

Developing Child Rights Indicators through a Longitudinal Study to improve Child Care in India

Dr. Kiran Modi

Founder, Udayan Care. New Delhi, India

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Overview

Children in need of Care and Protection

- India is home to 31 million OHC*children (1,2)
- Only 1.4% receive any sort of formal alternative care
- Other forms of alternative care - sponsorship, community based, sponsorship, aftercare programs are almost non-existent
- Most children who come to alternative care have experienced abuse, trauma, exploitation, abandonment and neglect in their early years of life

*OHC children or Out-of-Home-Care children are abandoned, orphaned or at risk of separation from their biological families and in need of care and protection.

1. SOS Children's villages. (2011). Retrieved from <https://www.soschildrensvillages.ca/india-now-home-20-million-orphans-study-finds>
2. UNICEF. (2008). Retrieved from https://www.unicef.org/infobycountry/india_statistics.html



The Work on Child and Youth Care (CYC) at Udayan Care

Udayan care is an NGO started in 1996, headquartered in New Delhi, India

Our Child and Youth Care programs includes

- **Udayan Ghars (Sunshine Homes)** – Group homes, based on an indigenously developed ‘L.I.F.E’ strategy (‘Living in Family Environment’) in long term residential care in a community setting housing 12 children of the same gender in every Ghar
- **Udayan Aftercare Program** - a young adult transition model supporting independent and self-reliant living. It provides permanency, TLC and on-going family-like relationships for children
- The CYC program also includes gatekeeping, family strengthening and restoration of children to families wherever possible.

• *The Carer Group at Udayan care consists of long term volunteers who are Mentor Parents, Social Workers and other support staff.*

• *The Mental Health Team comprise of a Child & Adolescent Psychiatrist, Social workers, psychologists and Counsellors*



Year of inception and current census of children (as of March 31st 2017)

Name of the Ghar	Year of Inception	Number of children
Home 1- Sant Nagar- Girls	1996	13
Home 2- Mayur Vihar- Boys	1999	13
Home 3- Mehrauli- Girls	1999	13
Home 4- Greater Noida- Girls	2003	24
Home 5- Gurgaon- Boys	2004	15
Home 6- Noida Boys Home	2007	11
Home 7- Noida Girls Home	2008	8
Home 8- Mayur Vihar- Boys	2008	10
Home 9- Kurukshetra- Girls	2008	10
Home 10- Jaipur- Girls	2009	20
Home 11- Ghaziabad- Girls	2009	12
Home 12- Mehrauli- Girls	2010	13
Home 13 – Sant Nagar - Boys	2013	12

- Since 1996, **783** children have been assisted through Udayan Care
- Presently, **174 children** (113 girls, 61 boys) live in 13 Udayan Ghars and 30 young people in 2 Aftercare facilities



Need for an assessment tool

- Need arose from wanting to know if the children in the care homes felt that there was progress being made in their lives.
- No such standard tool to measure needs is in practice in India
- **“Meaningful participation”** has been emphasised by the United Nations Convention on the Rights of the Child as one of the core principles and by the Juvenile Justice Act ^(3, 4)
- So in 2011, a longitudinal study ‘Questionnaire to Assess Needs of Children in Care’ (QANCC) initiated by Udayan Care was created with the aim of developing **evidence-based indicators to assess whether the rights of children under its care were being met from their own point of view.**

3. *UNCRC. United Nations Convention on the rights of the child, Article 12. (1989). Retrieved from https://downloads.unicef.org.uk/wp-content/uploads/2010/05/UNCRC_united_nations_convention_on_the_rights_of_the_child.pdf?_ga=1.135199926.625442469.1493180424*

4. *Juvenile Justice Act. (2015). Retrieved from <http://www.indiacode.nic.in/acts-i-pdf/2016/201602.pdf>*

Development of Questionnaire to Assess Needs of Children in Care (QANCC)

- The questionnaire was developed by consultations between a **child psychiatrist** -Dr. Deepak Gupta, a **clinical psychologist** Ms. Hemanti Sikdar, **social workers** - Ms. Garima, Mr. Rahul and Ms. Nidhi, and **myself**.
- **29 questions** - Basic/fundamental needs, Emotional needs, Interpersonal needs and Educational needs
- **4 point rating scale** with answers ranging from Never, Sometimes, Most of the time and Always
- It is designed as a **self-assessment tool for children between the ages of 10 – 18 years**

Administration

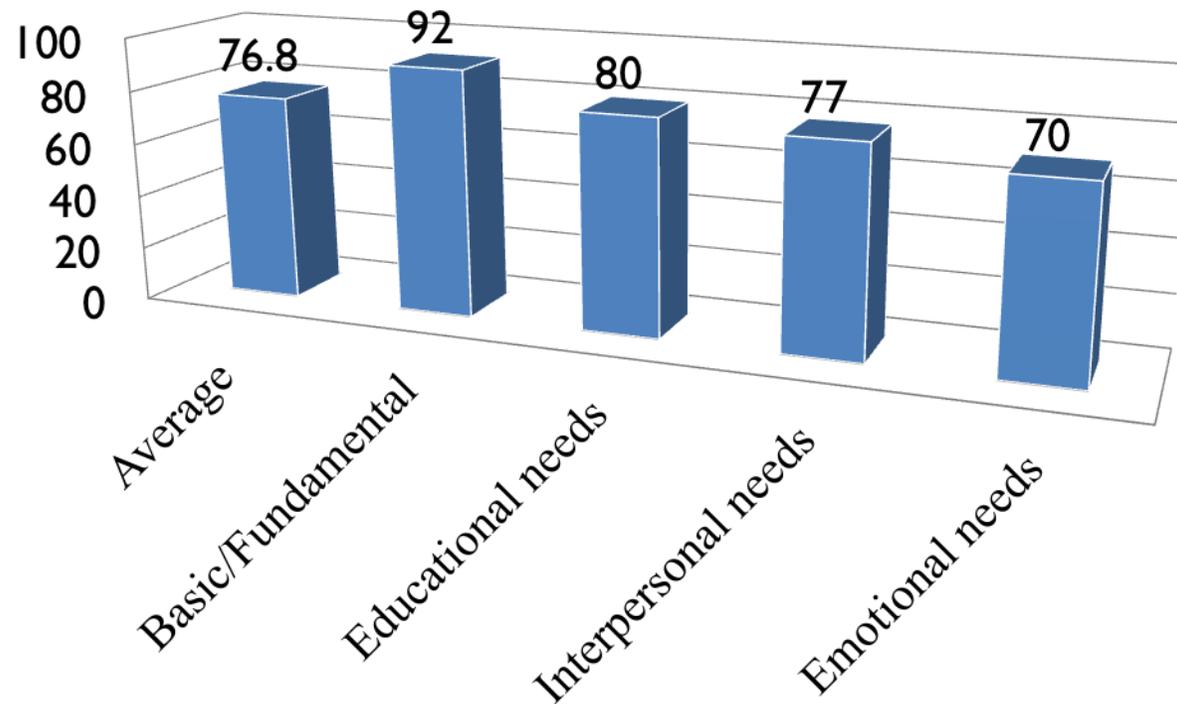
- The survey is a convenient **purposive sampling** of all the children who have lived at Udayan Ghar for a minimum of 6 months
- Data was collected for the 12 months between April 1st of one year and March 31st of the next year. Data collection was started in 2011 which served as a pilot year.
- All children between ages 10 to 18 are surveyed individually
- Social Work interns are trained in a standard manner to assist younger children with the questionnaire – care is taken to ensure that there is no social desirability bias by the interns being previously unknown to the children

Main Findings

- Only the results from 2012-2017 were used in the analysis, as the procedures for data collection had not been standardized in 2011
- On average over the past 5 years, **76.8% of children feel their needs are being met** (answers of Most of the time + Always in the survey)
- On average **92% of children feel their Basic/Fundamental rights** are being met
- There is **no statistical difference by gender**

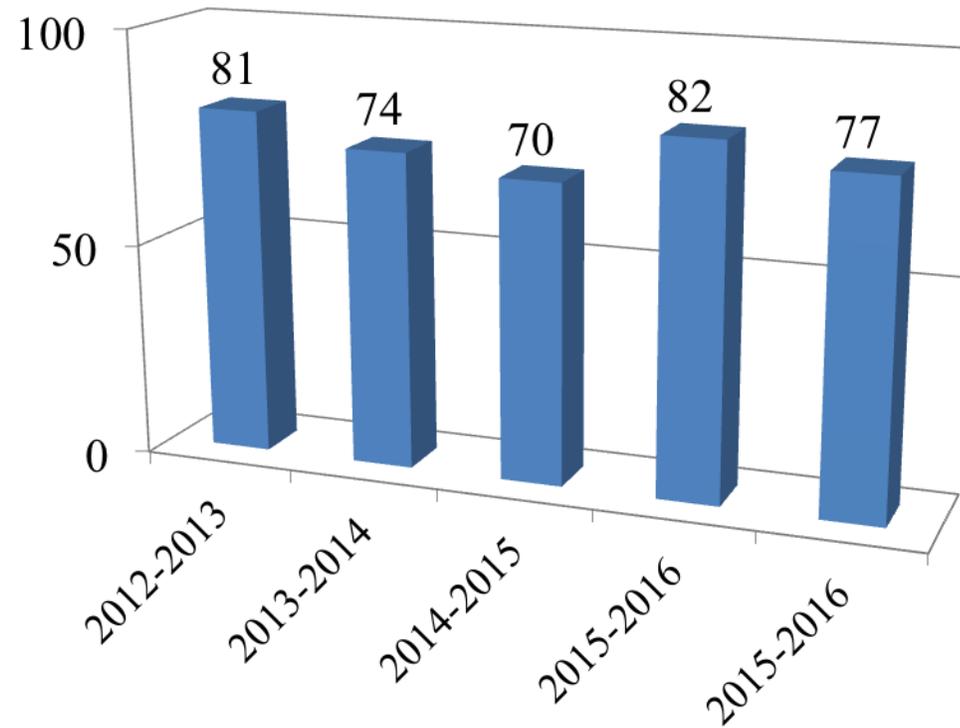
Percentage % breakdown by need category (2012 – 2017)

% indicates answers of Always + Most of the time



Percentage % of children reporting their needs being met

% of answers of Always + Most of the time



Breakdown by gender

	2012-13	2013-14	2014-15	2015-16	2016-17
No. of Boys	30	40	43	36	44
No. of Girls	62	81	85	82	88
Total number of children	92	121	128	118	132

There was no statistical difference in scores by gender ($p = 0.2731$, Confidence interval $0.115 - 0.355$)

Breakdown of mean scores by gender

	2012-13	2013-14	2014-15	2015-16	2016-17
Mean Scores- Boys	3.6	3.2	3.2	3.3	3.3
Mean Scores- Girls	3.4	3.2	3	3.1	3.2

There was no statistical difference in scores by gender ($p = 0.1950$, 95% Confidence interval -0.0888 - 0.368)

Results

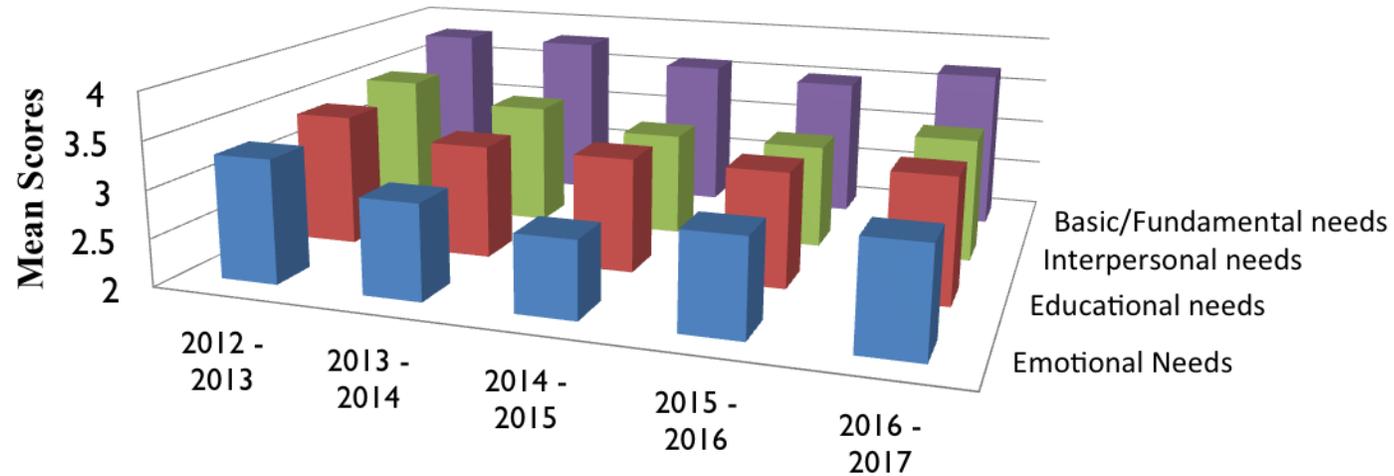
- There was a clinical drop in mean scores in 2014-2015 globally but more pronounced in the area of emotional needs (**from 3.3** in 2012-2013 **to 2.8** in 2014-2015)
- In looking at specific responses, some of the common concerns expressed were
 - “I am unable to share feelings openly with other housemates”
 - “The feeling of living in a family environment is missing”
 - “I am ashamed of living as an orphan”
 - “I have a lack of confidence in facing the outside world”

Interim Measures

- To **address the drop in mean scores**, certain measures were put in place including:
 - Inclusion of a psychologist for at least 6 hours a week in all homes from 2014
 - The psychologist worked with individual children and with the Carer team
 - Workshops and life skills training groups were conducted with children
 - The areas of need from the QANCC were used to tailor groups with the Carer team
 - Specific committees were formed to address Education, Health, Aftercare and for Alumni; these met monthly and discuss areas of need and targets for intervention
 - The data from the QANCC was also used in revising the Care Plan for each child
- The results of the measures taken showed a rise in the mean scores overall and in each category of needs

Mean Scores of Needs

Mean Scores of Needs by Years



	2012 - 2013	2013 - 2014	2014 - 2015	2015 - 2016	2016 - 2017
Emotional Needs	3.3	3	2.8	3	3.1
Educational needs	3.4	3.2	3.2	3.2	3.3
Interpersonal needs	3.5	3.3	3.1	3.1	3.3
Basic/Fundamental needs	3.8	3.8	3.6	3.5	3.7

Strengths & Limitations

- More analysis may be needed to deduce statistical differences through the years
- The results studied are chiefly descriptive in nature owing to the lack of a control group being assigned at the time due to the nature of this population
- Test – retest reliability was not assessed due to concerns of carry over effects
- However, **QANCC has provided useful and workable longitudinal information helping make direct changes in the quality of care at Udayan Care**

Future Directions

- Comparison of QANCC with other surveys like Child Health and Illness Profile - Child Edition, Children's worlds survey, or the British household survey from the UK Millennium cohort study will help with standardisation of results ^(5,6,7).
- The plan is to continue advocacy at the governmental level to make child derived feedback a standard of practice.
- On-going goals aim to utilize expert guidance in applying the findings nationally in policy-making
- **The hope is to make QANCC more available to non-governmental organizations and care homes, regionally and nationally.**

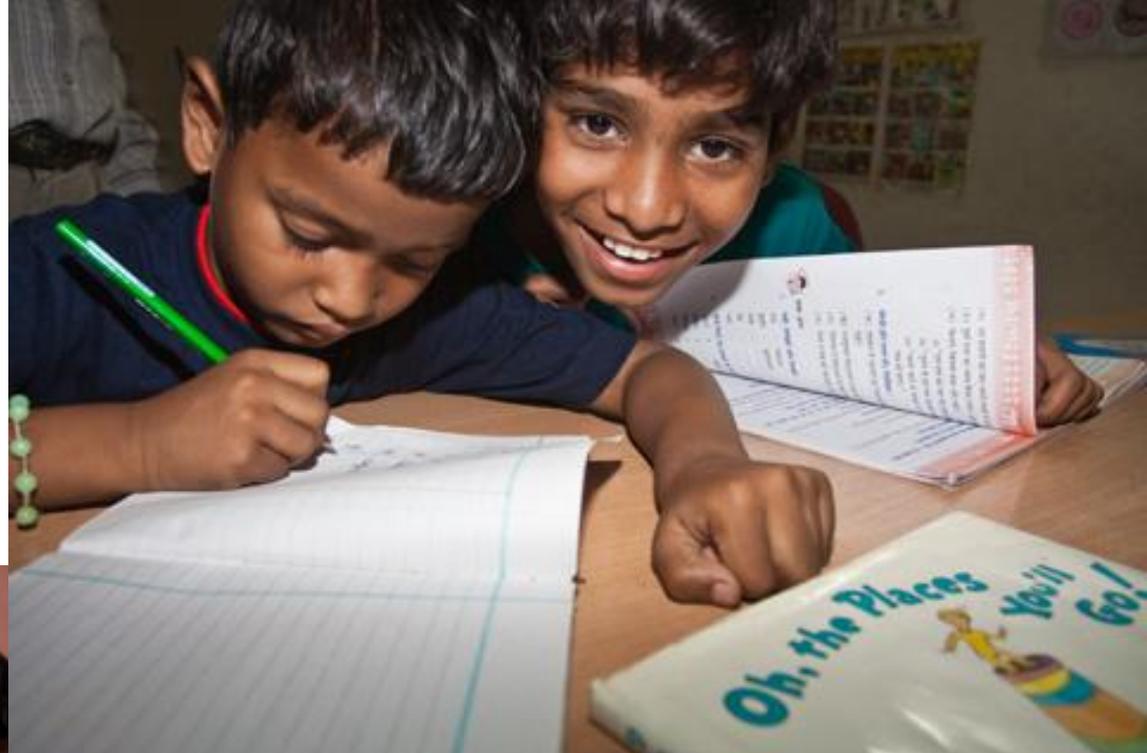
5. Riley A.W., Forrest C. B., Rebok G. W., Starfield B., Green B. F., Robertson J. A., Friello P. (2004). *The Child Report Form of the CHIP–Child Edition, Reliability and Validity* (Vol. 42, No. 3). *Medical Care*.

6. *Children's World's report*. (2015). Retrieved from http://www.isciweb.org/_Uploads/dbsAttachedFiles/ChildrensWorlds2015_FullReport-Final.pdf

7. Patalay P., Fitzsimons E. (2016). *Correlates of Mental Illness and Wellbeing in Children: Are they the same? Results from the UK Millennium Cohort Study* (Vol. 55, Issue 9). *Journal of the American Academy of Child and Adolescent Psychiatry*



Thank You!



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