AARAMBH BOYS HOME PROJECT, INDORE

Summary Report

Child Reunification from Institution to Family Successful Base Model

Background & Context

With the mission for supporting orphans and vulnerable children to have a better quality of life, while bringing about systemic and sustainable change that reduces the need for child care institutions (CCIs). In 2019, AARAMBH, Madhya Pradesh collaborated with its partner organisation The Miracle Foundation as a part of its Pilot project with the goal to **'create a replicable modal for other CCIs to effectively implement Family Based & Alternative Care through systemic change by engaging multiple stakeholders'**. As reflected in the goal, stakeholder engagement, sustainability, holistic approach and children's best interest are at the core of the project.

The Project was originally scheduled to be a 2 Year project (Year 1: March 2019 – April 2020, Year 2: April 2020 – March 2021).

The 4 Key objectives for Pilot Project included:

- Creating a model for other CCIs by putting together learnings & best practices
- Showcase a true transformation by incorporating family-based care into the CCI model
- Strengthening the processes, develop steps for systemic change & gather data for comparative analysis (supporting children in a CCI vs. in a family)
- Engage government & non-government agencies to promote Family-based & Alternative Care (FBAC) for creating sustainable impact.

In April 2020, the Pilot Project completed its 1st year when a Mid Term Review (MTR) was conducted to track the progress of the Pilot in-terms of the activities per the timeline while ensuring they were still relevant to the program objectives & make modifications in the project goals based on the learnings from Year 1. Following the recommendations made in MTR report, the 2nd year of Pilot project focused on the following areas:

- Increase CCIs ownership for Programme plan, activities & monitoring
- Full Staffing for carrying out Family Based Alternative Care activities in CCIs
- Transitional planning for sustainable placements for existing children in CCIs
- Strengthening the Advocacy efforts through engagement with ALL Key Stakeholders
- Develops vision clarity through Envisioning exercise

The Purpose:

As we completed 2 years Mark for Base Model Pilot in March 2021, we would like to know:

1. What an overall PILOT at CCIs progress in adapting the key learning, way forward as cited in MTR Report
2. What is next for the Pilot, i.e. As we go forward are we planning to continue with Pilot or close the program
3. Identify Key lessons in the process, if any key learnings

Methodology

With reference to develop the 2nd Year Pilot Report, the Pilot teams at Miracle & AARAMBH CCI worked together for data collection. Primary data was collected within the purview of capturing key achievements, challenges, learning & recommendations, way forward plan and analysed by the AARAMBH and Miracle team together. This included:

- Structured interviews with children & their Caregivers:
    - In CCI interviewed 5 children: out of which 4 were reintegrated with families in 2019 & 2020 & 1 was temporarily placed with family under Expedite Case Management Process (ECM). As for the carers out of the above 5 children: 2 children's caregivers were interviewed
- Focused Group discussions were conducted with:
    - The district government child protection functionaries: including 1 Child Welfare Committee (CWC) officials
    - CCI teams at both CCIs including Social Worker, In charge, Program Office (FBC) & Chief Functionaries (CFOS)
- Program feedback Survey with:
    - Implementation Team at Miracle Foundation providing technical support to AARAMBH
    - Members of Senior (Sr.) Management at AARAMBH
- Analysis of data from Case Management Tracker Tool (CMT) to track effectiveness of case management system, a tracking system developed by Miracle Foundation India covering all six stages of case management (Admission, Assessment, Planning, Implementation, followup, case closure) in order to track pre and post reintegration progress, wellbeing of the children and families.
- Quarterly goals for the Pilot programme based on evolving plan to understand compliance program to program deliverables in terms of set targets and follow timelines.
- Evaluating needs through child & family assessments by assessing the utilisation of Home Thrive Scale of The Miracle Foundation. It is a strengths-based assessment tool used to identify strengths, risks, and address areas of support within a family home over time. A home's safety is measured based **on five wellbeing domains - Family and Social Relations, Health and Mental Health, Education, Living Conditions, and Household Economy** - with the child and family's participation and views at the core

Findings from Data Analysis

The findings from data analysis from all concerned stakeholders fall in **four major areas** of **Achievements, Challenges, learnings & Recommendations and Way Forward**

Achievements

a) Develop clarity of future 'vision:'

A visioning exercise is a powerful tool to use when engaging in strategic planning. It is useful of AARAMBH when it is driving a transitional change (reinvention phase). The strategic review analysis exercise successfully conducted by AARAMBH helped to plan our organisation's future vision – which is transitioning out of **'institutional care'** in to **community-based approach.** To include utilising existing building structure to set up training facility & working in 'identified high-risk' community for prevention of separation of children from families while ensuring child safety.

b) A Well-established Case Management System

ALL Children data was captured in the case management tracking system (CMT) to track pre and post reintegration progress, wellbeing of the children and families. On other hand we worked very closely with children and families to ensure smooth transition of children from CCIs to families and other forms alternative care by effectively utilizing Miracle's 'Expedited case management Process'. While also ensuring regular monitoring support to all children placed prior to COVID pandemic. We were able to over achieve its target of reintegrating seven Children in Year two

The Table 1 below depicts the Impact numbers of children from AARAMBH's Boys Home:

Planned Activities	Number of Children
Baseline at beginning of project 2019	35
Beginning of Year 2	33
Children Currently at CCI till December 2021	00
Children in Assessment Phase	00
Preparation Process as of December 2021: • Planning Stage • ECM Process • Implementation Stage	 01 15 02
Follow up / Evaluation Stage	15 Children 3 Children (Case Closure)
New Admission	No New Admission
CCI Thrive Scale Score	**89% Dec 2018** **89% Jan 2020** **96% Jan 2021**
Right #1 Score	64% Dec 2018 before expansion of Right 1 52% Jan 2020 75% Jan 2021

Children in Other Forms of Family Placement	Reintegration with Parent: **3** Reintegration with Kinship: **7** Group/semi-independent living: **8** children
Justification Due to COVID pandemic several children were moved to families in April 2020. It was an 'unplanned move' without preparing child or family. However, these children were covered under ECM support from Miracle Foundation to ensure smooth transition with on-going family preparation to ensure permanency & structured follow up plan. **Preparation Process as of April 2020** HTSTM assessment continue to ensure smooth transition • In-Plan Reintegration with Kinship: 1 child AARAMBH has supported 15 children and families to ensure smooth transition with frequent follow-ups (fortnightly) & monthly HTSTM for families **Post Placement Follow Up/Evaluate Stage:** In 2021 we were successful to reintegrate 15 children by using ECM process. There were 8 children who were placed in group living & semi-independent living with structured weekly visits and mentoring support by Out Reach Worker. Additionally, by April 2021, 3 children's cases were closed by considering completion of 18 months monitoring support.	

Reintegration Score

Pre and post reintegration analysis of Home Thrive Scale scores on the five wellbeing domains from the case management tracker for the children in AARAMBH which in a way captures the essence of their experience. This analysis for Reintegrated children:

Reintegration of Children in Two Years

Reintegrated Children in two years			
Domain	**Pre-Placement**	**At Placement**	**Latest Post Placement**
Family and Social Reintegration	**79 %**	**81 %**	**83 %**
Household Economy	**73 %**	**80 %**	**82 %**
Living Condition	**73 %**	**81 %**	**80 %**
Education	**73 %**	**82 %**	**78 %**
Health	**72 %**	**80 %**	**74 %**

Justification:

Data of ALL 15 reintegrated children was taken for this analysis.

Note that of 15 Reintegrated children 4 children were planned placements while 11 children were under ECM process that were later reintegrated through regular follow-ups & assessments.

Data shows increase % in ALL wellbeing-domains from the time of pre-placement phase. However, there has been dip seen in few domains from at time of placement to most recent scores in domains such as **education & health.** This slump was observed due to reduced frequency of assessments (between December '20 – February '21) as the PO position was vacant.

Currently, with restructuring of staff and appointment of new PO this gap is been mitigated by the CCI team through regular education follow-up through support of coaching teachers (developing educational plan) & connecting the families to social protection schemes such as Ayushman Health insurance schemes & helping families access local resources including PHCs, aanganwadi & Asha workers under ICDS schemes. The Social worker shared during the FGD 'Having community volunteers come up to support in follow-ups to ensure consistent support to the family has been great'. The team overall shared that HTS tool.

Red FLAGS: No child is this category.

c) Active involvement of Management

There was an active involvement of management particularly in Year 2. We were part of discussions during mentoring meetings & participation monthly meetings. AARAMBH CFO 'Mr. Anup Kishore Sahay's passion to drive the project further was quite pertinent' as shared by Miracle's implementation team during Pilot program survey. Regular engagement efforts with different Stakeholders including govt. officials: through steering committee meetings, discussions with WCD members & with other community organizations, organizing family meetings. He also spearheaded the process of staff recruitment & mentored the staff to formulate & implement Quarterly goals. Also, representing AARAMBH's and Miracle's methodology on Family Based Care at different platforms.

Steering Committee Meeting at JD Office, Indore Division, WCD

d) Consistent engagement with different stakeholders:

Year 2 experienced some great initiative taken at AARAMBH. The steering committee was formulated in collaboration with Government stakeholders Department of Women and Child Development (Indore division) with two broad objectives:

- Providing a platform for discussing best practices; any development – in policy/legislative framework; highlight emerging issues/challenges specially related to children living in institutions
- Developing workable action plans including prevention; Gatekeeping features for transition of children in families and other forms of Alternative Care

The committee consists of Govt. stakeholders and NGO representatives. Through regular engagement efforts and showcasing the AARAMBH's pilot work at different platforms, 'WCD is willing to include AARAMBH children in its interventions if the data and regular updates can be provided to them'.

Planning Meeting along with Joint Director, WCD Indore Region and CH Miracle Foundation

We in Aarambh also conducted 2 remote Parent meetings for parents/ Caregivers of reintegrated children. Objective of these meeting was to provide a platform to parents to express their concerns regarding where in what areas do, they feel their child's growth and development hampered. The parents also got opportunity to interact with each other and learn from other's experiences. We also shared some interesting parenting tips. The Program Support Officer shared during the FGD that 'All families are motivated well to continue children's education and give them a bright future'. She added 'Children are learning the value of and enjoying festivals, celebrations etc. in the community and are getting to experience their culture and traditions first hand

We also initiated donor engagement efforts through structured Donor meetings to reaching out to prospective donors to support the transformation of care model. Team has also actively started connecting with PRI to help identify and connect children's families with available social protection schemes. The CCI has created a robust resource mapping document in order to support linkage of families with available schemes. During the caregiver/parent interview a parent shared 'we migrated

from the village as all our paper work like the ration card are other documents are registered to village address we are unable to claim any benefits'. CCI team supports parents to obtain requisite documentation for availing schemes. Program Officer during the FGD exercise informed 'Seventeen children's families were linked with schemes - 10 families with Ayushman Yojana, 2 families with PM Awas Yojana, Scholarship scheme for tribal children - 5 (12th and above)'.

e) Streamlining the Documentation process:

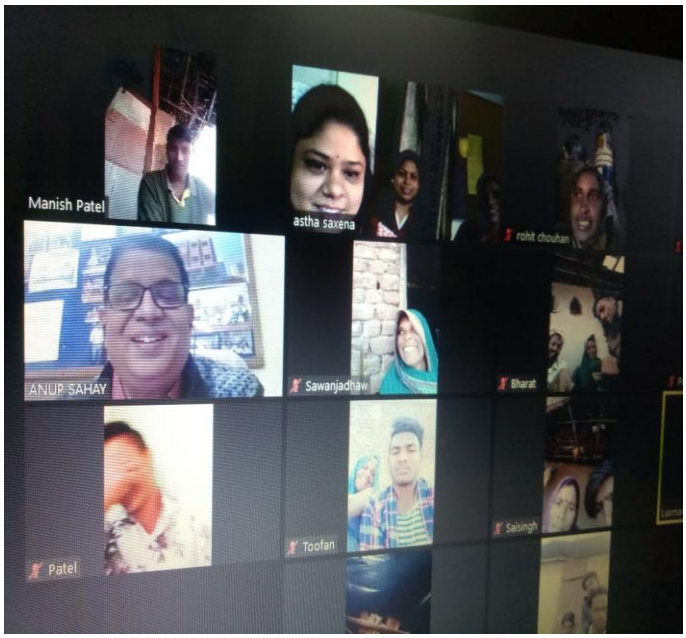
This has been great achievement for AARAMBH, where our CCI has managed to have up-to-date documentation process in place including timely report of various initiatives undertaken including quarterly activity reports, Quarterly goals, reports of various networking exercises with different stakeholders & ALL child & family assessments.

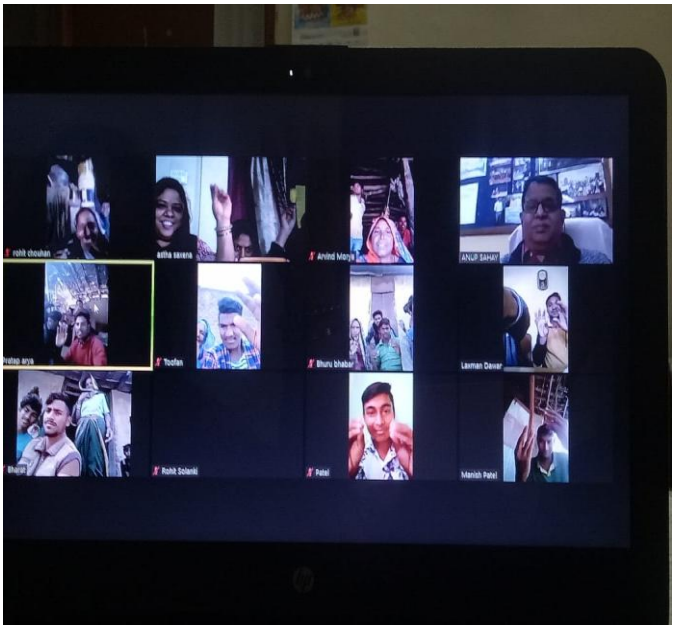
f) Children's Participation:

AARAMBH has initiated Family Based Care (FBC) Committee, giving children a platform to voice their opinion and participate in decision making with concern to FBC. Children took their learnings from the CCI to the children and other people in the communities. Children also played active part in spreading awareness about child rights, FBC to all the stakeholders

During the children interviews when asked 'if they would have the opportunity to make the reintegration process in their own way, what would they do differently' - 5 of 5 children shared that they 'wouldn't have changed anything in the process as they felt very much inclusive not only were the views taken but also were part of decision-making process'. Children living in group living shared 'the CCI considered my choice of staying in the city while also ensuring I remain in contact with my parents in the village. I have become more responsible.

Online meetings with families and Children





Challenges

The challenges below cover the perspective shared by respondent as well as from the pre & post reintegration analysis of data in case management tracker, analysis of CCIs quarterly goals

COVID Pandemic resulted in derailed program activities:

- Rapid restorations at CCI due to COVID led to lot of unplanned placements. It took a lot of frequent follow-ups, regular assessment and streamlining education for ALL children. Unavailability of smart phones with children and families, created issue in reaching out to them, and it also become hurdle in the online education of the children initially. Currently there are 15 children who are still with families under ECM process 'temporary placement'
- Due to pandemic most of the families interviewed shared that they were grappling with financial crisis, with loss of earning as most of them were 'wage earners. A parent shared during the interview 'it becomes impossible for them to manage their expenses'
- 'Limited support by the Government authorities due to the pandemic & children in families. Specifically in form of dysfunctional schemes for children and families was another area which suffered. In the current covid situation, many of the carers are jobless and already in financial crunch. With large families where both children and carers at home & there are no means of earning raises their expenses which lead to carers either exploring CCI as an option for better child care.
- Lack of awareness about the existing schemes & resources among families from the marginalized, vulnerable communities staying on outskirts of the village area was another propelling reason identified by AARAMBH team. Most of the families lacked proper paperwork to avail any govt. scheme like PDS, Ujjwala yojna other Figure 9 current staffing models at AARAMBH community services. Documentation, lengthy process to get approval on application is a major deterrent. Families do not take follow-up themselves even after being

provided with all information. The CCI team at AARAMBH is however working very closely with families & PRIs to mitigate this gap by providing documentation support to the families

- In-person visits/ contact between children in the CCIs and families could not happen much due to restricted movement during COVID lockdown this led to slowing down the preparation process & ultimately hampering the transitioning of children in families. A parent shared during the interview 'I worried about my child in the CCI.
- **Risk of safety:** This included risk of child marriage & non-continuity of education. Also, another factor included lack of contact with family where support of DCPO was seemed to trace the family

Learnings & Recommendations

The learnings & recommendations below covers the perspective shared by ALL respondents, Q-goals goals and progress on program deliverables as well as from the pre & post reintegration analysis of data for children in case management tracker.

● **Mindful Staffing Strategy.** Ensuring a robust staffing structure which incorporates 'redefining the roles of staff' as the CCI transitions. AARAMBH implementation team mentioned during the survey 'Don't rely most/all program on one person like PO - support other members so there's a "backup" if something happens to the main point person'. AARAMBH learnt from the experience of program slow down as the PO left. These situations can be avoided with utilizing 'redeployment of staff' as a part of Strategic Review analysis exercise. The CFO worked extensively to reframe the roles, e.g. House Father redeployed as Community Outreach Worker (ORW) & In charge redeployed as program support officer for FBC as the majority children transitioned from CCI to families. Additionally, hiring any new staff keeping perspective '10 X thinking' for expanding the program at the grassroot.

● Redefining the partnership model with other CCIs. Our work with Pilots has taught us a lot, in-terms of redefining the partnership model with other CCIs. The new approach facilitates CCI partner organizations to realize their full potential and take ownership in the implementation of family-based alternative care and family strengthening initiatives, towards sustainable reintegration of children with families. As shared by our implementation team from Miracle during the survey – 'When CCI team find solution to their problem they take action quickly but if we gave them a solution they take time to do that. Facilitating the process to find solution for ground level problems is more helpful than giving solution' which holds true

● Importance of mapping and utilizing support of community resources (Anganwadi, Ashaworkers, VCPC, community volunteers, community heroes, SMC) in regular monitoring & more mentoring support to the families. The respondent official shared about the constant efforts of the DCPU office in their district to strengthen the village / ward level child protection committees, as they believed that V/WCPCs could play a major role to strengthen families, family-based care, creating a safe environment for children. Additionally, AARAMBH's efforts with working very closely with families & PRIs to mitigate this gap by providing documentation support to the families to access schemes & services. They further identified and trained 'community volunteers' in Badwani district on life skill support and child rights, and will be able to further take these trainings ahead in the community.

● Constant engagement efforts with stakeholders are critical for the program to be successful. This includes formulating/ facilitating OR participating in different forums including steering committees, working groups etc to share regular program updates/ progress on different platforms. One of

respondent official suggested 'CCI should share the data and updates on children restored (the transition process) to families and kins'. Additionally, the engagement should not be limited to WCD, DCPUs but also Community

- **Child Participation.** Involving children in decision making process so child doesn't feel 'forced' to move to carer just because it is the only option available for children & spending more time on preparatory efforts (planning stage) so the child & caregivers are prepared & have realistic expectations. Additionally, supporting initiatives like FBC Committee which is a means of children taking learnings to families and communities e.g. AARAMBH children took session on child rights with village children. Anup ji (CFO, AARAMBH) shared – 'If children become change ambassadors, the program will be sustainable.'

- **CCI become agents of change.** CCI not only works towards reintegration of children into families, but also work effectively towards 'preventing children from re- entering the system'. The CCI can play an effective role of creating synergy between the systems CWC, DCPU & Community resources (so the children & family needs can be better addressed). The CCI should also invest in training & equipping the social workforce across child care & protection sector in family - based alternative care

- **Strengthening the Case Management System** for effective transition and reintegration of children in families and other forms of family based alternative care. A comprehensive case management system should provide and coordinate care & support to children and families, leading to a more efficient system that delivers services for children and protects them from harm, abuse, and exploitation

- **Strengthening community based other alternative care options** on ground (fit persons, small group homes, foster care etc) so that Institutions are not looked at the ONLY options if the kinship care arrangement does not work.

- **Strengthening 'effort in Remote work'.** With the COVID Pandemic most efforts went towards remote follow-up support & monitoring to children & families, Remote trainings to CCI and other stakeholders, remote engagement efforts & remote education for children in families - which was an explored territory earlier. Hence, it is very important to have systems in place to ensure that remote efforts are successful. Miracle's guideline on remote assessment is a step in this direction.

- **Prioritizing Self-sustainability.** It will be important for AARAMBH to diversify their donors to ensure the care provided to children is not compromised. We are ensuring more effort in donor education and engagement for diversion of funding towards Family Strengthening (FS) and Family Based Alternative Care (FBAC). While making regular efforts towards utilizing community support system including linking of children & families with social protection schemes through Active Family Support (AFS) Model.

Way Forward

As successfully complete two years, the pilot project is MARKED as success and completed as the prime objectives set for the program were successfully established. However, we will continue in focusing on following areas:

o Celebrating the Success. Planning meeting with ALL key stakeholders. This meeting has been organized virtually. The idea of the meeting will be bring everyone together and share the journey of when the program got started and where we are as we complete the 2 year mark o AARAMBH continues to work on following with objective to ensure sustainability: ♣ Developing & implementing program deliverables & goals (Quarterly goals) ♣ Ensuring smooth transition of children in families OR other FBAC option which includes - linkages with community resources, monitoring with timely assessments & sharing case stories and documentation ♣ Ensuring Child Participation through Family Based Care Committees ♣ Ensuring Staffing Model caters to the project needs while ensuring roles and responsibility of ALL staff to be clarified to ensure role distinction & reporting structure ♣ Strengthening Networking and engagement efforts with different stakeholders including government, non-government agencies, community resources - Regular Steering committee meeting will be a prompt step in this direction ♣ Hosting 'Training of Social Workforce/ Learning Exchange' to 'train & equip' the social workforce across child care & protection sector in family - based alternative care ♣ Showcase the progress and process of transition of children into families as 'best practice model' in different forums such as function Active involvement in Steering committees, learning exchanges etc.

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