

Why we decided to transition from residential to family-based care

Laura Horvath, Mohamed Nabieu and Melody Curtiss

Abstract

The Child Rescue Centre became the first orphanage in Sierra Leone to fully transition from residential to family-based care. The decision to transition was made for many reasons, but the most unique reason is found in the story of Child Rescue Centre Director, Mohamed Nabieu. Nabieu, brought to the orphanage in 2000, and spent the majority of his childhood in the facility before returning as its Director. Following a 2016 directive from the Sierra Leonean government working with UNICEF for all orphanages to develop plans for de-institutionalization, Nabieu and Dr. Laura Horvath of Helping Children Worldwide began discussing research on the care of orphans and vulnerable children. The global research in support of de-institutionalisation was borne out by anecdotal evidence collected over 16 years at the orphanage, including Nabieu's own experiences. That ultimately led the Child Rescue Centre and Helping Children Worldwide to collaborate on a plan to close the residential centre and shift focus to family support. By the summer of 2018, they had successfully reintegrated the children into biological, kinship or foster care, closing the residential programme.

Keywords

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Corresponding author:

Laura Horvath, Ed.D., Director of Program Development and Community Engagement, Helping Children Worldwide, 14101 Parke Long Court, Chantilly, VA 20151, laurahorvath@helpingchildrenworldwide.org

Global Standards, the United Nations Convention on the Rights of the Child, and the Guidelines for the Alternative Care of Children

The ratification of the *Convention on the Rights of the Child (2004)* served as a catalyst for a global movement to de-institutionalise programmes that support orphans and vulnerable children. Progress has been stymied by continually arising crises and a historic preference for orphanages as a response.

A major tenet of the *United Nations Guidelines on the Alternative Care of Children* is the principle that 'the family being the... natural environment for growth, well-being and protection of children, efforts should be primarily directed to enabling the child to remain in or return to the care of his/her parents, or when appropriate, other close family members' (2010 p.3). Cantwell, Davidson, Elsley, Milligan and Quinn state that in cases where a family is truly unable to care for a child, the *Guidelines* advise that the state should be responsible for securing an alternative placement that best meets the needs of the child, including a child's need to grow up in a family (2012).

Child Rescue Centre History and Statistics

The Child Rescue Centre was established in the waning years of a brutal 11-year civil war in Sierra Leone that separated vast numbers of children from their families. Surviving family members were scattered, and the social infrastructure supporting them was fractured. Tracing families of separated children during and immediately following the war was rendered impossible.

As with many orphanages in the developing world, the Child Rescue Centre was established by a global church in response to a moment of crisis and emergency. Efforts were focused on ensuring the health, security and well-being of a specific group of children separated from care. A solution crafted to address the immediate need of a finite beneficiary pool rapidly became defined as the organization's mission focus, and thus its identity. The solution then expanded to include access to education for the 40 beneficiaries, and the organisation's vision to 'prepare future leaders of Sierra Leone'. This focus became the metric of success even after the pool of beneficiaries grew. Were the children healthy,

well-nourished and educated? If 'yes', then housing the children in an institution solved the problem. Ironically, within six months of the orphanage opening, the programme expanded to include children served in family homes. Those children were never institutionalised, but the identity of the organization was based on those who were, and a comparison between the efficacies of the two programmes was never attempted.

The war ended in 2002, and rebuilding began, but the road was long and arduous. By the time UNICEF completed its *Report on Children's Homes in Sierra Leone* (2008), the Ministry of Social Welfare, Gender and Children's Affairs lacked capacity to consistently communicate, supervise or regulate institutions to national standards. Lack of capacity in state structures often leads to isolationism in organizations desiring quick, efficient solutions. Lack of government oversight can enable organisational agility and autonomy but avoiding bureaucratic intervention in programme operations also disconnects the organization from local and national context of child welfare issues, to available resources and potential local solutions that are vital for sustainable development.

The UNICEF report (2008), did lead to a national commitment to increasing the government's capacity. In 2009, the Child Rescue Centre complied with a government directive requiring reunification of all residential children over the age of 16 and committed to trying to reunify children earlier if possible. Before that work could gain traction, an Ebola outbreak caused a two-year halt while the country dealt with the crisis and its aftermath. Being a global religion-backed organisation provided the Child Rescue Centre with the stability and impetus to survive the dual catastrophes of civil war, the subsequent Ebola outbreak, and the attendant damage to social infrastructures. Still, Ebola interrupted the program's focus on reunification, and without Ministry enforcement, the interest in expanded efforts subsided. So, what changed? Two things; increased attention by the organisation to the cause of internal problems in the orphanage, and renewed pressure by the global development community for Sierra Leone to recognize the reoccurrence of these same problems wherever orphanages are found.

In 2013 and again in 2014, incidents of negative behaviours concerning children in the residential programme were reported and handled as isolated events, and measures were taken to reunify the children in question and enhance supervision on the campus. Horvath and Nabieu began extensive research into behavioural issues of traumatised children in institutional settings and discovered that such children are at high risk of trauma-induced behaviours and actions that can include physical abuse, and which persist even after reintegration. Brown contends that 'while...placement in a supportive family can result in the formation of close attachments...many institutionally raised children will still have problems interacting with peers and adults outside the family' (2009, p.17). Many of the children reunified out of the residential program have continued to exhibit negative behaviours including truancy, pregnancy, and substance abuse.

In early 2017, the Ministry and UNICEF met with leaders of all registered orphanages in Sierra Leone to encourage these organisations to develop plans for transitioning their residential care programmes to family-based care within a five-year period. At the Child Rescue Centre, a change of leadership provided unique opportunities for self-reflection, in that one of the original street children, Mohamed Nabieu, raised in the orphanage, had graduated college and been hired as its Director in 2016. Almost immediately, Nabieu began working with Helping Children Worldwide's Dr. Laura Horvath, to examine the residential programming, and study the global research on residential children's homes. Nabieu's experience as a child mirrored global stories and the research supported his opinion about the negative impacts of institutional life on child development. In his words, 'the Child Rescue Centre was one of the best orphanages, but it was still an orphanage and the way we were living was very different from the average Sierra Leonean. We had strict supervision and schedules and were unable to visit with family members'. While he credits his education and rise as a leader to the excellence of his upbringing in the institution, he shares: 'though we had access to good schools, tutoring, and even trips to new places within Sierra Leone, it was not the same as a normal home. Many of my residential brothers and sisters still struggle to feel connected to our families'. Nabieu and Horvath became convinced that the answer was to

adopt a transition plan to move from residential to family-based care as rapidly as reasonably possible.

Reunification, however, is much more complex than simply placing a child in a family, even his own, if the family lacks the support it needs to be successful, and particularly when a child has been institutionalised and separated from family for a long period of time. In an interview, Lamin acknowledged that 'transition is often difficult for children and families. Reunifications have failed and children have tried to run back to the institution' (2018). As Nabieu notes, 'even when children get reunified, it is hard for many of them to fit back into the culture. They don't know much about community life, they don't know their family, and the community sees them as different'. It is far easier to begin to address needs in a crisis with formal alternative care such as orphanages, and far more difficult and complicated to switch from crisis mode back to a family-based focus, particularly when resources to support families are lacking or difficult to access. Even when supports are available, Lamin argues, 'it takes a skilled social worker to assess and judge when to intervene and how to best support parents to be successful' (2018).

Unlike many orphanages throughout the developing world, the Child Rescue Centre was uniquely prepared to execute the de-institutionalisation of their residential programme because they already had a spectrum of family-based care options in place. These helped provide avenues for reintegration with kinship or foster families. Having had an established, family-based care program already in place since 2001 made reunification of children in the residential program a smoother transition.

In early 2017, the Child Rescue Centre redoubled its efforts to trace family of all children in the orphanage, ascertain their needs and prepare them for reunification with their children. Believing that intentional work on attachment with families and children would alleviate some of the negative post-reunification behaviours, Nabieu created a plan for the reintegration of the remaining residential children that could be accomplished within 12-18 months without sacrificing the quality of preparation provided to help families form healthy

attachments and strengthen the bonds of relationship before, during and after reintegration.

Being the director allowed Nabieu to tap into his own experiences as a child of the residential programme to initiate changes, such as encouraging families of children in the residential program to visit the children. 'We also encouraged the children to visit family in the community and do "normal" things. Many had been in the residence for almost 10 years, and they didn't know much about community life. Strengthening the relationship between children and families was very important to me', Nabieu said. The last 20 remaining children in the residential programme were transitioned into family-based care in July of 2018, where they will continue to receive material and other supports through a case management system.

Access to healthcare, education, tutors, computers, security and safety made the residential programme appear to staff, donors and families, as the best possible situation for these children. Analysis conducted in 2017 on all the children who ever lived in the residence revealed that 98% of them had had a living relative who could care for them with adequate support. This post-mortem also revealed that after a year or two of living with the advantages and routines of the orphanage, families felt or were actively discouraged from removing their children and risk them losing access to resources that the family could not provide. 'People living in desperate situations are looking for opportunities for their children', Nabieu says. 'An orphanage is perceived as a way to guarantee them a good life'. However, research indicates that children institutionalized for years are at greater risk for long-term negative impacts on social, emotional and cognitive development. Wolkind reports: 'significantly more indiscriminate friendliness, over-friendliness and/or disinhibited behavior for children in institutions, suggesting "disorganized attachment disorder" has a greater prevalence among these children compared with children in families' (1974).

By all accounts, the Child Rescue Centre had always been a residential programme of the highest quality. Helping Children Worldwide's and the Child Rescue Centre's drive to meet and exceed standards in the care of children eventually required the organisations to embrace the research indicating that

family-based care is best for children, and this in turn led them to confront, head on, the decision to de-institutionalise. Fearless introspection and extensive research in the field of orphan care, combined with the personal experiences of Nabieu and other graduates of the orphanage, allowed Nabieu and Horvath to share hard truths and opportunities for change with others in the organisational leadership, and for them to hear and respond.

Still, stakeholders on both sides of the ocean struggled with the transition. The shift from residential to family-based care meant a loss of deep personal connections for those working in the orphanage. The decision to release long-term personnel in making the transition from a residential to a case management model proved to be especially painful. Staff and children became attached to one another, and donors too became attached to children and staff they saw on repeat mission trips to support the orphanage. The Child Rescue Centre experienced significant resistance in its efforts to shift to family-centred programming. These very real losses were balanced by significant gains. The change is leading the programme to introduce local solutions that are contextually appropriate, with a greater sense of local autonomy and sustainability. While the orphanage had long been recognized in the country as a premiere model of formal alternative care, and many of the children raised in its institutional care model had succeed in becoming 'leaders of the future', the research was incontrovertible that such care was counter to the best interest of children, and the leadership on both sides were forced to confront and address the ethical challenge that conflict presented and to adopt a different model.

Transitioning to meet global standards

For more than 18 years, the Child Rescue Centre had taken a programme management approach that seemed to work well enough. However, it created a situation in which children and families were considered collectively as clients served by a specific programme with the focus on the total number of children in the programme at any given point in time, rather than as individual cases to be served, monitored, and evaluated based on specific needs. In 2018, Nabieu identified a case management team of nine staff. Out of necessity borne of budget constraints, this has resulted in caseload ratios of approximately 1:65 which makes meeting the global standard of monthly site visits a challenge.

Recognising that this ratio exceeds the global standard for caseload ratios of 1:25, the Child Rescue Centre has established a plan to increase staffing within three years to achieve the global standard.

Another gap in the capacity of the Child Rescue Centre in making this crucial shift in programme delivery was in expertise and knowledge of best practices in case management. A step in the right direction was the assignment of specific children to specific staff, which is helping children and families establish relationships with their assigned case manager. Plans for building capacity in case management include training provided by a team of social workers from America traveling to Bo in the summer 2019. Child Rescue Centre staff will be coached in the creation and maintenance of individualised case files using a collaboratively developed database system, review case files for discussions around best practices, and be coached in the conduction of successful site visits and maintenance of case files. Representatives from other children's organizations across Sierra Leone as well as the Ministry will be included to strengthen collaboration so that they can support one another in the development of robust case management across organisations.

The Child Rescue Centre has and continues to lead in the care of orphans and vulnerable children since the moment it opened its doors. Lamin reflects that he was not surprised to learn that the organization is leading the de-institutionalisation efforts in Sierra Leone. 'The Child Rescue Centre has always set and met high standards in the care of vulnerable children', he said, 'of course they are the first in Sierra Leone to de-institutionalize their residential program' (2018). Bo Ministry Representative Patrick Banguara shares that the Child Rescue Centre is the first organisation in the country to submit and completely execute a plan for de-institutionalisation. The organization continues to work closely with the Ministry as it moves forward in developing and building capacity in its case management programme.

Despite a lengthy history of promoting orphan care and marked success in providing care to vulnerable children through the institutional model, when the Child Rescue Centre and Helping Children Worldwide recognised the need to change, they had the structure, the resources and the community confidence to

introduce a better programming model and to lead child welfare reform in practical, demonstrative ways.

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About the authors

Prior to joining the Helping Children Worldwide (HCW) staff in November 2014, Laura Horvath, Ed.D. was a professor of graduate education at George Washington University and George Mason University, simultaneously serving HCW's programs in Sierra Leone as a volunteer for over a decade. Laura has an in-depth knowledge of education, and a deep passion for global child welfare, the care of orphans and vulnerable children, public health, ethical missions, and

sustainable community-led development programs. Laura has served HCW as its Education Specialist, African Programs Director, and currently as the Director of Program Development and Community Engagement.

Mohamed Nabieu ("Nabs") was one of the first children brought into the Child Rescue Centre (CRC) after the Sierra Leone civil war. The CRC sponsored him through University. Upon graduation, he served the CRC in Sierra Leone for five years, first as the Sponsor-A-Child Coordinator, and later as the Programs Director. Under his leadership, the Child Rescue Centre successfully transitioned from orphanage to family-based care in collaboration with Helping Children Worldwide, the United Methodist Church, child protection agencies, the Sierra Leone Child Care Government, local staff, parents and children. With his wide range of experience and background in Development, Business and Organizational Psychology, Child Protection issues, leadership development, organizational change management, and team building, he finds great pleasure in serving vulnerable populations, building people up and empowering the next generation of leaders.

Melody Curtiss has worked in child welfare and juvenile justice reform for over 30 years, as an attorney-advocate, an advisory member of the Board of Directors of the US National Foster Parents Association, and as a nonprofit CEO. She currently serves as the Executive Director for Helping Children Worldwide in the greater D.C. area, whose mission is to serve the most vulnerable children in the world and lift them from poverty and despair.