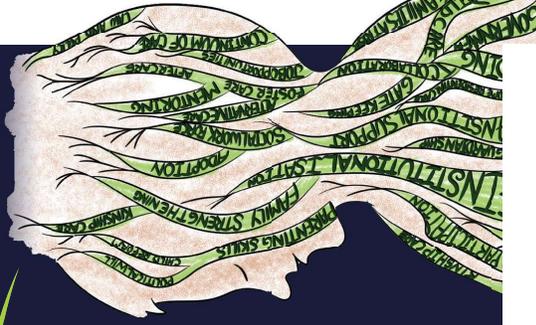


Special Focus on  
Deinstitutionalisation, Family Strengthening and Child Abuse

# INSTITUTIONALISED CHILDREN EXPLORATIONS AND BEYOND

A Journal on Alternative Care

VOLUME 7  
ISSUE 2  
SEPTEMBER 2020



INSTITUTIONALISED CHILDREN EXPLORATIONS AND BEYOND

VOLUME 7 • ISSUE 2 • SEPTEMBER 2020



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ISSN 2348-3003



Volume 7 Issue 2 September 2020



Institutionalised Children  
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## **Aims and Scope**

*Institutionalised Children Explorations and Beyond* is an international, multi-disciplinary, peer-reviewed academic journal on Alternative Care for out-of-home-care (OHC) children and young persons, focused on the South Asia region. The journal documents original research papers, good models of care practices, comprehensive desk review papers, editorial and foreword, expert opinions, interviews, and book and movie reviews. Along with addressing issues that can influence policy reforms, decision-making and improve practices and standards of care, the content of the journal aspires to strengthen research, knowledge and practices currently prevalent in the region.

In essence, *Institutionalised Children Explorations and Beyond* sees itself as a forum for studies, discussions, debates and research on issues that would lead to better practices of care, improve mental health, and encourage the integration of OHC children and young persons, including the differently-abled, into the mainstream and thus to their inclusion in civil society. The journal will be of interest to board members, managers, caregivers, psychologists, counsellors, psychiatrists, volunteers, and social workers, in governmental and NGO organisations, as also to policy-makers and university faculty who are interested in the care and study of children in institutions, as well as in other alternative forms of care. Students in social work, psychology, law and other related disciplines across the South Asian countries, as well as other mental health professionals interested in these studies, will find the journal useful. The scope includes encouraging studies on these issues by universities and hospitals, together with clinics, young professionals and those in the field of care giving, especially in the non-governmental not-for-profit-sector. The belief is that such education, and sharing of knowledge and experiences would lead to more dynamic prevention as well as rehabilitation models.

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### **Funding Support**

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## Foreword

Institutionalised Children Explorations  
and Beyond  
7(2) 119–123, 2020  
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[in.sagepub.com/journals-permissions-india](http://in.sagepub.com/journals-permissions-india)  
DOI: 10.1177/2349300320954953  
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### Monisha Nayar-Akhtar

On a dreary spring morning, I sat down to write the foreword for the September 2020 issue of the *ICB* journal. From my office in Philadelphia, I looked outside. The skies were dark, threatening a downpour, which echoed my mood. My heart was heavy, and my mind was preoccupied. The tragedy of the pandemic, COVID-19 played on the world stage and had globally changed our way of life. It spared no country and now, as all countries reported being in a state of lockdown, seemed to have the upper hand. Families have been ripped apart, thousands of lives lost, locked within the cold concrete walls of local hospitals, their loved ones left to grieve silently, unable to comfort, hold hands or even say a prayer at their bedside. Never has humanity, so acutely felt a tragedy that befalls when a silent killer exists in their physical and emotional space.

With this backdrop of emotional and physical turmoil and exhaustion, I began to ponder about the main thrust of the September issue. The year 2020 had a singular objective in our mind. To explore issues related to the global mandate of deinstitutionalisation around the world and for the SAARC region in particular. The process entailed ushering in programmes and incentives to move children who lived in institutional care to foster care placement, adoption or even reintegration within their families whenever possible. With the governments' involvement, family-strengthening programmes and with the power of the UN mandate, this was the trajectory that had been forecast and seemed well on its way in terms of a regional embrace and acknowledgement. With this in mind, our March 2020 issue was published under the skillful guidance of Dr Delia Pop and her team from Hope and Homes for Children, UK. As our guest editors for that issue, they put together a series of articles from all around the region that explicated on the implementation programmes and ushered in an era, which although complex still remained promising.

But then, the world and the need for implementation of deinstitutionalisation, it appeared, as if, it came to a screeching halt. What appeared to be a promising start, now faced challenging barriers, filled with questions of care, management, safety and implementation in a world, now distraught by what still largely remained unknown. While the geo-political and social implications of this derailment are obvious, let me elaborate on the psychological impediments that accompany this process at this crucial time.

A brief history of deinstitutionalisation may be helpful at this time. The programme began as a social experiment in the 1950s in the United States. It was a government policy to move mental health patients out of state-run facilities into community-based mental health centres. It had a dual purpose to cut government budgets as well as to improve the treatment of the mentally ill. It is also now used to describe the transition of children without parental care or children placed in institutions in need of care and protection to alternative care settings, such as, foster care, adoption and other family-based models of care, and reforming childcare systems (Whetten, K et al, 2014). These movements with children without parental care received its impetus from the abysmal conditions of orphanages noted in Romania. The movement has gained momentum worldwide and is now seen as the cornerstone of optimal care for orphaned children.

Despite its sociological roots, the movement of deinstitutionalising as a response to improving childcare systems also has a psychological foundation. Early observations of infants placed in an institutional setting led Rene Spitz, a psychiatrist and renowned psychoanalyst, to coin the term 'hospitalism' which designates a vitiated condition of the body due to long confinement in a hospital, or the morbid condition due to the atmosphere of hospital. The term has been increasingly preempted to specify the evil effect of institutional care of infants, placed in institutional care, from an early, age, and particular from the psychiatric point of view (Spitz, 1945, p. 53).

Psychoanalytic ideas that have informed this movement have also played a significant role. In particular, John Bowlby's (1988) seminal description of attachment and early mother infant bonding sealed and laid the foundation for an overwhelming body of research that established at its core the significance of a primary care family in raising a healthy child. Several research projects compared the development of children raised in institutions to those raised in biological families and foster care. Findings from these studies established delayed physical growth as well as cognitive, emotional and behavioural problems in institutionalised children compared to those raised in a family setting. However, more recent research comparing institutionalised children to those raised in foster care homes reveal some interesting and contradictory findings. Whetten et al. (2014), examining children raised in institutions and comparing them with children raised in foster care homes, found no significant differences, suggesting that the developmental trajectories and the forces that impact them may be more nuanced and complex than initially understood.

This research however had little impact on the worldwide movement to remove children from institutional homes to alternative care settings such as foster care and return to their families of origin. The UN Convention on the Rights of the Child (1989), now ratified by all countries in the world except for the United States, provided global institutional scaffolding that strengthened the trajectory of this movement and gave it a new and compelling voice in the SAARC region as well.

The March 2020 issue of this journal highlighted several programmes and projects in the SAARC region that have implemented deinstitutionalisation in their regional settings. While the initial findings appear quite promising, it is important to note that the region itself is geo-politically and culturally quite complex. Heavily steeped in cultural norms and values that privilege hierarchical structures in family settings, the implementation of any programme promoting communal healing must take into account of such power relationships and dynamics. The cultural theorist, Heidi Keller (2012) examines the cultural and social norms of this region and provides an interesting perspective on how these hierarchies function and the purpose they serve in strengthening family ties and community relationships. Her elucidation of cultural norms and social relationships establish quite clearly that notions of attachment go well beyond that of a primary figure with significant relationships being established and maintained with many members of the community in the SAARC region.

This takes on a noticeable hue when applied to children living in institutional settings. For many such organisations, such as Udayan Care and SOS villages, the role of elders in the provision of care and other family-related functions is quite significant. Often referred to as mentor mothers and fathers, these individuals play a pivotal role in the lives of many children, and their engagement with their young charges cannot be underestimated.

While the above examines one aspect of the spectrum of care, the SAARC region also faces some challenges that are worth noting. In many cases the children entering the system come from traumatised backgrounds, often having experienced and witnessed considerable violence and neglect. The trajectory of their development in their family of origin is quite dismal and such children needing care and protection often end up at the doorstep of institutional care. In addition, the sheer numbers of children needing such care is overwhelming. From both manmade and natural disasters, the plight of a displaced child is tenuous to say the least. There is extensive literature on the impact of trauma on child's development so, I will not elaborate further on this quintessential component of childcare. It would suffice to say that, for this region, and perhaps many underdeveloped regions of the world, the impact of early attachment and development for the child has a profound impact on how well they do in any setting.

## **And Now the Pandemic**

The trajectory of deinstitutionalisation in the SAARC region is currently unknown. What appeared to be a promising start must now be viewed through the lens of a pandemic that has cast shadow on any programme that relies on moving an individual from a well-established home of care to another. With the hope that the reintegration within a family setting or with another family is quintessential in the care of children without parental care and those in need of care and protection. The global shut down has forced many to face and encounter personal fears, worries and anxieties. No one it seems is safe. Least of all those who are in need of care and

protection and who depend on others for their basic physical, emotional and social needs. The disruption caused by an external outbreak perhaps is a reminder that change itself is complex and nuanced. In the midst of this global upheaval, we find increasing numbers of domestic violence and sexual abuse. Geo-political concerns have led to outrage, disengagement and the rapid ‘othering’ of people who look and sound different from us. For some, this has resulted in millions of displaced workers and migrants who have been forced to return to their villages, encountering harsh and inhumane treatment as uneducated villagers struggle to understand what is largely unknown. In the United States, this has taken the shape of increased prejudice against people of colour, particularly African Americans. The onslaught of discrimination resulting frequently in death has caused an uprising in this country, where the slogan ‘Black Lives matter’ has fuelled a national movement. With the world facing unrest, the implementation of any programme that requires emotional, physical and social stability is questionable.

So, in conclusion, it behooves us to keep the following in mind:

1. The implementation of any childcare directive (as is the case with deinstitutionalisation) must be considered within the socio-cultural context in which it is offered. The failure to do so will result in a breakdown of communal healing which may be the backbone of the SAARC region.
2. The adoption of Western-based ideologies must be shed of their ties to Eurocentric configurations of family structures and dynamics. The SAARC region functions as communities that come together to comfort support and heal in the face of a mass crisis. The breakdown of such structures is often a result of an inability to assimilate parenting styles and attitudes in contemporary times. Furthermore, poverty and manmade as well as natural disasters contribute to the plethora of emotional problems that surround such families and their children. Disregarding models of care such as extended families that have worked for centuries in such regions tantamount to throwing the ‘baby out with the bath water’. It is noteworthy that the juvenile laws of India do not recognise kinship care, which in our current times is quintessential and possibly a viable and healthy solution to a growing problem. Government involvement at many levels of social integration is essential to the task of alleviating human suffering and misery.
3. All families face challenges at some time or the other. Family strengthening programmes and reintegration programmes aimed to vet and prepare for a child to return to family care is not immune to the problems that accompany external realities and hardships. In the case of the current pandemic situation, families facing unemployment, starvation and those who are unable to access any funds, find themselves in close quarters with vulnerable family members, including their wives and children. Increasing numbers of domestic violence, all around the world and the vulnerability of children who are now in the custodial care of people who in some cases may be strangers, is enough to make one pause and rethink the vetting process or the alternative care set up as currently present. While there is no way to predict such situations, the mental health concerns that accompany

such upheavals cause alarm and are indicative of a social and economic system that is unstable at its core.

4. While deinstitutionalisation remains the global objective for the care of children out of parental care, other forms of alternative care must also be kept in mind. Focusing on small group homes, as some have advocated, as well as strengthening the care staff will facilitate the process and ensure a smoother transition when it is resumed.
5. Finally, what ultimately informs us in the delivery and continuation of services are the voices of those who have gone through systems of care. Unfortunately, we do not always have access to their voices. Care leavers who leave institutional care often face challenges of their own. Experiencing social isolation even prior to the pandemic and increasing mental health concerns, their voices are often lost and their plight uncertain. However, if history is any indicator of what can follow, we must heed the dire warnings of the foster care system as seen in the United States. Now touted, by some, as an abysmal failure, it speaks to how the lack of government supervision and monitoring results in a well-intentioned system going amuck. The loss of life, the cost to mental health and the ultimate death of the soul, in some cases, should serve as a reminder of the potential pitfalls that can accompany any programme however well-intended, which has not been vetted in the socio-cultural context in which it is offered.

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## Editorial

Institutionalised Children Explorations  
and Beyond

7(2) 124–127, 2020

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DOI: 10.1177/2349300320941188

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The focus of the September 2020 issue of the *ICB* journal remains largely on the role and implementation of deinstitutionalisation in the SAARC region. In the March 2020 *ICB* issue, Dr Delia Pop of Hope and Homes for Children and her editorial team served as our guest editors. They introduced this topic which has dominated the world stage of institutionalised children for several decades. For the SAARC region, it propelled a movement that is controversial and complex. Though the implementation of deinstitutionalisation is gaining momentum and is espoused as essential to the care of children without parental care who have been institutionalised or are in need of care and protection, there are many stakeholders in the region that find the shift perplexing and complicated. Proponents of deinstitutionalisation are quick to point out that it has the support of the UN, is buttressed by global and local governmental agencies as well as has the support of prominent decision and policy makers. Furthermore, it is reinforced by considerable research and findings that point to the detrimental impact of institutionalisation on a child's cognitive, social and emotional function and the benefits noted when they are placed in family care by returning to the family, through foster care and/or even through adoption.

Since the release of the March 2020 issue however, much has happened in the world. The global lockdown following the pandemic, caused by the novel disease COVID-19, has brought many countries to their knees, humbled humankind, and stopped us in our professional and personal tracks. Schools, day care centres, factories, and places of worship have been shut down indefinitely. Forced to work out of their homes, many now find themselves teaching and monitoring their young ones while continuing their own work, if they are privileged enough to carry out from their home settings. However, not everyone is this lucky. Many have been laid off, and, of course, with over a million and half people infected in the world, the loss of life is staggering. There is still much to be learned about the virus and its stealthy destruction of human life. A vaccine is yet to be found and while many remain hopeful, the loss of life, and an increasing sense of our own vulnerability leave us feeling crippled, anxiety ridden and depressed. Symbolic of its impact has been the blow to our continued tradition of holding the BICON. Scheduled for September and to be held in Nepal, the event has been postponed till the year 2021. Despite these unusual times, I am delighted to introduce Ms Gurneet Kalra, who joined our team as a Senior Coordinator in March 2020. Ms Kalra obtained her Doctorate from Jamia Millia Islamia with a thesis researching a model for deviance prevention among students in schools in Delhi. As a trained

criminologist, she brings a wealth of experience and knowledge working with people from diverse backgrounds. We sadly had to bid adieu to Lakshmi Madhavan who left to pursue other career growth opportunities. She will however continue to serve as our movie editor.

We begin this issue with a foreword in which I examine the multiple forces at play as we continue to traverse this path of placing children in foster care homes, or in adoption as well as working towards returning them to their home of origin. Family strengthening programs continue to be significant in the SAARC region and given the sheer number of vulnerable children in need of care and protection, will continue to play a significant role in the deinstitutionalisation process. Recognising the unique cultural considerations of the SAARC region, I draw attention to the hierarchical nature of family relationships and the importance of elders in the developmental trajectory of a child. Western based notions of attachment that rely exclusively on a primary parent child relationship, perhaps may inadvertently be perpetuating a family style that could lead to great isolation and mental health problems.

In our interview section, two prominent clinicians and researchers in the field present their informed and thoughtful perspectives on this topic. Niels Rygaard and Patrick Tomlinson hail from different parts of the world. The interview conducted by Ms Leena Prasad, is thoughtful with carefully formulated questions that capture the dilemmas and concerns related to institutional care and especially those in the SAARC region. Mental health concerns related to trauma and care of the child suggest that any implementation program encountered within the SAARC region would be complex and likely to reveal the cultural nuances that accompany the child in their placement. It is interesting to note that despite their widely diverse experiences, the responses were remarkably similar perhaps reflecting the universal nature of care and communication in the global setting.

The research section begins with a paper by Shubha Murthi and Chathuri Jayasooriya, both of SOS Children's Villages. In their paper, the authors analyse the implementation of deinstitutionalisation in Rwanda. Working both with the primacy of the family-based care as well as the misconceptions that surround institutional care, the authors attempt to understand and present arguments that underscore the practice of deinstitutionalisation as aligned with the principles of necessity, suitability and the best interest of the child.

Elaborating on this overarching theme, Mohan A.K. and Raneesh C. in their paper, reiterate this need for deinstitutionalisation but stress that working with the care staff will be essential to the effective implementation of such programs. Working with Children's Homes of Kasaragod district of Kerala, the researchers collected data from the childcare staff, using an interview schedule and findings from a socio-economic scale. Their findings reveal a dire lack of knowledge and skills in this group. In their recommendations, the authors stress the need to 'modernise' this group, as they remain essential to the process of deinstitutionalisation.

Moving now to the SAARC region, we have two papers. From Sri Lanka, we have a paper by G. A. Wasana Sudesh, whose work in a SOS Children's Village in Sri Lanka, echoes the sentiments expressed in the prior contribution. Mr. Sudesh

elaborates on the Local Process Initiative or LPI, as an effective strategy that demonstrate deinstitutionalisation and quality alternative care. Several SOS Children's Villages have carried out this process successfully. Using government officer as 'change agents', they are central and pivotal to the successful implementation of this process. It is hoped that this process will eventually result in a model to avoid family separation, developing group-level deinstitutionalisation and quality alternative care that is multidisciplinary in nature and incorporates biological, psychological and social perspectives.

Helen Veitch and Lopa Bhattacharjee examines the care leavers' views and their transition from leaving care to living independently in the community, providing recommendations for practitioners and policy makers on the transition from leaving care to living independently in the community. Though it is not specifically a paper on deinstitutionalisation, its exploration of the process of transition and its aftermath offers us insights and deepens our understanding. In this, we end the research section with a contribution from Ms Arthi Shankar Kozhumam, a scholar from Duke University. Udayan Care has been the beneficiary of their work for several years and this research article is another stellar contribution from them. In this paper, the research team examines the nature of attachments of the orphaned and separated children (OSC) in Residential Care. Their findings reveal that OSCs form multiple attachments to caregivers over time, with attachments starting and remaining relatively strong in the long term.

Andy Lillicrap's review of the work conducted by One Sky Foundation and their experience over six years to establish holistic child and family support services serves as an example of a model of care that aims to keep families together. Examining the models of deinstitutionalisation that operate in countries where there are unregistered private homes, and the challenges that accompany this, the author provides a viable alternative to enable reintegration. Working in the rural border district of Sanghlaburi, the One Sky foundation, provides locally focused, holistic and family support services to enable a loving family environment.

For our paper on an international perspective, we are delighted to present a contribution by one of our editorial board members. Ian Anand, provides an extensive review of the literature on deinstitutionalisation and child protection reform in South Asia with a specific aim to consolidate the knowledge, explore challenges to this legislative framework and to propose strategies to overcome the challenges. He identifies three strategies that would be helpful in promoting deinstitutionalisation in the SAARC region. These are utilising a regional approach, decentralised implementation and capitalising on traditional alternative care practices.

For our opinion piece, Gurneet Kalra provides a moving and poignant account of the narrative of two young care leavers who transitioned out of residential care. In her reflections on these narratives Ms Kalra raises an important question. Sending an abandoned child or a child raised in residential care to their family, or to their kith and kin deserves serious attention. Without the benefit of training, being monitored and supervised for good parental care and practices, these children will face a lifetime of trauma with indelible scars. Family training programs along with government supervision (currently lacking) is imperative.

Ms Kalra stresses the importance of cultural norms and social values that are prevalent in the region, salient in the reports from many of the other authors cited previously in the editorial.

Lakshmi Madhavan chose the movie 'Manchester by the Sea' directed by Kenneth Lonergan to elucidate on the role of the extended family and kinship care. The relationship that develops between an uncle and his nephew, (following the loss of the father) highlights the trials and tribulations that accompany any kinship care. Not without it challenges and reminiscent of loss, grief and the inevitable mourning that accompanies shifting dynamics between family members. It is a movie that brings tears to many an eye and one a reminder that family reunification whether mandated or by chance can result in powerful forces that are emotional and transformative in nature.

For our book review we have Dr Lara Sheehi's critical analysis of Tara Winkler's self-reflective account of how she started an orphanage in Cambodia. The book 'How (not) to Start an Orphanage', documents the author's experience and naïve efforts in this journey, in the end concluding, 'unnecessary institutionalisation of children is one form of child abuse we can end in our lifetime' (p. 372, in the review). However, as Dr Sheehi points out this 'conclusion' is steeped not only in the author's personal struggle and journey but also in her unmitigated acceptance and prerogative of Western ideologies and practices. At times this borders on racial enactments that are left unexplored in the region. Dr Sheehi examines critically the underlying power dynamics and systems of oppression that maintain poverty. Referencing 'orphanage tourism' or 'voluntourism' as further extensions of these systems, Dr Sheehi suggests highlights on how the book is a guide to readers to redirect their attention and funds away from such orphanages. Instead focusing on communities of communal healing and helping support family reunification interventions such as the Cambodian Children's Trust is far more effective in such endeavours.

**Monisha C. Nayar-Akhtar**  
*Editor-in-Chief*