the expectations of the children and managements of CCIs. The Child Welfare Committee (CWC), District Child Protection Unit (DCPU) and Childline, National Commission for the Protection of Child Rights (NCPCR) and State Commission for the Protection of Child Rights (SCPCR), the Municipal Health officials and health care workers are working round the clock, providing procedural guidance to social workers and staff in all institutions. As we face difficulties on a day to day basis, the solutions too are emerging quickly and in a collective manner. The child protection functionaries are personally visiting CCIs, and connecting with children and staff on video calls and WhatsApp, trying to keep everyone's morale high.

Similarly, schools have stepped up to make up for the loss of precious teaching hours. While private schools have quickly transitioned to the various online systems, children in CCIs, even those under EWS quota, going to private schools, are feeling more marginalised than ever, due to the inadequate access to technology. The rest going to public schools are also bearing the brunt. The unavailability of enough smartphones and lack of access to technology is depriving children of learnings. It becomes challenging in a CCI when there are limited devices, and the class timings of children may clash.

At another front, increased access and dependency on technology shows that globally online abuse and risk to child sexual abuse has seen a new high. Children are more vulnerable to risks associated with unsafe and unsupervised use of social media platforms and the internet. The situation requires urgent efforts and an all-time vigilance. With limited resources at disposal, the strain will rise on the CCIs. The arrival of a new child into the CCI or restoration of a child residing in the CCI amidst the lockdown, with limited staff available in CCIs while following the health advisories and catering to the psychosocial needs of the child and following the procedural guidelines is proving to be a challenge. Another issue is developing a sick room into a quarantine area, when space itself is a constraint, with the new social distancing norms. All efforts to be vigilant and monitor children entering into, living in, or going out of the residential care, is the need of the hour.

To keep children and residential staff engaged, we have worked on creating a daily schedule for children which involves games, studies, music, dance, painting and other recreational activities. We make use of the technology to give instructions and engage children in these activities. It has shown positive outcomes on how children are coping with the lockdown, as children by propensity are happy and do take all

kinds of adversities in their stride. At the same time, being confined in small spaces at home, asked to wear masks and maintain social distancing within the homes does create low levels of physical, mental and emotional well-being, resulting in high stress on children as well as residential staff. It may further exacerbate the mental health issues in the children, leading to an increase in self-harm, attempted suicide and other symptoms associated with poor mental health. The role of mental health care professionals and counselling becomes paramount to mitigate the increased risk to them, including that of child sexual abuse. The importance of monitoring the overall condition of each child under care and protection every day to minimise the risk of abuse cannot be underestimated. Counselling sessions do happen, but it has been observed that the children who are already traumatised and under psychological supervision have become reticent with sharing the feelings that may be overwhelming them. This is the limitation to remote counselling, even though efforts are being made in CCIs, as well as at many tele-counselling hubs set up to offer psychosocial support online. Another area of concern at these worrying times is the negligence of the children with special needs due to the shortage of staff and inaccessibility to specialised support.

With rising poverty and shrinking resources, it is worrisome and difficult to predict the number of children who will be left uncared, making them vulnerable to various child protection risks. There is also a high possibility that many more children will be left to state care, and in India, with such limited availability of non-institutional care models, again the push will be on institutional care. It has been learned that children in CCIs are being sent back to families during this pandemic period, to reduce the numbers, for maintaining social distancing. This temporary restoration of children to their parents and extended families without adequate social investigation and a follow-up plan is not in the best interest of the already abandoned children and is a matter of concern. Such first aid responses that do not go deep to identify and address the root causes of separation of children from families will only mean opening up the 'revolving doors'. Unwelcomed by their resource-starved families, the children may soon find their way back into the state juvenile system. Such trauma and re-trauma that children will have to go through will permanently impact their lifelong outcomes as adults. While the urgent need to shift our care approach from institutional to family and community care choices can never be overemphasised, such ad-hoc measures must be restrained. Family strengthening, community resources, family-based care and effective gate-keeping are concepts we need to understand in their nuanced and practical ramifications before we undertake closure of institutions, or sending children back to families. While this applies for all times, it becomes more imperative during times of crisis like this one.

Another primary concern in these trying times is the situation of 'Care Leavers', the youth who leave CCIs, on attaining adulthood, as many of them, still fresh in jobs, are being laid off, becoming homeless and starved, with no support or sustenance, coming from any quarter. With hardly any systems in place in CCIs to support their care leavers, they are left unattended. It is critical that these wards of the State should not be forgotten by their corporate parents; the State and NGOs must look after them; and tend to their needs, including emotional succour.

It is essential to also talk about the impact that the emerging economic slowdown is beginning to show on prior commitments from the donor communities. The residential care providers are facing increased expenses in ensuring technology, trying to make arrangements for sufficient laptops and uninterrupted internet connectivity. There are new demands for thermal scanners and PPE equipment in compliance with the health advisories. Reducing donor commitment is a worrying factor at a time like this. It is going to be a humongous task to keep the network of resources alive, but it has to be relentlessly met by caregivers.

At Udayan Care, we have tried to be at our best during this entire and ongoing lockdown period. From immediately arranging for curfew passes to manage emergency across our 17 Children homes, we have remained connected closely but remotely, as per government instructions, with all our children and youth. Our care staff has walked the extra mile ensuring the essentials are adequately stocked, also keeping children occupied, well-humoured and entertained. We have made adequate arrangements to ensure that there is no compromise with children's learning, whether it is the school curriculum or getting them connected to online classes. Children have been at their best creative-self and have come out with several activities in the context of corona virus. The children have composed corona stories, corona poems, corona quizzes, and even corona theatre. All mentors, social workers, and counsellors are always in touch with children, giving them ideas, hearing them patiently, allaying any anxieties and misconceptions that they may pick up from the flurry of information. Same has been our response to our 'Care Leavers'. The youth-led Care Leavers Association and Network (CLAN) has emerged as an essential source of support for the 'Care Leavers'.

Even as we all continue to watch and assess the long term impact of this crisis on our children and youth, collective action on the part of civil society and political will and commitment will be the non-negotiable going forward. The governments, at both, the centre and the state levels, must continue to closely engage with civil society and practitioners to know the ground realities and come up with new policies and priorities, before our children and youth start feeling

crushed under the burden of the new emerging reality. We owe it to them, and this is the time that calls for our earnest action not to let them down. Even as a lot of ground has and continues to be lost for our children and youth without parental care, I remain confident that together we shall overcome this challenge, provided we remain united and positive and follow a concerted strategy.

Miracle Foundation

By Sandhya Mishra, Director – India programmes

As coronavirus has restricted the movement of our team who is unable to travel to communities, CCIs, and DCPUs, we are leveraging technology wherever possible to conduct training, follow-ups, monitor child placements and quality of care within CCIs. Internet connectivity in CCIs and communities is an issue at times which makes the delivery of remote services a challenge.

Miracle Foundation's COVID-19 response focuses on three primary areas. It is in alignment with the UN Special Representative of Secretary-General plea to provide children education, food, safety and health. The immediate steps taken by Miracle Foundation include:

- Relief packages: We have delivered relief to more than 1200 families. Relief packages that are provided include necessities like rice, wheat, oil, dal, milk and vegetables as well as soap and other hygiene supplies. For more information, visit <https://www.miraclefoundation.org/covid-19-update/>
- Virtual delivery of services: Our goal is to continue providing care to children just like we did before COVID-19 and the only difference is we are doing it remotely now. We are conducting virtual mentoring meetings with CCIs and scheduling virtual well-being checks with the CCI staff as well. We have developed virtual training and mentoring guidelines to help our team implement life skills education and other activity on an ongoing basis. For CCI staff members who are unfamiliar with the usage of technology, we are scheduling informal tea times to get them familiar with using technology.
- Expediting Case Management: For those children who have been placed with their families due to COVID-19, we are using our case management process and tools to ensure children are safe, to identify areas of need and put together an intervention plan to ensure permanency or a safe return to other alternative family placements or CCIs. CCIs will be guided to implement this process systematically, keeping the children's best interest in mind. We are working on this in coordination with the formal child protection systems.

In this process, we could identify some emerging needs among children due to the COVID-19 pandemic, and we are trying to address them through the involvement of CCIs, organisations, Corporate Foundation, DCPUs, children and families

- Mental health: We are leveraging our mental health partners and technology to connect with everyone at regular frequencies on an ongoing basis.
- Connection with family: For children in CCIs who cannot be with their families during this time, we are ensuring that children remain connected with their families over WhatsApp audio and video calls.
- Education: As distance learning, e-learning, and virtual classrooms become the norm around the world, we need to make sure children in need of care and protection do not get left behind. We are reaching out to education experts and are looking for partners who can provide education virtually. Wherever possible, we are making sure that children can access online classes.
- Mental Health services are one of the most critical interventions for children with existing mental health conditions and those showing signs of psychological distress due to Covid-19 pandemic. We have partnered with trained psychologists who are providing individual and group counselling to children in CCIs and those living with families during this time. In case of connectivity issues or unavailability of video chat, counselling is conducted over the phone and children are encouraged to wear headphones to address privacy concerns. Where video is available, psychologists have been able to take children through relaxation techniques with success. We will measure the impact of this virtual delivery to ensure it is helpful for the children and families.

We are also trying to address the work challenges and impact of COVID-19 on our staff through various activities. Due to COVID-19, our teams involved in the direct delivery of the program are working from home and are unable to travel to the CCIs and communities. We are providing them with the tools and guidelines needed to transition to a virtual support model. Also, we are making every effort to reduce the stressors they might feel and prioritise staff wellness by arranging for meditation sessions for those interested in attending, continuing to invest in their professional development by scheduling learning leaps, and scheduling informal catch-up sessions. We have also identified the need to make internet and phone access more universally available in remote areas where we work.

We are increasing bandwidth at CCIs wherever possible and looking for innovative solutions to tackle this challenge. We would be happy to provide support to other organisations and practitioners working on care and protection of children in alternative care or at the risk of being separated. If you are in search of guidelines related to virtual training or mentoring and monitoring tools to assess the quality of care being provided to children and families, feel free to reach out to Miracle Foundation India.

Catholic Relief Services

By Manoranjan Dash, Programme Officer

Four siblings (three girls and one boy), who lost both their parents in 2007, were placed in a Child Care Institution when the eldest child was only six years of age. After 12 years in that institution and after getting trained in hospitality and tailoring skills under DeenDayal Upadhyaya Grameen Kaushalya Yojana, three of them transitioned out of child care institution. With work placement, they started working in the cities of Hyderabad and Vijayawada. However, with the rise of COVID-19 pandemic and loss of jobs, two girls had to come back to live with their extended family, which solely depends on daily wages. The youngest girl who is still in institution, who came to meet her sisters, also had to stay back with the extended family due to declaration of lockdown. With three more additions, the already large family with limited resources felt burdened further. The ration and relief provided under PDS were not sufficient for the family. It was shared with our project case manager, during the virtual case monitoring and follow-up. As an immediate action, ration items for two months have been provided to the family. Further, the DCPU has been informed of the situation of the children to assist in relief. The CRS case manager continues to provide psychosocial support to the children through remote counselling and monitoring.

The COVID-19 pandemic requires adapting and developing services and programming to continue best to serve children and families through rapidly changing contexts. Disruptions to families, peer support, daily routines and the wider community can have adverse outcomes on children's well-being, learning, development and protection. Also, measures used to prevent and control the spread of the virus can expose children to protection risks. Quarantine and social isolation, while critical to slow the spread of the virus, can negatively impact children and their families. It is crucial for those working with vulnerable children and families to stay informed about the increased child protection risks that can and do occur during an emergency. Safeguarding procedures should be reviewed to determine responsibilities, reporting and referral pathways in the case of suspected or substantiated child protection violations. At the same time children, families and communities are resilient and can be helped to draw upon their strengths in these times of stress.

While in-person monitoring visits to family homes, alternative care placements or residential care facilities are not possible amidst the lockdown, programmes and caseworkers must maintain regular contact with children and families through the phone. Looking at the challenging scenario and knowing that the monitoring is critical at this time, a virtual monitoring guideline was developed by Changing the Way We Care and is adapted by CRS to its programme in India. The tool encompasses guidance and tips around Covid-19 - preventive steps; mental health and psychosocial support tips; positive parenting guidance; and case monitoring action plan. Using the guidance, the case management team of ARUNA, our grassroots NGO partner in Odisha, is conducting virtual case-load monitoring with eleven children who have been reunified with their families. Virtual monitoring is helping to monitor the well-being of the children who are placed back in the care of their families. It is also useful in providing guidance on preventive and responsive support to children and their families during COVID-19 crisis.

Youth Council for Development Alternatives

By Rajlaxmi Dash, Communication Expert

The COVID-19 pandemic is of a scale most people alive today have never seen. Communities across the globe are rising to the challenge – from health workers risking their lives to fight the virus, to young people coming up with innovative ways to share public health messages, and civil society organisations trying to adapt their programme by embracing virtual technology.

YCDA's Resource Centre on alternative care is the state nodal agency which has been remotely providing support to the CCIs across all the districts in the State of Odisha to raise awareness on prevention measures and standards of care in CCIs during COVID-19. While working with the CCIs, we have come across the following challenges:

- Practising social distancing is not practical in many CCIs due to insufficient space.
- As children are missing out on schools and tuitions, their academic learning is suffering.
- Children and caregivers show signs of psychological distress due to prolonged lockdown.

Children have their unique needs during an emergency. Through video and telephonic calls and personal visits wherever possible, our coordinators are connected with 3850 children in 95 CCIs. We are addressing some of their anxiety by providing them with the necessary information on COVID-19 pandemic, educating them on the importance of staying indoors, proper handwashing technique and social distancing.

Through art therapy, storytelling and creative writing activities, we are working on identifying their feelings and fears. We are working with caregivers to address the concerns expressed by children and encouraging them to spend quality time with children.

The formal child protection system has stepped up and is making use of technology wherever they can. In both Boudh & Bolangir districts of Orissa, the Child Welfare Committee (CWC) and DCPU personnel do regular monitoring through remote online platforms to guide children and caregivers in CCIs and different family-based care arrangements.

YCDA is adapting its programme response through the following actions:

- The children in the CCIs are in constant touch with our

outreach staff remotely, and their psychosocial needs are being addressed through virtual counselling.

- We are also organising various activities such as painting competition and story writing and indoor games to keep children busy through positive and productive ways.
- We have organised webinars by engaging mental health experts to address psychosocial and emotional concerns of children and support for the frontline child protection workers.
- We have published literature on do's and don'ts in accordance with the health advisories to meet the health and psychosocial needs of the children and caregivers in institutional and family-based care arrangements and disseminated it across the state.

INDIA ALTERNATIVE CARE NETWORK
