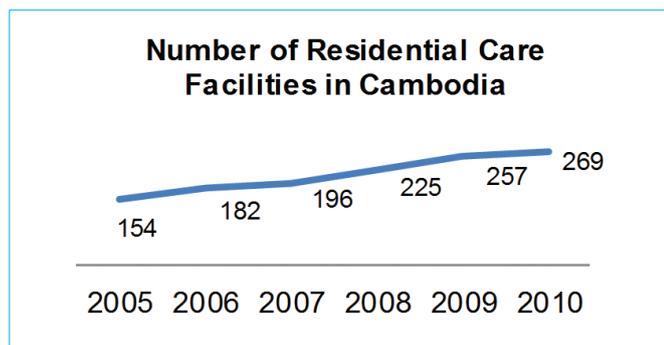


## What is residential care?

Residential care refers to group living arrangements for children without primary caregivers or whose biological parents are unable to care for them. It is meant to provide 24-hour care by paid staff, meeting children's basic needs of shelter, food, clothing and education. These can be places of safety for emergency care, transit centres in emergency situations, and all other short and long-term residential care facilities including group homes. Other terms used for this form of care are institutional care and orphanages.

## Residential care in Cambodia

In recent years, residential care in Cambodia has become increasingly common. Since 2005, there has been a 75 per cent increase in the number of residential care facilities across the country, totalling 269 in 2010. This figure only captures facilities that are registered with the Ministry of Social Affairs, Veterans and Youth Rehabilitation—the ministry responsible for the welfare of children—, so actual numbers could be much higher.



The number of children in residential care has also increased sharply from 6,254 to 11,945 between 2005 and 2010.<sup>1</sup> Contrary to popular belief, most children living in residential care in Cambodia are not orphans nor abandoned, but children from vulnerable households brought there by their parents or extended family to help relieve a financial burden.

The rapid increase in placement of children in residential care is against government policy, which states that family and community-based care are the best options for the alternative care of children, that institutional care should be a last resort and a temporary solution, and that the primary role in protecting and caring for children lies with their family. This is reflected in the Policy on Alternative Care for Children (2006) and the Minimum Standards on Alternative Care for Children (2008), which provide a regulatory framework and guidance on alternative care in Cambodia.

Despite the government's strong stance against residential care, without adequate regulation the number of residential care facilities continues to rise each year. Contributing to this increase is the support that residential care receives by local government, which often suggests families to put their children into care in the absence of alternative support mechanisms.

Cambodia's growth in residential care is also attributable to the wealth of support from overseas donors, who with the best intentions provide support and funding to children in orphanages, unaware of alternative family and community-based care options. While some residential care facilities are government-run, they are mostly managed by private or faith-based non-governmental organizations, and almost all residential care centres are funded by individuals from overseas. As a result, many centres turn to orphanage tourism to attract more donors, fuelling a system that exposes children to risk.

Whilst there is a requirement for all NGO-run residential care facilities to be registered in order to operate within Cambodia, not all register with the same ministry, making thorough regulation and enforcement of minimum standards difficult. Regulations and requirements for opening residential care centres are also unclear. Experience in the field of childcare is not an official requirement, nor is it a requirement under the Minimum Standards on Alternative Care for Children.

## Why are children in residential care?

Poverty is the main reason parents give for placing their children in residential care in Cambodia, with 47 per cent of children currently in residential care having been placed there primarily due to poverty.<sup>2</sup> Given the limited access to social safety nets and community support services for vulnerable families, residential care increasingly fills a niche in providing much-needed social support.

Several factors exacerbate poverty and add to the vulnerability of children within poverty-affected families. Changes in family circumstances such as the death of a parent, divorce and remarriage, as well as illness and migration all contribute to the decision to place children in residential care.

Some residential care facilities exploit the problem of poverty by actively recruiting children in poor families by convincing, coercing or even paying parents to give their children away. Through this kind of recruiting, many parents believe their children would be better off in care, unaware of the risks involved for children in terms of abuse, sexual and labour exploitation and even trafficking.

Lack of access to education, largely due to an inability to afford informal school fees and associated costs, is a further factor that contributes to families placing their children into care. Findings<sup>3</sup> from a recent study on attitudes towards residential care in Cambodia show that 91.9 per cent of family members agreed/definitely agreed that a poor family should send a child to an orphanage for education if they cannot pay for the child's education themselves.

Education should not be viewed as a legitimate reason for child separation from their families. Whilst a child's right to education is a fundamental right, the United Nations Convention on the Rights of the Child also clearly states that a child shall not be separated from his or her parents. Children's rights in one arena should not be denied in favour of achieving rights in another. Parents and children should never be placed in the position of having to decide between education and family life together.

<sup>1</sup> Ministry of Social Affairs, Veterans and Youth Rehabilitation, Alternative Care Database, 2005-2010.

<sup>2</sup> Ministry of Social Affairs, Veterans and Youth Rehabilitation, Alternative Care Database, 2005-2009.

<sup>3</sup> Independent research commissioned by the Government of Cambodia with technical guidance and support from UNICEF.

Many parents have little knowledge of alternatives, believing they have no other option than to put a child in care if they cannot afford to provide adequate food, shelter or education for the child. Many do not understand that even in the best resourced residential care facilities, damage occurs to children through such forms of collective care or separation of children from their families and primary carers. Likewise, the majority of local government actors, as well as donors and foreign NGOs that set up and finance orphanages, have little knowledge of alternative care arrangements. Overseas donors, including tourists, often give money to residential care facilities without realizing they are funding a system that is contributing to the separation of children from families.

## Why is residential care problematic for children?

Children in residential care are often not orphans, meaning that it causes unnecessary family separation

In 2009, only 23 per cent of children in residential care in Cambodia had no living parents.<sup>4</sup> Most children had at least one living parent, and many more had living grandparents, meaning that these children could be cared for in a family or community environment. Contrary to this, almost half (49.3 per cent) of donors<sup>5</sup> believed the main reason children were in residential care was because they had no parents, highlighting an inaccurate understanding of the reality.

### It prevents the healthy development of children

Sixty years of global scientific research has shown that living in residential care can harm a child's social, physical, intellectual and emotional development and has long-term impacts in their adult life. Research shows that children raised in residential care can suffer from delays or abnormalities in speech and brain development and circuitry; delays in physical growth and a higher exposure to disease; clinical personality disorders; and emotional insecurity.

Residential care facilities in Cambodia often accept volunteers to work with the children. Most of these volunteers only stay for a short period, which can negatively impact a child when the volunteers leave. Research has shown that the constant turnover of caregivers (like volunteers) can harm children's development.

Research has also shown that children in residential care tend to develop dependencies on staff and are unable to develop the social skills needed for adult life. Institutional living arrangements mean that children do not develop—through role modelling and mentoring—the life skills for family living and survival. Children are wholly reliant on other adults to provide or prepare food and clothing, organize household chores or for daily routines, and they do not gain the skills for normal socialization in a family and community context. This makes it difficult for them to live independently and form long-lasting relationships, which affects their ability to re-enter society later in life.

In order for children to develop normally, they require strong bonding and attachment to a care giving figure that is established at birth and continues throughout the child's life, which simply cannot be met in residential care facilities due to high staff turnover and a low ratio of staff to children.

### It can lead to higher levels of abuse

Residential care has been shown to place children at increased risk of physical and sexual abuse. Staff and volunteers seldom undergo appropriate background checks before being hired to work with children. In some centres, children of all ages sleep together in the same room, and some staff also share beds with the children. Although it is common for families to sleep together in Cambodia,

when this situation is replicated in an institution, it places the children at risk of sexual abuse.

With low staff-to-child ratios in most residential facilities, many children suffer from physical and emotional neglect, as well as an increased risk of bullying and violence by other children in the centre. Most residential centres do not have a system in place for children to report abuse.

### It erodes traditional care structures

Cambodia has a long tradition of caring for vulnerable children through community and extended family forms of care, which is where the vast majority of children without parental caregivers are living today. The rapid increase in residential care facilities threatens to erode these existing systems of alternative care and places children at risk.

### Poor conditions and provisions for children

Some residential care facilities in Cambodia face funding problems and as a consequence, children suffer from a lack of food and education and poor living conditions. Lack of funds has been shown to result in child labour, such as forcing children to perform traditional dances for tourists in order to raise funds or to fish, plant rice and farm. It has also led to children being put in dangerous situations, such as soliciting money for the residential care centres at night.

### Difficulties of reintegration into the community

Children who live in residential care for extended periods of time tend to face difficulties reintegrating back into the community when they leave, often as young adults. They may have developed dependency issues, a sense of abandonment, face discrimination in their communities, and often lack the necessary social skills to adjust back into community life. The absence of support networks and limited job prospects can further accentuate the difficulties.

## Legal and policy framework

### National policy

In 2006, the Royal Government of Cambodia adopted the Policy on Alternative Care for Children, which articulates its support for family- and community-based care. Among the objectives of the policy are to ensure that children grow up in a family and in a community, in particular with their biological family and community of origin, and to enhance the capacity of the community to care for and protect vulnerable children through promoting and strengthening community safety nets. The policy is complemented by the Minimum Standards on Alternative Care for Children, which were adopted by the government in 2008.

### UN Convention on the Rights of the Child

The UN Convention on the Rights of the Child, to which Cambodia is a signatory, affirms a child's right to be raised in a loving home, by their family whenever possible. In particular, the Convention states that,

- The child, for the full and harmonious development of his or her personality should grow up in a family environment (Preamble).
- The child shall have the right to know and be cared for by his or her parents (Article 7).
- State parties shall ensure that a child shall not be separated from his or her parents, unless such a separation is in the best interests of the child (Article 9).

<sup>4</sup> Ministry of Social Affairs, Veterans and Youth Rehabilitation, Alternative Care Database, 2009.

<sup>5</sup> Donors refers to tourists and charity organizations that provide funding to residential care facilities in Cambodia.

## International standards on alternative care

The increase in placement of children in residential care in Cambodia does not comply with the principles of care articulated in international standards on alternative care, including the 2003 Stockholm Declaration on Children and Residential Care, and the 2010 UN Guidelines for the Alternative Care of Children.

## Alternatives to residential care

When it comes to alternative care<sup>6</sup>, no one size fits all. However, family and community-based care is the preferred option for children without primary caregivers. This refers to care provided within a family-like setting in the community, including through adoption, guardianship, foster care and kinship care (care within the extended family). Regular contact between children and their families should be supported, with the aim of reunification if it is in the best interests of the child.

Keeping children within their own families offers the best environment for their development, and there are several examples in Cambodia where families are successfully supported to keep their children at home. Most of this support comes from NGOs working at the community level, but local level government representatives are increasingly playing a role. Support services need to be strengthened and their sustainability ensured, with best practices replicated across the country.

There are, of course, severe or emergency situations where children may be in danger of suffering significant harm, such as extreme neglect, ongoing abuse, exploitation or maltreatment, in which the removal of a child from their family may be in the child's best interests to ensure their safety and protection. Meanwhile, families require support and orientation by competent institutions and professionals to adequately assume their responsibility to provide a protective, non-violent and nourishing environment for their children. Short-term alternative care options may therefore be necessary before reunification of the child with their family or finding more permanent alternative care living arrangements.

## What is being done?

Important progress is being made to protect the rights of children in Cambodia and to ensure that children are able to grow up in a safe and stable family environment.

### Building a sustainable child protection system

Many children face multiple protection risks, and because these risks are interlinked, vulnerability in one area often leads to increased vulnerability in others. While efforts focused on individual issues have produced substantial benefits, the approach has often resulted in fragmented child protection responses and failure to address key protection issues.

As a result, the Cambodian Government, with UNICEF support, is starting to reframe the links between children's rights, child protection and child well-being, by looking more broadly at protection deficits facing all children and addressing the structural or root causes for omissions in prevention and response. This means assessing and strengthening institutional arrangements for a child protection system, establishing key roles and responsibilities and improving coordination between the actors, which provides a more cohesive, sustainable, holistic and cost-effective way to address child protection concerns, resulting in longer-term impacts for all children.

Providing support to families is crucial to prevent the separation of children from their families. Addressing complex and often interlinked factors, such as poverty, HIV and AIDS, family breakdown, disability and ethnicity, require a holistic and systemic response to identify families at risk, address their needs and prevent the unnecessary separation of children from their families.

### Strengthening monitoring and enforcement of national policies

The Ministry of Social Affairs, Veterans and Youth Rehabilitation has developed a monitoring tool based on the Minimum Standards on Alternative Care for Children, which is used to monitor registered residential care centres across the country. Although the Minimum Standards set clear guidelines for residential centres, only 64 per cent were estimated to comply with the guidelines in 2008. The government needs to enforce relevant policies and legislation, particularly at the local level where decisions are made to place a child in care.

Implementation of the policy must also be accompanied by increasing awareness in the government, and within society, of the importance of family care for a child's protection and development and the adverse effects of residential care. This must include directing NGOs with interests in institutional care to family preservation and support programmes, as well as working with NGOs to improve the quality of alternative care for children in Cambodia.

Regular monitoring and reporting also needs to be strengthened to regulate the use and conditions of residential care and ensure that all residential facilities meet national and international standards.

### Social protection for the poor

Social protection, including cash transfers and family support services, can go a long way to support vulnerable families and prevent separation. The majority of children in residential care in Cambodia could be living with their family or extended family, if such basic support was available.

The Government of Cambodia has started to implement its National Social Protection Strategy, which was adopted in early 2011. As part of this strategy, the government is exploring the development of child-sensitive social protection and preventative measures, including social transfers that support vulnerable households to continue to care for their children. UNICEF is supporting the government in these efforts.

### Exploring new alternatives

UNICEF is working with the government and civil society partners to identify and promote alternatives to residential care that are considered good practice because they focus on promoting and protecting children's rights with the active involvement of families and communities. This includes developing different models of alternative care, family support and social welfare services at the community level for vulnerable children and their families. Through documenting evidence of what works well, various models will subsequently be scaled up to benefit children and families across the country.

### Communication and advocacy

Communicating the importance of family and community-based care to the government, donors, communities and other stakeholders is pivotal to reducing the number of children in residential care and improving the quality of alternative care options available to children in Cambodia.

<sup>6</sup> The definition of alternative care is: "care for orphaned and other vulnerable children who are not under the care of their biological parents" (Cambodia's Policy on Alternative Care for Children, 2006).

Success in the transition away from residential care towards quality family and community-based care requires that deeply entrenched social attitudes and practices are addressed. Current attitudes and practices include the use of residential care to address long-term family and social problems; the belief that basic shelter, food and education are alone sufficient for the healthy development of children; and that children in residential care have access to better opportunities than those living in the community.

Building on the findings of the study on attitudes towards residential care, key messages for local government representatives, village chiefs, families, communities, donors and tourists are being developed and disseminated through various communication channels.

### Local authorities and village chiefs

With better knowledge and understanding of existing and potential family and community-based care arrangements, local authorities and village chiefs can provide appropriate support to families so that they avoid the dangers associated with residential care and take on parental responsibilities with guidance. Focal points at the commune level can work with families to explore local support systems, including local NGOs.

### Families and communities

UNICEF is working with the government to support families through knowledge on how to keep children safe from harm and where to find help when help is needed. This includes coordinating and developing long-term societal behaviour change campaigns to address key child protection issues, such as violence against children and safe migration. It also involves strengthening referral networks with NGOs, pagodas and others so that support is provided to families in need, before separation occurs.

### Raising awareness among donors and tourists

Through raising awareness about the negative impacts of residential care on children and the benefits of family and community-based care arrangements, donors must be encouraged to shift their funding allocations towards prevention and reintegration programmes that strengthen traditional community coping mechanisms and allow children to grow up in a family structure within a community.

## Key recommendations

### National government:

- Strengthen the mandate of the Ministry of Social Affairs, Veterans and Youth Rehabilitation to regulate, monitor and inspect both registered and unregistered residential care facilities.
- Develop training and operational guides to assist staff in care facilities to understand and implement the Minimum Standards effectively.
- Close residential facilities that repeatedly fail to meet the Minimum Standards on Alternative Care for Children and oversee the development of reintegration plans for children living in these facilities.
- Ensure cooperation between the Ministry of Social Affairs, Veterans and Youth Rehabilitation, the Ministry of Interior, the Ministry of Justice and other related sectors to regulate, inspect, monitor and report violations in residential care facilities.
- Reject requests from organizations to start new residential care facilities, if those they already run fail to meet the government's Minimum Standards.
- Conduct rigorous assessments into applicants wishing to open residential care facilities and their rationale for establishing a child care facility.

- Restrict the number of residential care facilities operating in any one location to respond to real domestic demands.
- Divert requests from organizations that attempt to establish residential care facilities towards community and family-based care and support programmes.
- Advocate for a procedure that requires all other ministries to inform the Ministry of Social Affairs, Veterans and Youth Rehabilitation of all NGOs that are registered to provide care for children.
- Advocate for family-based and community-based care with donors by providing a package of information outlining government policy, the negative impacts of institutional care on children, and the promotion of family-based interventions.
- Put in place a data-management system on children living in alternative care settings that supports monitoring, oversight and enforcement of procedures.
- Develop procedures to enforce the application of the Minimum Standards on Alternative Care for Children and lay down the roles and responsibilities of government actors at all levels in oversight, management, inspection, placement, review and permanency planning and follow-up of children in alternative care.
- Develop procedures for reintegration and permanency planning of children currently living in residential care, in close collaboration with residential care facilities and partners. This should also take place in cases where residential care facilities are closed.

### Local government:

- Ensure that the Policy on Alternative Care for Children is fully implemented and appropriately monitored.
- Provide training to local government representatives on roles and responsibilities relating to alternative care for children, including the benefits of raising vulnerable children within the family or with relatives, and the adverse effects of institutional care.
- Village Chiefs and Commune Councils should identify vulnerable children and their families and put them in contact with available social support and other local programmes, including social protection programmes, that support families and encourage parents to keep their children living at home whenever possible. The widely distributed national directory of services for vulnerable people can be a valuable resource, available at: <http://www.novctf.gov.kh>

### Donors, tourists and volunteers:

- Overseas donors, including tourists, should refrain from visiting and donating to residential care facilities.
- Overseas visitors should be encouraged to volunteer or donate to programmes that support and promote family and community-based care, reintegration of children into family and community-based care, and provision of social services to vulnerable children and their families within a community setting and which prevent family separation. For more information on how to volunteer with or donate to such programmes, please visit <http://www.childsafe-international.org/>

For further information about attitudes towards residential care in Cambodia, see "With the best intentions: A study of attitudes towards residential care in Cambodia", MoSVY, 2011, available at <http://www.unicef.org/cambodia/>