

## **Current Status of Child Care Institutions and Institutionalized Children in Sri Lanka**

# **A SITUATIONAL ANALYSIS**



**Department of Probation and Child Care Services**  
Ministry of Women and Child Affairs



RESEARCHED BY:  
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# Preface

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The Department of Probation and Child Care Services provide the alternative care for the children who are without adequate parental care and protection due to various reasons and children in conflict with the law. This includes providing institutional care as an alternative means of providing necessary protection. The department has identified the need for conducting a survey to find the status of the children in such homes maintained by government and non-governmental organizations. The key purpose of the survey includes understanding the situations of children living in institutions and identify suitable children that can be reunified and reintegrated to families and the society. The research has primarily collected the data by means of a questionnaire and observing all the children's homes. Based on the findings of the survey we are planning to introduce effective solutions to the identified problems

through the intervention of the National Department of Probation and Child Care Services and the Provincial Departments of Probation and Child Care Services.

There has been a similar survey conducted ten years ago but it is clear that the reasons of institutionalization of children have been drastically changed in today's social, cultural and economic context of the country. Further, it has become clear that children are institutionalized unnecessarily as a result of not considering institutionalization as the last resort for care and protection of children. However, since institutionalization of children does not ensure the best interest of children and have a negative impact on their development, wellbeing and future, it is important to provide care and protection for them within a family environment in all situations possible.

It is my belief that this research and its findings will help immensely to take necessary policy decisions and actions to ensure children have access to quality and child friendly alternative care options that ensure the best interest of the child.

It is our expectation that this research on the current situation of child care institutions and children living in institutional care will provide an understanding on measures needs to be taken to enhance the role of family and society to provide adequate care and protection for the children in Sri Lanka.

Yamuna Perera

**Commissioner**  
**Department of Probation and Child care service**

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by various government and non-governmental organizations.

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# Executive Summary

The study on the current status of the Child Care Institutions and the institutionalised children in Sri Lanka was undertaken by the National Institute of Social Development (NISD) for the Department of Probation and Child Care Services, sponsored by the United Nations Children's Fund (UNICEF). The objective of the study was to provide basic information on the current situation of children under institutional care in the entire country, in order to identify the issues affecting those institutionalized children and to recommend plausible solutions.

To achieve research objectives, a mixed methodology was adopted using both quantitative and qualitative data, with greater flexibility in adopting the techniques that were best suited for the study. As the study was a situational analysis, every possible attempt was made to enumerate and assess all the characteristics of the Child Care Institutions (CCIs).

According to the survey findings, currently there are 14,179 children in 414 institutions located in all nine provinces in Sri Lanka. Out of the total number of children residing in institutions at the time of the survey, 8,538 were females (60.2 per cent) and 5,641 were males (39.8 per cent) indicating an overall sex ratio of 153.4 girls for every 100 boys. This sex ratio however varied among the districts. The majority of CCIs were run by non-governmental organizations, registered under the Department of Probation and Child Care Services. The types of CCIs that existed within the Government and Non Government sectors varied widely. The CCIs run by the

government mainly serve children in contact with the law. The INGOs and NGOs mainly have CCIs called voluntary homes. Out of the total number of CCIs surveyed ninety five per cent were registered. The remaining institutions were unregistered, contrary to the Orphanage Ordinance.

Although the children are referred to CCIs for a maximum period of three years, the majority of the children, both boys (40 per cent) and girls (37 per cent), have stayed on an average of 2-5 years in the CCIs. It is also required to make arrangements to send the child back to his or her family within three years. Nevertheless, more girls than boys have stayed longer periods of up to 10-15 years in institutions. The reason for longer period of stay by girls was due to risk of early marriages and vulnerability to physical and sexual abuse.

It was revealed from the family situation of the children in the CCIs that 50 per cent of the children had a single parent whilst 32 per cent of them had both parents. However, 18 per cent (2,562 children) of children in CCIs had no parents and therefore were orphans. The number of girls among the orphans were higher in the age group of 14-18 years implying that CCIs were considered as safe places for teenagers. The district-wise distribution of orphans in CCIs showed that larger percentages of them were found in Colombo district (14.2 per cent or 45 orphans) followed by Gampaha (13.9 per cent or 44 orphans) district whilst the least percentage was found in Monaragala district (3 orphans).

The survey revealed that 89.3 per

cent of the total number of children had their birth certificates. Out of them there were more female children (91.8 per cent) than male children (85.4 per cent).

Based on the ethnicity, the majority of the children in the CCIs were Sinhala and Tamils comprising 38.5 per cent. Based on religion, 45 per cent of the children were Buddhist whilst 25 per cent were Hindu.

Based on the survey findings 98 per cent of the children reported that their parents did not pay for admission to CCIs run by the Department of Probation and Child Care Services. Only 2 per cent of the children who mainly live in the boarding houses reported that they paid money for admission to CCIs. Admissions of majority of the male children to the CCIs were due to disability or illnesses and/or in contact with the law. The female children have been admitted due to contact with the law and poverty. It is also noticeable that the female children have been sent to CCIs due to dysfunctional families which option may have been taken in the hope of obtaining full protection, security and care from the institutions. In addition to identified reasons, many other factors such as unregistered marriages, insecurity due to conflict, displacement, homelessness, street children and other family disputes have also led to the institutionalization of children. Considering the admissions of children to CCIs pursuant to Court orders, the percentage of abandoned children and abused children are 22 per cent and 14 per cent respectively which were the main two types identified in this category.

In analysing the qualitative data it was revealed that the main reasons for institutionalization of children were unfavourable conditions at home due to divorced parents, alcoholism, mother migration and insecurity at home particularly for female children as they are the targets of sexual abuse by neighbours and even by their close relatives including their own fathers. Moreover the mental stress caused to children by feuding parents, lack of love and care at home and unacceptable life styles of parents also caused the children to be sent to CCI.

The provision of basic facilities to the institutionalized children was assessed based on the availability of sleeping space and beds, electricity, telephone facilities, toilets/ latrines and other facilities. Considering the availability of sleeping space, majority of the CCIs comprising 68 per cent or 281 institutions claimed that more than 36 square feet were available as sleeping space per child. This indicates that those institutions have succeeded in reaching the minimum quality standard of 36 square feet of space as sleeping space recommended by the Department of Probation and Child Care Services. With regard to beds 98 per cent of the institutions provided beds for each child, 99 per cent of institutions had access to electricity while 95 per cent of the CCIs reported the availability of telephone facilities. 86 per cent reported that separate toilets were available for male and female children in the CCIs. It was reported that separate toilets for the staff (92.4 per cent) were also available in those CCIs. 43 per cent and 39 per cent of CCIs had water sealed and water sealed (Commode) type latrines respectively for different categories of inmates, which were considered by the health authorities

as the most hygienic type. However, a considerable number of institutions (17.4 per cent) continue to have unhygienic types of latrines the authorities were therefore requested to improve the sanitary condition in those institutions. Ninety per cent of institutions provided clothes and school uniforms, cupboards, linen, meals etc. for the children. In addition several infrastructure facilities have also been provided by the institutions.

Furthermore, 75 per cent of the CCIs have library facilities with newspapers whilst 84 per cent of the institutions provided reading and study rooms for these children. These are important for the children to improve their reading habits as well as their educational level. 59 per cent of institutions have provided computer facilities whilst only 28 per cent had access to internet facilities.

According to survey findings 90 per cent of the institutions had first aid facilities. 70 per cent of the children had health records. Over 75 per cent of the institutions monitor the nutritional level of the children in institutions. However the percentage of institutions having clinical records of children was inadequate.

Among 414 CCIs, 33 per cent had children with special needs and 67 per cent of them reported being regularly monitored by a specialist. Out of the total number of children with special needs, 144 male children and 527 female children were found to have learning disabilities while 23.9 per cent of male children and 20.7 per cent female children reported mental health and hearing difficulties.

In the survey 55 per cent of the institutions reported having administrative committee

meetings once a month to decide on administrative, financial and management matters, while 28 per cent reported having such meetings only once in three months.

The total number of professional staff employed in the 414 child care institutions was 2,979. Among the professionally qualified staff members 44 per cent were trained. It was revealed in the Focus Group Discussions (FGDs), in-depth interviews and case studies that the low salaries paid to the caregivers in institutions is the main reason for the poor service provided them. Thus, the low salary scales fail to attract well trained personnel to work in such institutions. This has reportedly resulted in the recruitment of untrained personnel.

The lack of staff with counselling skills was reported as a problem by about 60 per cent of the Probation Commissioners. This may have resulted from the difficulty to recruit qualified personnel due to prevailing low salary scales.

The recommendations prescribed for adoption in resolving the issues confronted by the institutionalized children are mainly two fold. Firstly, the conditions leading to institutionalization of children should be addressed without delay. In this context, parents, relatives and neighbours play a major role. At familial or community level they should be supported and strengthened to take necessary steps to resolve problems faced by the children. The provision of additional sources of income would, to some extent, strengthen the capacity of parents to take care of children. Secondly, the responsive measures that cover actions taken after the institutionalization of children have to be developed.



Although schooling is provided by many CCIs, a more conducive environment for learning should be made available within CCIs. Moreover, opportunities for vocational training should also be provided. It is also recommended to maintain a close relationship

between the school principals and the management of the institutions. Institutions must have sufficient number of care-givers to provide close supervision. To obtain the best potential of those caregivers it is highly recommended to engage them in extracurricular activities, such as outings with children.

**The following measures are also recommended in response to many of the issues identified affecting children in CCIs:**

- Provide a homely environment in CCIs keeping in mind the temporary nature of the children's stay in the CCIs.
- Provide training to matrons and others involved in care-giving to offer a humane and effective service.
- Provide opportunities for matrons and other officials from various institutions in the island to meet and share their experiences and discuss problems. Such meetings will provide them with an opportunity to know the good practices adopted in other institutions.
- Review and revise strict administration rules and regulations.
- Provide opportunities for vocational training for the institutionalized children.
- Provide a conducive environment for educational activities within the institutions.
- Provide sufficient number of caregivers to maintain close supervision of the inmates.
- Persuade all staff to engage in extracurricular activities, such as outings with children.
- Ensure the registration of all the CCIs and conducting regular inspections in collaboration with the DPCCS.
- Involve CRPOs in ensuring the welfare of children in need of protection and monitor the implementation of minimum quality standards prescribed by the Provincial Commissioners of Probation and Child Care.
- Ensure the active involvement of POs in admissions of children to residential care. Necessary directions should be given to POs to avoid institutionalization of children who are not suitable for institutionalization. Necessary amendments to the law should be introduced in this regard.
- Prepare case files for each child admitted to residential care, for the development of care plans. The introduction of the Case Management System prepared by the Department of Probation and Child Care should resolve such issues.
- Evaluating the needs and prioritizing the use of available resources and thereby improving the use of existing facilities and developing alternative care services – such as foster families.
- Regular and continuous monitoring of children with special needs.
- Review & introduce necessary amendments to the Law on child protection.
- Ensure the enactment of Provincial Statutes on Probation and Child Care Services in all provinces without further delay (as only three provinces have enacted such Statutes).

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# Acronyms

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- CBO** - Community Based Organisations
- CCI** - Child Care Institutions
- CRPO** - Child Rights Promotion Officers
- DPCS** - Department of Probation and Child Care Services
- FGD** - Focus Group Discussion
- GN** - Grama Niladhari
- HRC** - Human Rights Commission
- INGO** - International Non-Governmental Organizations
- IDP** - Internally Displaced Persons
- JMO** - Judicial Medical Officer
- KII** - Key Informant Interviews
- NCPA** - National Child Protection Authority
- NGO** - Non-Governmental Organisations
- NISD** - National Institute of Social Development
- PO** - Probation Officers
- PHI** - Public Health Inspectors
- POIC** - Probation Officer in Charge
- SPSS** - Statistical Package for Social Sciences
- SMS** - Short Message Services
- USAID** - United States Agency for International Development
- UNICEF** - United Nations Children's Fund
- VHMT** - Voluntary Home Monitoring Team

# Terminology

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- CAREGIVER** - an individual, such as a parent, foster parent, or head of a household, who attends to the needs of a child.
- CHILD** - A human being below the age of 18 years (United Nations Convention on the Rights of the Child, ratified and accepted by Sri Lanka)
- CHILD PROTECTION** - the measures and structures to prevent and respond to abuse, neglect, exploitation and violence affecting children
- CHILD ABUSE** - Acts or omissions by a care-giver leading to actual or potential damage to health and development, and exposure to unnecessary suffering to the child” (The initially used definition) and or “Anything which individuals, institutions, or processes do (acts) or fail (omissions) to do which directly or indirectly harms children or damages the prospects of safe and healthy development into adulthood” (A wider definition)
- INSTITUTIONALIZATION** - means to place a person in the care of an institution, especially one providing care for the child, disabled or mentally ill.
- DE-INSTITUTIONALIZATION** - means the release of institutionalized children, or the disabled, especially child victims, from an institution for placement and care in the community.
- CHILD CARE INSTITUTION** - a facility in which children are living on an on-going basis or stay temporarily away from their homes. This includes orphanages, small group homes, transit/ interim care centres, children’s homes, children’s villages/cottage complexes, and boarding schools used primarily for care purposes as alternatives to children’s home. Perhaps, a more descriptive definition would be that of Tolfree, which says, that institutional care for children is “a group living arrangement in which care is provided by remunerated adults who would not be regarded as traditional carers within the wider society” (Tolfree, 2007). This definition implies that the relationship between children and the care givers is professional and it is an organized and deliberate structure of living arrangement for children (Dunn et al.).
- GATE-KEEPING** - the process of referring children and families to appropriate services or care arrangements with the aim of limiting the number of inappropriate placements.
- KINSHIP CARE** - full-time care of a child by a relative or another member of the extended family. This type of arrangement is the most common form of out of home care throughout the world and is typically arranged without formal legal proceedings.
- STANDARD** - that which is established by authority as a rule for the measure of quantity, extent, value, or quality; or measure sanctioned by government, as the standard of the institutions.

# Chapter One

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## INSTITUTIONALIZATION OF CHILDREN & CHILD CARE INSTITUTIONS – AN OVERVIEW

### 1.1 Introduction

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Alternative care for children living away from home, particularly away from the primary caregivers had developed over the years due to the increasing pressure brought on families by the socio-economic forces of modernisation. Family based care system or the community based care system that was popular in the olden days is increasingly being discarded and replaced by institutions that provide, shelter, protection and care. This research on the institutionalized Child Care Centres in Sri Lanka attempts to examine the current status of the child care institutions (CCIs) and the reasons for the families to place their children in institutions in Sri Lanka. Institutionalization appears to stigmatize and segregate the institutionalized children who encounter difficulties when adjusting to life outside institutional care. This is said to be caused by limited contact with families, communities and other children during the period of institutionalisation. Furthermore, institutionalization has also contributed to the neglect of individual and personal care and provides limited stimulation, for children to respond; effectively to their psychological needs (De Silva & Punchihewa, 2011).

Institutionalization of children has been defined as an act of placing children in a facility outside of their home. When the children are emotionally or physically challenged they are placed in a therapeutic facility outside of their home. These facilities are meant to provide a

highly controlled environment, as safety is of prime importance for the children who should be protected from abuse, drugs, and suicide attempts. Institutionalization for emotionally disturbed children and adolescents is usually not meant to provide long-term treatment. The average stay ranges from several months to number of years. Children with special needs generally remain in residential care until they are able to live on their own, or for the rest of their lives, depending on the severity of the disability. Such institutions are expected to stay in close contact with the child's parents and encourage visitation whenever possible. However, institutionalized children have not had enough opportunities to form an attachment to a parent; they spend less time on play, lack social interaction and individual care unlike the children in a normal family. Children are sometimes institutionalized when their home environment becomes hostile. However, there have been instances where a child is institutionalized to protect him/her from abusive parents, but the child may still continue to be vehemently loyal to the parents. Such situations are hardly accepted by social workers and other institutional staff alike and may be challenging to the staff of institutions to respond within the mandate and goals of such institutions.

The term Child Care Institution is used, in this study, to refer to a facility in which children live temporarily away from their homes, such as Child

Care Institutions, Orphanages, Safe Homes, Detention Homes, Remand Homes, Certified Schools and SOS villages (children's villages/cottage complexes) under the supervision of the Department of Probation and Child Care Services, voluntary child care homes such as transit/interim care centres, children's homes, boarding homes and religious homes operated by INGOs and NGOs. Such institutions, though considered as living arrangements with less social relationships, often provide better care for children by providing opportunities to learn new skills, improve their physical and mental wellbeing whilst developing their self-esteem. The practice of institutionalization has a long history both in the developed and developing worlds.

Child care and protection encompass all aspects of children's well-being. According to Tolfree (1995), institutionalized care for children is "a group living arrangement in which care is provided by remunerated adults who would not be regarded as traditional carers within the wider society". This definition implies that it is a professional relationship between the adults and the children rather than one that is parental and it is an organized and deliberate structure for the living arrangements of children. In general Institutionalized children are particularly vulnerable needing special care and protection (Tolfree, 1995). They are entitled to an environment that guarantees them protection from all forms of

violence. Despite the existence of rights, children suffer from poverty, homelessness, abuse, neglect, mental and physical diseases, and unequal access to education and justice systems that do not recognize their special needs.

The concept of childhood apparently evolves and changes as lifestyles change. The general human rights of children are similar to those of adults. However, since institutionalized children are particularly vulnerable, specific rights that recognize their special needs are in place. The issues pertaining to institutionalized children and their vulnerability are very complex. The institutionalization can be an outcome of many factors such as poverty, ill health and/or social exclusion. While according to studies economic factors have mainly influenced institutionalization, social deprivation in all forms, has been identified as the major underlying factor for institutionalisation of children. Moreover, Sri Lanka's socio-economic transformation from post colonial era through periods of neo liberal influence, has invariably led to the establishment of institutional care for children. If vulnerability is defined as lack of control of oneself, then all institutionalized children are vulnerable simply because of their age – as they depend on others to provide for their basic needs. Increasing physical and mental maturity usually leads to growing capability for self-provisioning, but during periods of childhood and adolescence, children and young people continue to need special care and support (Bee & Boyd, 2004).

Children's vulnerability due to disasters, both natural and man-made is another area of concern and is of particular importance in the aftermath of conflicts in Sri Lanka. Therefore a number of

child care institutions have been established during and after the three decades of war in the North and the East. In such instances when the interventions are inadequate the vulnerabilities of children caused by neglect becomes a much more serious and sensitive issue. Forms of neglect at those times could lead to victimization and/or delinquency among children. To avoid such instances and resuscitate children's lives and reduce their vulnerabilities (both physical and psycho-social), appropriate measures within institutions and outside should be adopted, strengthened and sustained.

As the decision making power of children entering child care institutions is low, the managements of institutions take on a free hand in deciding for the children, which do not necessarily ensure the best interest of the children, especially in the voluntary homes. Hence, transparency and accountability issues pertaining to child care in institutions have come up for serious consideration from time to time. With the limited enforcement of laws and guidelines, CCIs have not been able to regularize the running of those institutions. It is therefore, urgently necessary to undertake regular investigative studies to ensure the proper provision of basic needs that facilitate the development and protection of children under care (Bee & Boyd, 2004).

Furthermore to curb the practice of institutionalization of children the root causes of such practice need to be identified by developing and enforcing intervention strategies at various levels and seeking alternatives, where necessary, to provide care and protection to those needy children.

To ascertain the current status of conditions of the Child Care Institutions and the institutionalized children, the Department of Probation and Child Care Services commissioned the National Institute of Social Development (NISD), the prime institution with long years of experience conducting study programs and research activities on many aspects of child care, to conduct an island-wide survey on the child care institutions and the institutionalized children in Sri Lanka. The Social Development Policy, Research and Publications Division of the NISD undertook this task on behalf of the NISD to conduct and report on the survey on situational analysis of child care institutions and institutionalized children. The main objective of the survey was to report on the situational analysis of the conditions of the institutionalized children in Sri Lanka to facilitate the policy makers to formulate appropriate policies, programmes and strategies aimed at improving the standards of care, protection and safety of the institutionalized children.

The primary information required for the study was gathered through a national survey, using a structured questionnaire supplemented with qualitative inputs gathered through a series of discussions and case studies carried out in diverse backgrounds. The methodology adopted, the findings of the survey and the issues identified are discussed thereafter to facilitate policy makers to formulate more appropriate strategies to improve the care, protection and safety of institutionalized children.

The effects of institutionalisation on child health, development and wellbeing as illustrated in several studies have not been encouraging (De Silva & Punchihewa, 2011).



Over the last six decades numerous studies have provided convincing evidence on the fact that institutional care is detrimental to the cognitive, behavioural, emotional, and social development of young children (Galappatti, 2002; Williams, 2006; Roccella, 2007; Save the children in Sri Lanka, Canada, 2005 & United Nations, 2010). Child welfare experts differ widely on the possible effects of institutionalization on the children. They believe that in spite of many improvements made, particularly in the quality of residential care, instances of neglect or below-standard care continue to exist as illustrated in the current study (see chapter 3).

Despite the improvements needed in the areas of governing rules and

procedures, sanitary conditions etc., the CCI's offer emotionally and physically handicapped, deprived, destitute and vulnerable children a better living arrangement. In a protected environment abused children may tend to think of adults as kind and dependable. In choosing the proper residential treatment, parents should look for these criteria: a nurturing live-in adult staff; a family-style arrangement; low youth-to-adult ratios; high rates of positive interactions between youths and adults; psychologically informed treatment planning; ongoing evaluation and formalized after-care plans. Whenever possible, the child should be involved in his or her assessments. However, it is recognized that institutional forms of care almost inevitably result in

negative outcomes for children. Over the last 50 years numerous studies have documented the fact that children growing up in institutions often demonstrate delays in physical, emotional, social and cognitive development ([www.unicef.org/srilanka/overview](http://www.unicef.org/srilanka/overview)).

It could be difficult for the family to take a decision to place a child in a treatment centre for emotional reasons and social stigma. Institutionalization of children is persistent and takes place all over the world. Countries and institutions are joining hands to call for an end to institutionalization (Williams, 2005).

## 1.2 Institutionalization of Children the Sri Lankan Context .....

Sri Lanka has long experiences on institutionalization of children since mid-nineteenth century. Provision of formalized welfare facilities had commenced in 1948 when the government started providing welfare facilities. However, the government and non-government organizations started providing child care services only to those who were vulnerable, abandoned and separated from their families.

In the backdrop of the economic, social and political forces operated in Sri Lanka during the last few decades, there were attempts to seek better alternatives for child care. Children are becoming more vulnerable to risks, such as abuse, conflict, labour migration, tsunami, illegal pregnancy (for instance, some teenage pregnant mothers found in Haragama Women Development Institution) and neglect resulting in increasing number of children being institutionalized. After the tsunami,

attention for institutionalization of children increased supporting institutionalization of more children but it is the policy of the Government to institutionalize children only as the last alternative.

According to the Department of Probation and Child Care Services (DPCC), in 2002 there were 223 children's institutions at the national level, caring for 11,495 children, which increased to 368 institutions caring 15,874 children in 2010. This is a sharp increase in the number of institutions since 2002, when there were only 341 voluntary children's homes with some institutes registered with the Provincial DPCC and some not registered (See chapter three).

In 2009, 14,842 children were institutionalized and 2,234 of them were institutionalized in state-run residential institutions whilst 12,608 were admitted to certified voluntary

children's homes. In 2010 there were more than 21,100 children in 488 voluntary residential care institutions in Sri Lanka (run by well-wishers, religious leaders, and community) and children hosted in the 22 State-run residential institutions, including remand homes, certified schools, and receiving homes. The number of officially registered children's institutions has significantly increased from 142 in 1991 to 500 in 2007 (Save the children-UK, 2009) particularly in the Northern and Eastern Provinces of Sri Lanka. Voluntary children's homes were also established by various faith-based organizations, non-governmental organizations (NGOs) and individuals. With the introduction of the regulations and compulsory registration of voluntary children's homes, the number institutions have reduced from 136 in 2008 to 120 in 2009 (De Silva & Punchihewa, 2011).

### 1.3 Types of Child Care Institutions (CCIs) in Sri Lanka .....

As stated above, the types of Child Care Institutions which come under the purview of the Department of Probation and Child Care include remand homes, certified schools, receiving homes, detention homes, national training and counselling centres, approved schools and voluntary children’s homes. However, on the basis of the definition given for the institutionalization of children, institutions such as hostels, boarding houses, Pirivena of the Buddhists, Araneripadasalai of the Hindus, Madrasa of the followers of Islam, Seminaries of the Catholics and Christians which run such institutions for educational purposes too fall into the category of children’s institutions.

#### Types of Child Care Institutions (CCIs) Currently Prevalent in Sri Lanka

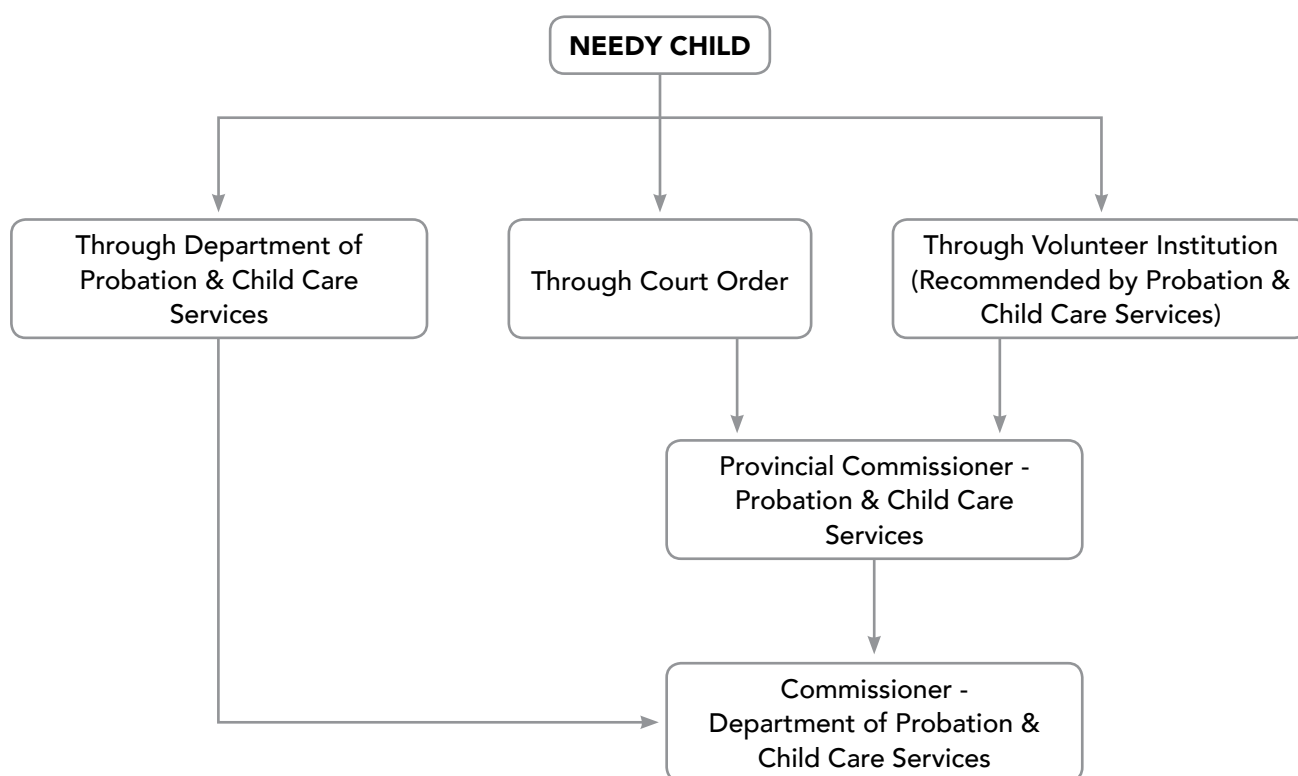
Type of Institution	Details
Remand Homes	Remand Homes are detention homes established to house children while their cases are being heard in courts of law. Children in remand homes are detained for the following reasons; suspicion of murder, attempted murder, arson, victims of abuse and sexual harassment, theft, quarrelling, disobedience, straying, being stranded, use of liquor/ drugs, child labour, for further investigation, unclassified. The six Remand homes in Sri Lanka are located in Pannipitiya, Anuradhapura, Kithulampitiya, Ranmuthugala, Weralawatta and Jaffna.
Certified Schools	Certified schools provide a systematic vocational training to the children admitted. There are five certified schools in Sri Lanka, located in Makola, Kappetipola, Hikkaduwa, Ranmuthugala and Kondavil. The reasons for admission of children to such schools include, theft/ burglaries, disobedience to parents, sale and use of alcohol, in need of care and protection, attempted suicide and unclassified.
Safe House	Safe Houses are state run accommodation and care providing facilities that keep children whose court decisions are pending.
Receiving Homes	State Receiving Homes are set up to provide the necessary safety and protection to children who have not had the opportunity to live with their own families temporarily or permanently. Orphaned, abandoned and destitute children live in Receiving Homes. There are eight such State Receiving Homes in Sri Lanka, , namely, Prajapathi in Panadura, Ruhunu in Galle, Sujatha in Bandarawela, Jaffna, Abaya in Anuradhapura, Tikiri in Peradeniya, Amilasevena in Migalewa and Paradise in Kuruwita.
Detention Homes	Detention Homes are institutions established to rehabilitate destitute children over eight years of age who loiter around as beggars. Currently there is only one Detention Home for such children in Sri Lanka located in Halpatota. In addition these homes also accommodate children connected with burglary, theft, sale and use of alcohol, those children in need of care and protection, and those disobedient to parents and unclassified reasons.
National Training and Counselling Centres for Children	This facility hosts children who have been sexually abused and raped, engaging in theft, straying children, disobedient children, and children engaged in child labour, married under aged children, children stranded and suspected of committing crimes.
Approved school	Approved School in Maggona was established to shelter and provide psychological and physiological protection to orphaned, deserted, destitute and abused children.

Type of Institution	Details
Voluntary Children's Institutions	<p>Voluntary Children's institutions form the majority of the child care institutions in Sri Lanka. Though they are managed by non-governmental parties, they are monitored by the Department of Probation and Child Care Services. These voluntary children's homes accommodate children with various issues such as poverty, negligence by parents, orphaned, family separation etc. Originally it was not required by law to have a court order to accommodate a child in a voluntary children's institution until 2008 when the law was amended to make it compulsory. At present there are approximately 20,000 children in voluntary children's homes in Sri Lanka.</p>
Children's Homes for Disabled Children	<p>These homes provide shelter and care for children with physical and mental disabilities. Though these homes host children, the subject is covered by the Department of Social Welfare.</p>
Hostels Managed by Ministry of Education	<p>Hostels of government schools are monitored by the Ministry of Education, but the hostels of private schools are monitored by the respective schools. There is no clear data on the number of such public sector and private sector school hostels and the number of children who are placed in such hostels. According to the definition of institutionalization, school hostels should also be considered as institutions.</p>
Private boarding houses	<p>Children following primary and secondary education away from home are accommodated in private homes that provide room/s on sharing basis and individual basis on a monthly rental. In some cases the house owners provide meals for the boarders.</p>
Religious Institutions	<p>Pirivenas hosts cares and provides specialised education on Buddhism for children. Pirivenas come under the purview of the Ministry of Education. Accurate information/data on the number of such Pirivenas and details of the children in such Pirivenas are not available.</p> <p>Araneripadasalais are managed by certain Hindu institutions which accommodate and provide special education on Hinduism to children. The exact numbers of such institutes and the number of children accommodated in those are not known.</p> <p>Seminaries of some Christian and Catholic institutions accommodate and provide specialised religious education for children. However, the practices adopted in the accommodation of children in such Seminaries have changed. The exact number of such seminaries and information on the number of children currently accommodated in such institutions are not available.</p> <p>Madrasa managed by the Islam Mosques host, care and provide specialised education in Islam for the children accommodated in them. The number of such institutions and the number of children accommodated in those Madrasas are not known.</p>

Source: Save the children 2011.

## 1.4 Procedure of Institutionalization of Children

**Figure 1: Procedure of Institutionalization of Children**



Usually a child could be institutionalized between the ages of five to 18 years. In case of a child being institutionalized before five, he/she is kept in a Receiving Home and is given for adoption. A child could be institutionalized based on an application submitted to the Probation Officer (PO) by the care giver or by a court case. When submitting an application for institutionalization, supporting documents such as father's/mother's death certificate, Samurdhi card, GramaNiladhari's (GN) recommendation for the child, should be submitted.

Before taking the decision to institutionalize a child, in some instances, 'Family Group Conference' is held where the Probation Officer arranges a meeting with the extended family of the child and facilitates the family

to take a decision on the care option for the child. If the family could not come up with a solution or decides on institutionalizing the child, a Case Conference is organized.

A Case Conference is conducted for each child, before the child is institutionalized. The case manager who is working on the case organizes the case conference. The case manager can be PO, CRPO, or an officer from the NCPA. He/she can decide on persons to be invited to the case conference based on the nature of the case. The invitees for the case could include PO, CRPO, NCPA, Doctors, Legal Officers, Teachers, JMO, Police, Child, Parents, and Extended Family Members. If it is a court case, until a decision is made based on field reports on investigation of history and case conferences, the child is hosted in a Safe House.

Usually an institution is selected based on child's ethnicity and religious background. In cases where there are no vacancies in institutions where children of the same background are hosted, child is admitted to an institution of a different religious faith or ethnic background.

Before the new laws were introduced some interventions were made by the state in the procedures adopted when institutionalising children. Children's home managements were allowed to directly identify prospective children for placements in the institutions. At present, the institutions have no authority to request for children or to admit children directly but that responsibility is solely on the Department of Probation and Child Care Services and other line ministries where necessary.

# Chapter Two

## METHODOLOGY

### 2.1 Introduction

This study adopts a mixed methodology wherein both quantitative and qualitative data were utilised and analyzed using triangulation and other analytical techniques. The quantitative and qualitative data were primary as well as secondary .The secondary

data were obtained from national and international sources. The national sources used were mainly from the Department of Probation and Childcare Services, Provincial Probation Offices, other agencies such as Salvation Army. In addition, research reports and other relevant

documents from INGOs such as UNICEF, UNDP, Save the Children and the Christian Children Fund, websites, internet and other policy documents were used as national and international sources as well.

### 2.2. Objectives of the Study

#### 2.2.1. Prime Objective

The prime objective of the study was to understand the nature and the extent to which the child care, child safety and child protection as well as rights of children living in

Child Care Institutions (CCIs) are maintained in order to facilitate the implementation of best practices and find suitable alternatives, if necessary to institutional care. To

achieve the main objective, the following specific objectives were considered.

#### 2.2.2. Specific Objectives

1. Reviewing existing studies and researches on the institutionalization of children in Sri Lanka
2. Assessment of the situation of children in residential care
3. Categorization of the types of children's homes
4. Examination of the status of institutionalized care
5. Identification of the issues/factors affecting institutionalized children
6. Recommending plausible solutions for the issues identified and considering policy implications

Based on the prime and specific objectives, the chapters that follow describe the results of the survey to assist policy makers to formulate and implement better strategies to improve care, protection and safety of the institutionalized children.

### 2.3. Methods of Data Collection

The primary data were collected through structured questionnaires that were exclusively designed to capture the most relevant and detailed information on all the different categories. The information was largely provided by the management, the institutionalised children in the select institutions, from key informants' interviews and from focus group discussions

while the close observations by the field staff were also used. In the first survey, the interviewer administered questionnaire was used to gather information on both male and female children institutionalised in child care institutions (CCIs). Over and above that, in-depth interviews were also conducted as a supplementary measure to elicit data that were not addressed

by the questionnaire method. In-depth interviews and focus group discussion were conducted to access information that could not be obtained through the questionnaire method. Triangulation of data was done with the information provided by parents of institutionalized children and the stakeholders at the interviews and focus group discussions.

## 2.4. Study Area and Coverage

The study covers all 414 Child Care Institutions which are spread over all the districts in Sri Lanka. This study covers all types of child care institutions in

Sri Lanka, ranging from registered to unregistered, government, non government and private institutions and those run by religious groups.

The district wise distribution of the Child Care Institutions (CCIs) is given in Table - 1.

**Table 1: District wise Distribution of CCIs in Sri Lanka (2013)**

District	Number	Per Cent	District	Number	Per Cent
Gampaha	56	13.5	Anuradhapura	12	2.9
Colombo	48	11.6	Polonnaruwa	4	1.0
Kalutara	27	6.5	Kurunegala	23	5.6
Ratnapura	11	2.7	Puttalam	19	4.6
Kegalle	7	1.7	Kilinochchi	5	1.2
Badulla	12	2.9	Jaffna	25	6.0
Monaragala	4	1.0	Mannar	5	1.2
Kandy	19	4.6	Mulathivu	4	1.0
NuwaraEliya	8	1.9	Vavuniya	12	2.9
Matale	7	1.7	Ampara	12	2.9
Galle	28	6.8	Batticaloa	39	9.4
Matara	7	1.7	Trincomalee	16	3.9
Hambantota	4	1.0	<b>Total</b>	<b>414</b>	<b>100.0</b>

## 2.5. Selection and Training of Interviewers

The survey was conducted by fifty (50) interviewers with a degree in social work from the National Institution of Social Development, and Probation Officers of the Department of Probation and Child Care Services. In addition, fifteen (15) supervisors were selected from the Academic Staff Members and Research Officers attached to the National Institute of Social Development to oversee the administration of the questionnaire in the collection of the quantitative data. The interviewers were selected on the basis of their interpersonal skills, research experience and recommendations from the respective departments and NISD. Two days workshop was conducted to train the interviewers on the

survey techniques and to familiarize them with the questionnaire to enable them to obtain reliable primary data.

The enumerators initially assisted in obtaining secondary data on the number of CCIs functioning in each district, gathering information on the many Acts on child care and safety, quality framework, and information on child registration procedures. The interviewer administered questionnaire that was mainly designed to collect primary data were introduced to the enumerators to familiarise them with the type of data that they were expected to obtain. In addition, the academic Staff Members and Research Officers of the NISD

helped to draw the semi structured questionnaires required for the Key informant Interviews (KIs) the in-depth interviews (of 40 case studies) and Focus Group Discussions (FGD) that were needed to collect qualitative information particularly on the interviewee's perceptions on child care institutions, reasons for institutionalizations, facilities and infrastructure available at the CCIs.

Moreover in the collection of qualitative data the persons included in the focus group discussions FGDs were probation officers (09), and the parents of the children (FGDs 5) in the CCIs including volunteer homes, child safe houses, SOS Villages, Orphanages, certified schools and receiving homes(FGD 14). Key

informant Interviews were held with Probation Commissioners to collect the qualitative aspects such as reasons for institutionalization, current status of child care centers, etc. The personnel included in this exercise were the Nine Provincial Probation Commissioners, the Probation Officers and Care Givers. The field work was undertaken from the months of October to November in 2013 whilst the processing of data (which included checking of consistency, cleaning and editing, post coding, classification and imputations for missing data) was

done in the months of November and December, 2013.

The research design was mainly based on survey method (questionnaire) while several multiple approaches were also included to gather qualitative data through Focus Group Discussions and the Case Study approach.

The pilot study was conducted to ascertain the effectiveness of the questions in gathering the information required. This test was carried out in the Colombo

district for convenience selecting 10 CCIs randomly in Mt. Lavinia, Dehiwala, Slave Island and Borella. The questionnaire covered the information on respondent's background, child care centre/institution, type of institution, source of funding, registration of the institutions, details on inmates of the institutions, residential facilities, availability of infrastructure, children with special needs, administrative and legal basis of child care centre (See Annexure II).

## 2.6. Analytical Methods .....

Duly filled questionnaires were initially edited and coded before the data analysis was carried out using Software Package for the Social Sciences (SPSS). Since, it is a situational study the data were analysed using descriptive methods with uni-variate and bi-variate techniques. The frequency tables and graphs were prepared to explore the respondents' awareness, use and satisfaction on e-government

services in Sri Lanka. Some cross tabulations were adopted (bi-variate analysis) to verify the information on the basis of the demographic and socio-economic characteristics. Chapters three and four that follow discuss the findings in terms of the quantitative and qualitative respectively. In chapter four the main findings of the characteristics of the CCIs are discussed in a bid to reveal the main aspects that are

brought out under each method and also to highlight the invisible characteristics that are brought out under the qualitative method for a better understanding of the issues of the CCIs. Thus the use of both the quantitative as well as qualitative approaches has helped to understand the current status of the child care institutions and about the institutionalized children.

# Chapter Three

## SURVEY FINDINGS – BASED ON QUANTITATIVE ANALYSIS

### 3.1. Introduction

The findings of this study based on quantitative analysis are presented in this chapter whilst the findings based on qualitative analysis are provided in the following chapter. This chapter presents the main findings of the survey, based

on quantitative analysis under different sub headings. In addition to respondent's background information, current status of child care institutions by type, background information on the requirements of children with special

needs, funding sources, reasons for institutionalization, staff conditions, facilities available at the child care institution and the legal basis of Institutionalization are discussed.

### 3.2. Respondent's Background Information

The first part of the survey questionnaire was designed to collect basic data on the respondents of each child care institution. The respondents of this survey were either the Manager or Matron or Principal or Care Giver of the 414 child care institutions. The data and the information on the status and

safety measures of the children were collected from those respondents through questionnaire based interviews (see Annexure Four).

As shown in Table 2, majority (52 per cent) of those respondents were Managers whilst a considerable proportion of respondents (38

per cent) were Matrons. The survey showed that there were 214 managers and 157matrons followed by 15 Principals among the respondents. All those designated personnel play a key role as administrators as well as care givers for the child inmates' in the 414 child care institutions.

**Table 2: Respondent's Designation**

Designation	No.	Per Cent
Manager	214	51.7
Matron	157	37.9
Principal	15	3.6
Care Giver	10	2.4
House Mother	3	.7
Secretary	7	1.7
Child Oriented Officer	4	1.0
Coordinator	4	1.0
Total	414	100.0

Table 3 shows the demographic and socio-economic characteristics of these respondents. Majority of the respondents (68.3 per cent) were females whilst more than half of them (70 per cent) were between 30-59 age groups (Tables 3). A considerable proportion (22 per cent) of them was between 60-69 years. It is relevant to mention here that such dedicated

and mature managers or care takers appear to keep better control and administration of the child care institutions.

More than 75 per cent of the respondents were educated with 73.4 per cent of the respondents having Ordinary level and Advanced level qualifications whilst 24 per

cent had degrees (Table 3). Majority of the respondents (61.7 per cent) were Sinhala whilst a considerable proportion of the respondents were Tamils (32 per cent) as well. Among the respondents, the marital status was almost equal with 48.5 per cent of the respondents married while 47.6 per cent were unmarried (Table 3)



**Table 3: Background Information of the Respondents**

<b>Demographic and socio-economic Characteristics</b>	<b>No.</b>	<b>Per Cent</b>
<b>Sex:</b>		
Male	130	31.7
Female	280	68.3
<b>Age</b>		
20-29	31	7.6
30-39	83	20.2
40-49	96	23.4
50-59	95	23.2
60-69	89	21.7
70+	16	3.9
<b>Educational level</b>		
Primary (Grades 1 - 5)	1	0.2
Secondary (Grades 6-9)	7	1.7
O/L & A/L	301	73.4
Degree and above	99	24.1
Others	2	0.5
<b>Ethnicity</b>		
Sinhalese	253	61.7
Tamil	131	32.0
Sri Lankan Moor	16	3.9
Others	10	2.4
<b>Marital Status</b>		
Unmarried	195	47.6
Married	199	48.5
Divorced	5	1.2
Separated	1	0.2
Widow/ widower	10	2.4

The survey revealed that the majority of the respondents (75.8 per cent) have been working in child care homes for less than 10 years (Table 4). However, 24 per cent of the respondents have been

in the child care homes more than 10 years; viz., 15 per cent (14.9 per cent) of the respondents have been there 10-19 years whilst 9 per cent of the respondents (39 respondents) have been there for more than 20

years. This is an important fact because it suggests that the more the respondents are experienced the more the quality of child care and child safety conditions offered by them.

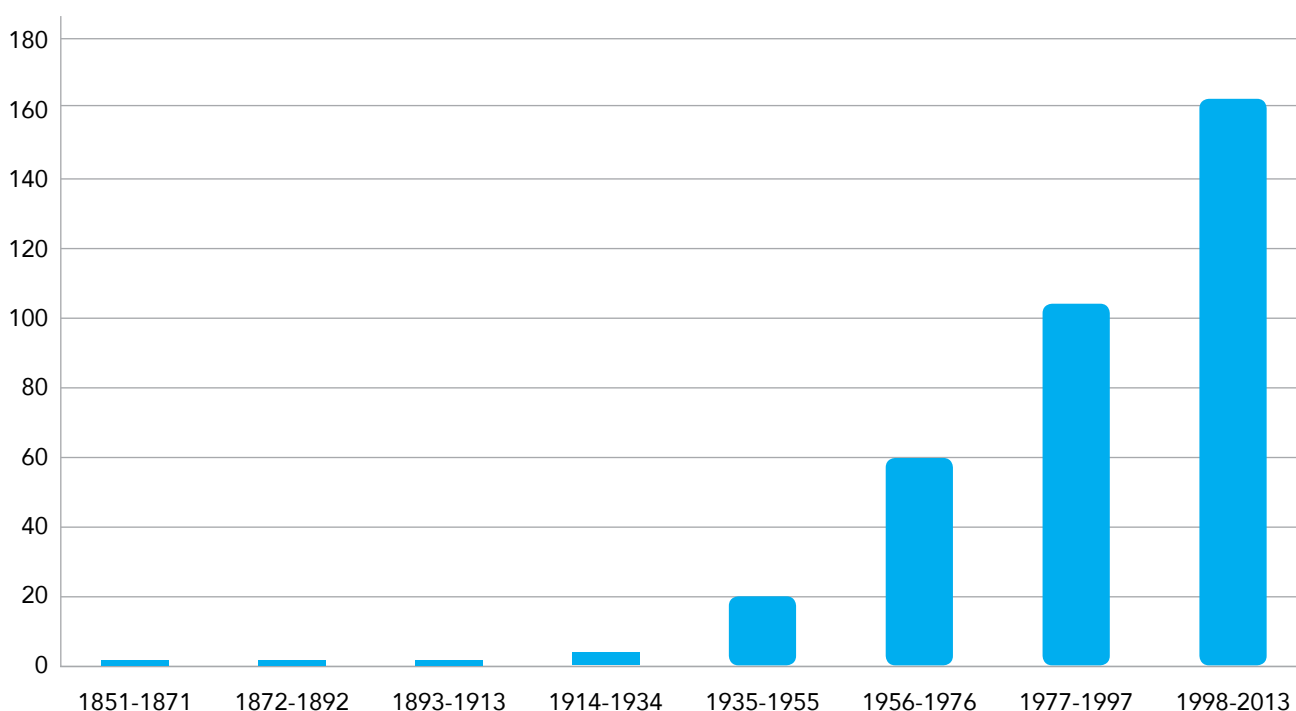
**Table 4: Number of Years Worked in the Child Care Institution**

Number of years worked	No.	Per Cent
less than 1 year	89	21.5
1 - 9 years	225	54.3
10 - 19 years	61	14.7
20 - 29 years	24	5.8
30 + years	15	3.6
<b>Total</b>	<b>414</b>	<b>100.0</b>

### 3.3. Development of Child Care Institutions (CCIS) in Sri Lanka .....

The first child care institution was established in Sri Lanka as far back as in 1851. However as shown in Figure 2, many of them (174 or 42.4 per cent during 1998 to 2013) had commenced operation in the fourth quarter of the last century (See the sharp increase in the number of CCIs established between 1977 and 1997 -114 or 27.8 per cent). On the whole it could be said that nearly 88 per cent of the said institutions had commenced operation from 1956 onwards. This picture reveals the fact that during those years the country situation warranted the establishment of a number of child care institutions indicating the fact that the situation in the country was volatile necessitating the provision of protective environments particularly to the children.

**Figure 02: Number of Child Care Institution (CCIs) by year of Commencement**



In Sri Lanka, at present 14,179 children live in 414 institutions situated in a wide geographical area covering all nine provinces of the country (Table 5). These institutions, were categorized on the basis of gender as male (140), female (195) and mixed (79) types) and on the basis of the organization in charge for instance religious bodies. There are Buddhist, Roman Catholic, Christian, Hindu and Islamic institutions. At the same time, there are institutions that admit children from mixed religious and ethnic groups.

**Table 5: Type of CCIs by sex**

District	Male	Female	Mixed	Total	District	Male	Female	Mixed	Total
Gampaha	27	21	8	56	Anuradhapura	2	7	3	12
Colombo	11	24	13	48	Polonnaruwa	1	3	0	4
Kaluthara	13	12	2	27	Kurunegala	12	8	3	23
Ratnapura	4	4	3	11	Puttalam	5	10	4	19
Kegalle	4	2	1	7	Kilinochchi	1	3	1	5
Badulla	3	5	4	12	Jaffna	5	13	7	25
Monaragala	1	1	2	4	Mannar	1	2	2	5
Kandy	3	8	8	19	Mulathivu	1	3	0	4
NuwaraEliya	1	3	4	8	Vavuniya	5	5	2	12
Matale	3	4	0	7	Ampara	3	9	0	12
Galle	9	13	6	28	Batticaloa	14	24	1	39
Mathaara	2	5	0	7	Trincomalee	8	6	2	16
Hambanthota	1	0	3	4	<b>TOTAL</b>	<b>140</b>	<b>195</b>	<b>79</b>	<b>414</b>

Most of those institutions were registered with the Department of Probation and Child Care Services number of institutions (37 or 8.9Per cent) that were run by the State were found to be non-governmental organizations (47 NGO and 6 INGO) (Table 6). However a considerable also identified.

**Table 5: Type of CCIs by sex**

District	Government	Private	INGOs	NGOs	Voluntary	Boarding	Orphanages	Religious
Gampaha	5	9	1	6	22	0	0	13
Colombo	1	5	5	8	21	0	1	7
Kaluthara	1	4	1	1	11	0	2	7
Ratnapura	2	1	0	0	6	0	1	1
Kegalle	1	0	1	1	4	0	0	0
Badulla	5	1	0	1	2	0	0	3
Monaragala	0	1	1	0	1	0	0	1
Kandy	2	2	1	8	2	0	0	4
NuwaraEliya	3	1	2	1	0	0	0	1
Matale	0	2	0	0	3	0	0	2
Galle	5	2	2	6	9	0	0	4
Mathaara	0	0	0	2	2	0	1	2
Hambanthota	0	0	0	2	1	0	0	1
Anuradhapura	5	1	1	2	2	0	0	1
Polonnaruwa	1	0	1	0	2	0	0	0
Kurunegala	2	2	0	1	11	0	0	7
Puttalam	0	3	0	1	9	0	1	5
Kilinochchi	0	0	0	1	2	0	0	2
Jaffna	2	11	0	1	1	0	0	10
Mannar	0	0	0	0	3	0	1	1
Mulathivu	1	0	0	1	1	0	1	0
Vavuniya	0	2	0	1	2	0	1	6
Ampara	1	0	0	0	2	1	4	4
Batticaloa	0	1	0	3	11	1	9	14
Trincomalee	0	2	0	0	0	0	8	6
<b>TOTAL</b>	<b>37</b>	<b>50</b>	<b>16</b>	<b>47</b>	<b>130</b>	<b>2</b>	<b>30</b>	<b>102</b>

These institutions apparently receive their funds mainly from two sources, the government as well as from private organizations. The private funding organizations were both local and overseas. These child care institutions were established either through the Department of Probation and Child Care Services or by a court order.

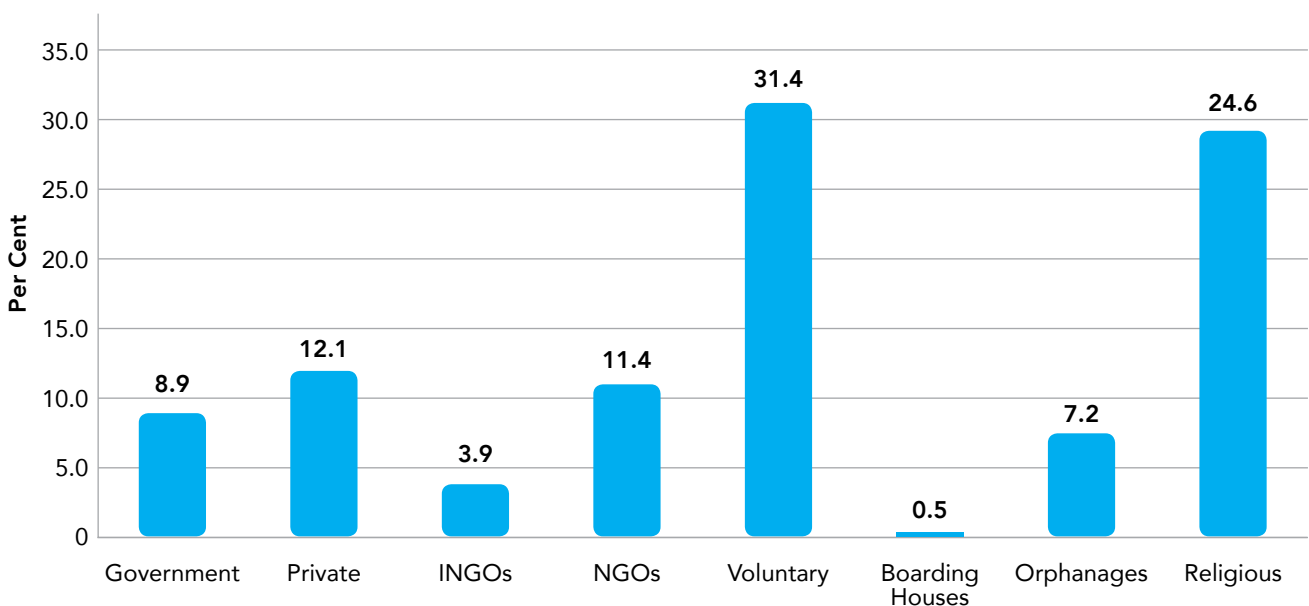
Regarding the intake of children, the Management Committee of the Institution concerned is permitted to admit 5 per cent of the total number of children. In practice, this procedure of admission is used by the Department of Probation and Child Care Services which has the powers to supervise the officers of the Department. However in reality

due to the limited number in the cadre positions, supervisions are not carried out regularly by the department which affects the quality of service in some of the voluntary child care institutions (e.g.Vavuniya, Colombo).

### 3.4. Types of CCIs

CCIs are run by both government and non government organizations. 91 per cent of CCIs are run by non government organizations (such as private, INGOs, NGOs, orphanages and religious) of which majority are voluntary organizations (31.4Per cent - Figure 3).

**Figure 3: Number of CCIs by Types**



#### 3.4.1. CCIs Established by Government and Non Government Organizations

It is noteworthy to mention that the types of CCIs operated by the Government and Non Government sectors vary widely. The CCIs

where children are institutionalized consequent to Court orders dominate in the government sector while the vast majority of CCIs

operated by INGOs/NGOs are voluntary homes. (Table 7).

**Table 7: The Types of CCIs operated by Government and Non Government Organizations (NGOs)**

Type of Institutions	Government Institutions		INGOs/ NGOs Institutions Institutionalized	
	No.	Per Cent	No.	Per Cent
Remand Homes	4	10.8	1	1.6
Certified School	5	13.5	0	0
Safe House	6	16.2	6	9.5
Receiving Homes	8	21.6	0	0
Detention Homes	5	13.5	0	0
National Training & Counseling Centers	4	10.8	0	0
Approved School	2	5.4	0	0
Voluntary Home	2	5.4	54	85.7
Disable Children Home	0	0	1	1.6
Unmarried Mothers Home	0	0	1	1.6
Street Children Home	1	2.7	0	0
<b>Total</b>	<b>37</b>	<b>100</b>	<b>63</b>	<b>100</b>

Most of those institutions were registered with the Department of Probation and Child Care Services (Table 6). However a considerable number of institutions (37 or 8.9Per cent) that were run by the State were also identified.

### 3.4.2. CCIs Established by Religious Groups

There are CCIs established by Religious organizations the majority of which are the Christian and Catholic institutions comprising 64.7 Per cent. The Buddhist CCIs which include Pirivenas are 20.6 per cent of the total number of CCIs (Table 8).

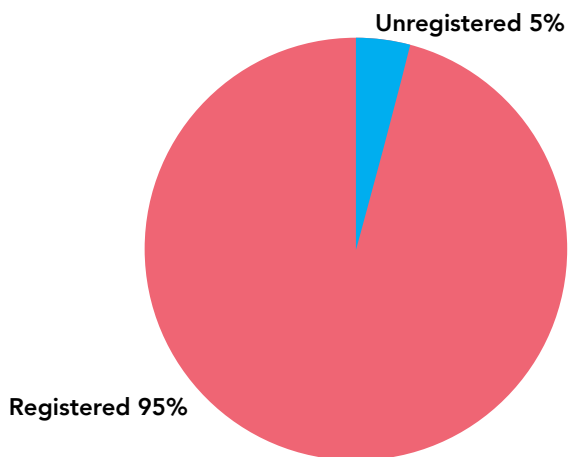
**Table 8: Distribution of CCIs Establish by Religious Based Institutions**

Religious based Child Care Institutions	No.	Per Cent
Pirivenas of the Buddhists	21	20.6
Araneripadasalais of the Hindus	13	12.7
Madrassa of the followers of Islam	2	2.0
Seminaries of the Catholics and Christians	66	64.7
<b>Total</b>	<b>102</b>	<b>100.0</b>

### 3.5. Registration of CCIs

Among the total number of CCIs surveyed ninety five per cent (95 per cent) were registered (Figure - 4). The remaining percentage or 22 institutions were unregistered, flouting the requirement of the Orphanage Ordinance. Two of the unregistered institutions, had not taken any action to be registered. Seven homes are preparing to register while 13 homes had submitted their applications for registration and were awaiting approval at the time of survey. Among the unregistered CCIs most were found in Vavuniya (27.3Per cent) followed by Gampaha (13.6Per cent) and Galle (9.1Per cent) districts. (See, Annexure one -Table 1 for further information).

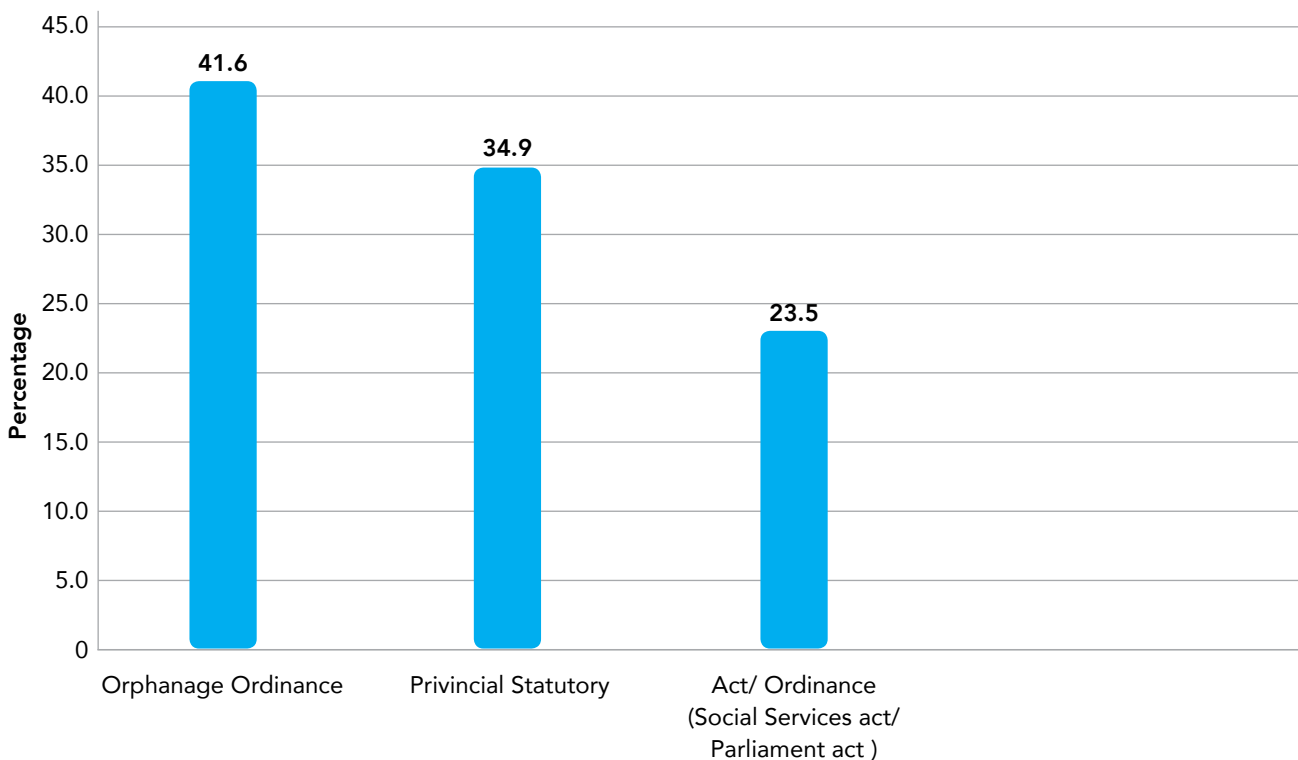
**Figure 4: Registered / Unregistered CCIs**



### 3.5.1. Method and Period of Registration

As seen in Figure - 5, most institutions (41.6 Per cent) were registered under the Orphanage Ordinance followed by provincial statutory laws (34.9 Per cent). A considerable proportion of the institutions (23.5 Per cent) were also registered under Act/ Ordinance of Social services.

**Figure- 5: Method of Registration**



Where the period of registration is concerned, 29 CCIs (7.8 per cent out of 392 registered) were registered before 1960. However, registration of most of the CCIs (50.48Per cent) took place after the year 2000.

### 3.6. Sources of Funding

Several sources of funds are utilized for the CCIs (Table 9). They provide full or partial funding. Most of the funds (19 Per cent) come from multiple sources such as individuals

within the country, outside the country, both within and outside the country, religious based institutions and faith groups. In addition, it is noticeable that private donors

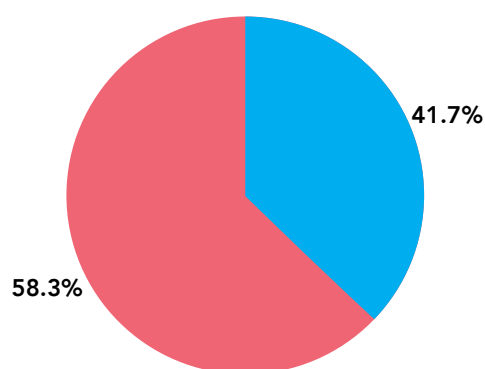
within Sri Lanka (11.2 Per cent) and private donors within and outside Sri Lanka (11 Per cent) contributed funds for these institutions.

**Table 9 - Sources of Funding**

Source of Funding	No.	Per Cent
Private local donations	60	14.5
Private foreign donations	27	6.5
Faith group sustained donations	38	9.2
Government funds	37	8.9
Individual fund	12	2.9
Donations shared by Sri Lankans & foreigners	45	10.9
Donations shared by Sri Lankans & Religious group	12	2.9
Donations by local Sri Lankans & Government of Sri Lanka	43	10.4
Private donations (foreigner) and faith group	13	3.1
Private donations (foreigner) and government	16	3.9
Donations by faith groups and government	16	3.9
Donations by local Sri Lankans, foreigners & government	19	4.6
Multiple sources	76	18.4
<b>Total</b>	<b>414</b>	<b>100.0</b>

Thus 173 (41.7 Per cent) child care institutions are fully funded whilst the remaining (241 or 58.3 Per cent) are partially funded (Figure 6).

**Figure 6: Funding Coverage**



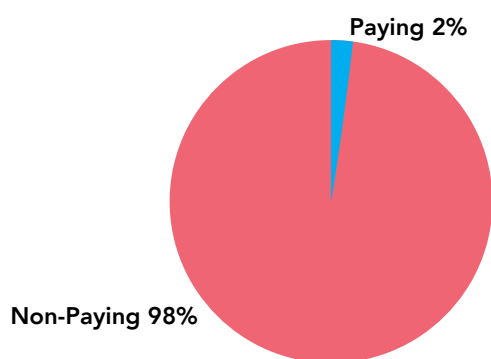
### 3.7. Child Care Institutions (CCIs) with Paying/ Non Paying Inmates

As shown in Figure 7, nearly 98 Per cent of the respondents reported that the parents do not pay for admission to CCIs run by the Department of Probation and Child Care Services. Only 2 Per cent of respondents reported that they

received nominal fees for admission to CCIs such some private, religious and INGOs etc (See Annexure I, Table 2). Moreover, some of the boarding houses receive nominal fees for the admission for the meal and accommodation provided whilst

paying homes receive nominal fees for admission for looking after children's day to day activities. This indicates that people are prepared to pay to obtain the services offered by such institutions even paying nominal admission fees.

**Figure 7- Paying/ Non Paying Inmates**



### 3.8. Information on the Children in CCI's

Total, 641 male (39.8 Per cent) children. Therefore the sex ratio for this age group was 153.4 girls for number of children residing in CCI's at the time of the survey was 14,179. According to the census report of 2012 these children living in residential care in Sri Lanka are 0.23 Per cent of the population

between the ages of 0 and 18 years. The number includes 8,538 female (60.2 Per cent) and 5 every 100 boys residing in CCI's in 2013. However, the distribution by sex varies considerably in the other districts: In Colombo, Kandy, NuwaraEliya, Matara, Hambantota, Anuradhapura, Polonnaruwa, Puttalam, Kilinochchi,

Jaffna, Mannar, Mulativu, Vavuniya, Ampara, Trincomalee and Batticaloa girls in residential institutions were much higher than the number of boys (Table 10). It is suggested to carry out an in-depth study on gender imbalance in CCI's which is prevalent as depicted in the table (10) below.

**Table 10: Number of Children (male/female) in CCI's by Districts**

District	No. of Male	%	No. of Female	Total
Gampaha	842	14.9	938	11.0
Colombo	573	10.2	1153	13.5
Kalutara	414	7.3	301	3.5
Ratnapura	161	2.9	190	2.2
Kegalle	125	2.2	97	1.1
Badulla	249	4.4	297	3.5
Monaragala	84	1.5	124	1.5
Kandy	171	3.0	380	4.5
NuwaraEliya	108	1.9	193	2.3
Matale	80	1.4	87	1.0
Galle	662	11.7	618	7.2
Matara	30	0.5	123	1.4
Hambantota	57	1.0	64	0.7
Anuradhapura	154	2.7	292	3.4
Polonnaruwa	23	0.4	102	1.2
Kurunegala	260	4.6	354	4.1
Puttalam	189	3.4	461	5.4
Kilinochchi	174	3.1	330	3.9
Jaffna	375	6.6	759	8.9
Mannar	98	1.7	148	1.7
Mulativu	84	1.5	177	2.1
Vavuniya	131	2.3	301	3.5
Ampara	103	1.8	183	2.1
Batticaloa	322	5.7	625	7.3
Trincomalee	172	3.0	241	2.8
<b>Total</b>	<b>5641</b>	<b>100.0</b>	<b>8538</b>	<b>100.0</b>



The age distribution of the child inmates of CCIs by sex is shown in Table 11 below. Wherein majority of the institutionalized male children, representing 38 Per cent were in the 10 –14 years age group while the 14-18 years age group comprised of 26.4Per cent. Out of the female children in the CCIs, majority were in the 14-18 year age group (36Per cent) followed by the 10-14 years

age group (35Per cent). These findings confirm the fact that in many instances after 6 years of schooling (after the primary level of education), families tend to send their children to residential institutions to continue their education due to lack of education facilities in remote villages coupled with poverty (Ministry of Child Development and Women’s Empowerment, 2007). Further, the

percentages of infants, toddlers (1-2 years) and children aged less than 5 years of both sexes (0-5 years of age) in the institutions are very small (less than 5Per cent and 6Per cent of girls and boys respectively). This suggests that majority of parents do not like to send their infants or toddlers to child care homes and they apparently take care of them until a certain age.

**Table 11: Distribution of Children in CCIs by Sex and Age**

Age	Male	%	Female	%
0-2yrs	105	1.9	119	1.4
2-5yrs	223	4.0	325	3.8
5-10yrs	1370	24.3	1702	19.9
10-14yrs	1998	35.4	2901	34.0
14-18yrs	1541	27.3	2953	34.6
18+yrs	404	7.2	538	6.3
<b>Total</b>	<b>5641</b>	<b>100.0</b>	<b>8538</b>	<b>100.0</b>

### 3.8.1. Children in CCIs based on Ethnicity and Religion

Majority of children (55.2Per cent) in the child care homes are Sinhala followed by Tamils (38.5Per cent). Further based on religion, nearly 45Per cent of the children are Buddhists whilst a considerable proportion of children (25Per

cent) are Hindus and more than 10Per cent are Roman Catholics or Christians (Table 12). As data reveal, a small proportion of Muslims or Islamic children are in the CCIs due to perhaps their customs and religious orthodox that they do not

allow especially female children to live outside their houses. Further, the number of Islamic based child care homes are also limited in Sri Lanka.

**Table 12: Distribution of Children in CCIs by Ethnicity and Religion**

Ethnicity	No.	Per Cent
Sinhala	7828	55.2
Tamil	5458	38.5
Muslim	877	6.2
Others	16	0.1
<b>Total</b>	<b>14,179</b>	<b>100.0</b>
<b>Religious</b>	<b>6314</b>	<b>44.5</b>
Buddhist	3588	25.3
Hindu	877	6.2
Islam	1603	11.3
Christians	1797	12.7
Roman catholic	<b>14,179</b>	<b>100.0</b>
<b>Total</b>		

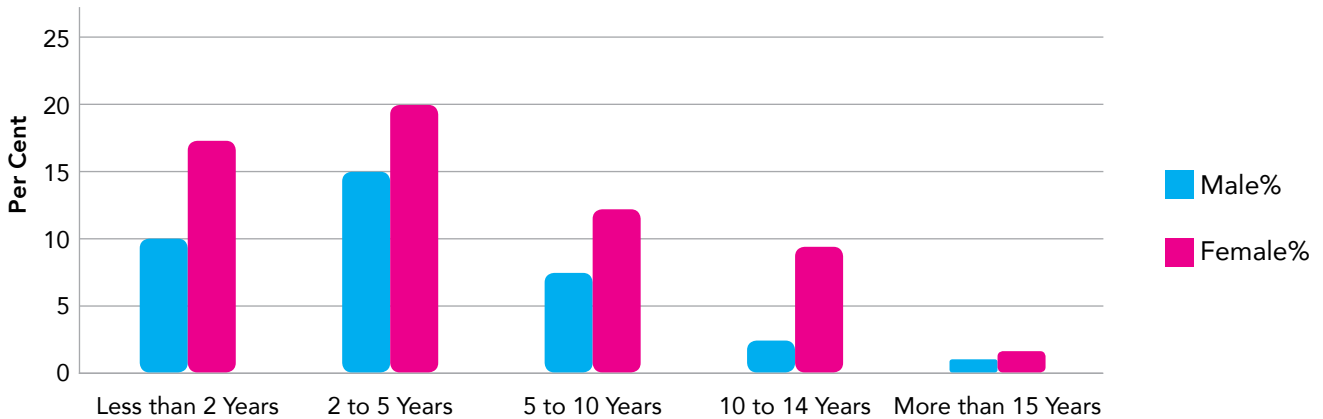
### 3.8.2. Duration of Stay of Children in the CCIs

As depicted in Figure 8, the majority of the children, both boys and girls (16.32Per cent males and 21.21Per cent females), have stayed 2-5 years in the CCIs. It is also noticeable that

boys have stayed both lesser period of duration (less than 2 years) and longer period of duration (10-15 years) in the institutions (Figure 8 - See Annexure I, Table 8). The longer

duration of stay of girls is more due to the risk of being married before age 18, physical and sexual violence whilst boys are also vulnerable to these threats (UNICEF, 2010).

**Figure 8: Duration of Stay of Children in the CCIs**



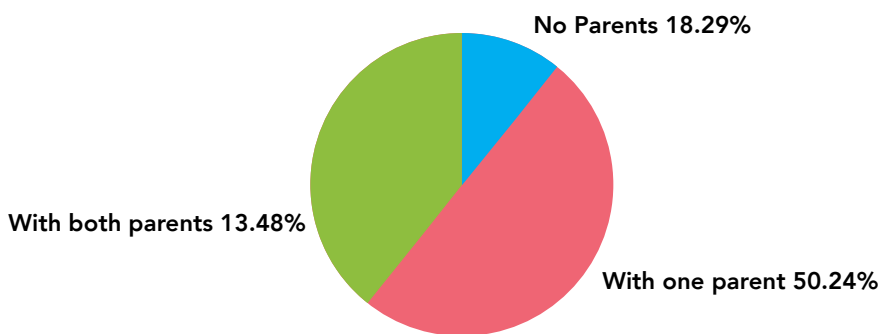
### 3.8.3. Children with or without Parents

Family situation of the children in the CCIs is given in Figure 9. More than 50 per cent of the children

had a single parent and 31Per cent had both parents. However, 18Per cent (2,562) of CCIs children had no

parents and were therefore orphans (See Annexure I, Table 9).

**Figure 9: Children with/ without Parents**



### 3.9. Main Reasons for Institutionalization

There had been many reasons for institutionalization of children. Analysis of the factors that caused institutionalisation should provide basis for policy makers to formulate appropriate policy options and strategies to protect the vulnerable and the weak. This section identifies,

as per findings of the survey, the reasons or the 'push' factors that placed the children in institutions. In all the samples surveyed it became clear that there were more than one reason responsible for the institutionalization of the children. The reasons for institutionalization

as stated by the respondents of the survey are classified under appropriate headings.

The Table 13 provides such reasons for institutionalization when both parents were alive. Of the reported reasons, majority of male children

have been admitted to institutions due to disability or illnesses (12.7Per cent) and consequent to court orders (15.1Per cent) whilst female children have been admitted due to court orders (15.5Per cent) and poverty (12.9Per cent). It is also

noticeable that the female children have been sent to CCIs due to dysfunctional families (10.5Per cent) in the hope of obtaining full protection, security and care from the institutions. In addition to reported reasons, many other factors

such as unregistered marriages, insecurity due to war, displacement, homeless street children and other family disputes have also led to the institutionalization of children.

**Table 13: Reasons for Institutionalization (with both parents alive)**

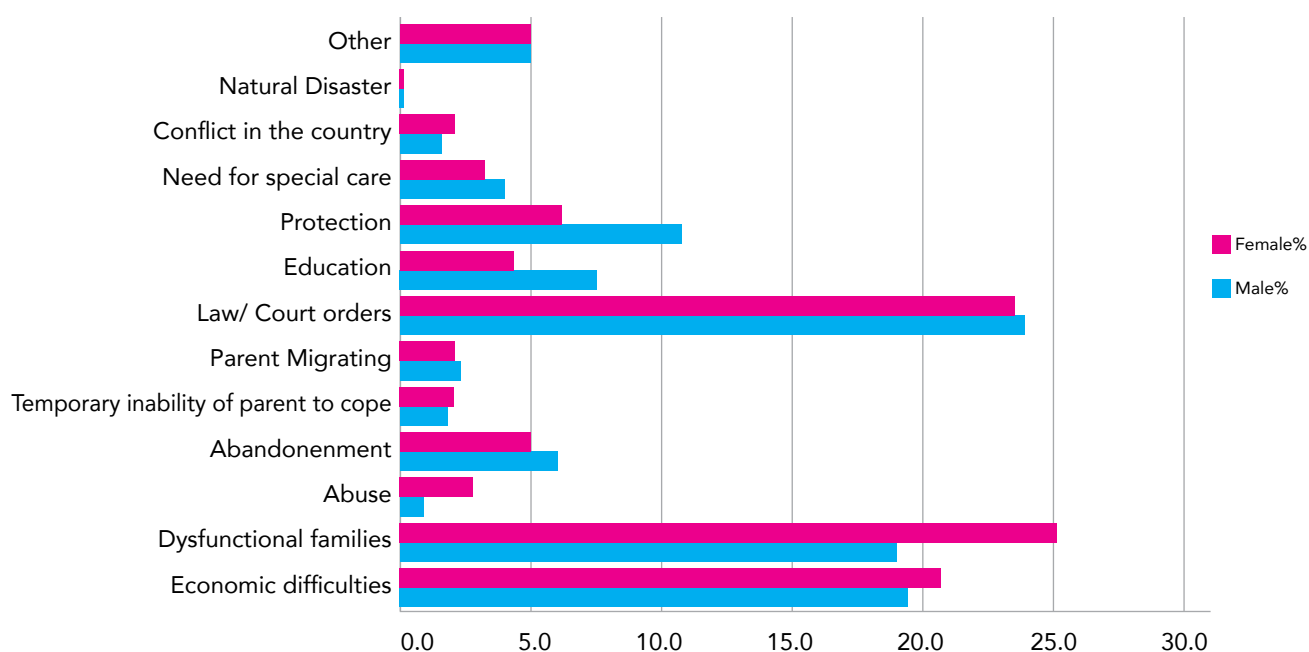
Reason for institutionalization	Male	%	Female	%
Education	212	6.3	349	6.4
No one to care	185	5.5	372	6.8
low income	321	9.6	703	12.9
Working parents	23	0.7	141	2.6
Parent living abroad	24	0.7	76	1.4
Domestic violence	69	2.1	166	3.1
dysfunctional family	428	12.8	569	10.5
Law/court orders	504	15.1	842	15.5
Disability/illness	425	12.7	151	2.8
Sexual abuse	87	2.6	225	4.1
Others and (multiple responses)	1069	31.9	1838	33.8
<b>Total</b>	<b>3347</b>	<b>100.0</b>	<b>5432</b>	<b>100.0</b>

In general, the respondents reported the reasons for getting admission to child care institutions as indicated in Figure 10, (see also Table 8 in Annexure I). According to the reasons reported for admission to institutions, the male children

are admitted predominantly due to court orders (23.2Per cent or 1316) and economic difficulties (19.9Per cent or 1081) whilst female children are admitted due to court orders (23Per cent or 2189), dysfunctional families (25.3Per cent or 2406) and

economic difficulties (20.5Per cent or 1951) (Figure 10). It is important draw attention of policy makers to such common reasons for institutionalization of children.

**Figure 10: Reasons for Admission to Child Care Institution by Sex**



Among the children admitted to CCI by court orders, the abandoned children (22.1 per cent) and abused children (13.6 per cent reported) were the two main categories reported. The remaining 65 per cent of admissions by Court orders were due to several other offenses such as drug trafficking, stealing and other deviant behaviour.

### 3.10. Orphaned Children

Nearly 18 Per cent of children in the CCI are orphaned. At the time of the survey there were 61 children below the age of 2 who are orphans in the CCI (i.e., government receiving homes). These children were mostly by unmarried parents who had left them. In the distribution of orphans the male children are (32 per cent) in the 10-14 year age group whilst female orphans were (33 per cent) in the 14-18 year age group (Table 14 – see also Table 3 in Annexure I). This seems to infer that the CCI are considered as safe places that provide protection to female orphans when they reached the age of 14 years and above (this fact is also reveal in qualitative analysis – see chapter 4).

**Table 14: Orphans by Sex, Age and Number**

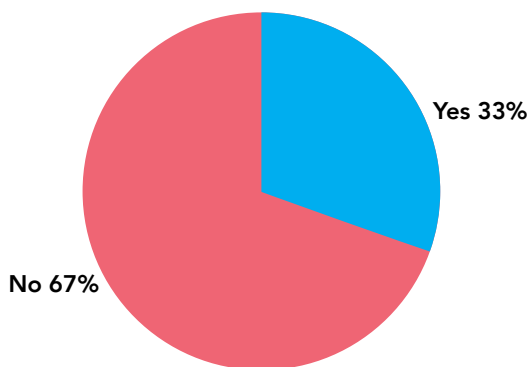
Age	Male	%	Female	%
0-2yrs	27	2.6	36	2.4
2-5yrs	73	6.9	61	4.1
5-10yrs	281	26.5	302	20.1
10-14yrs	336	31.7	478	31.8
14-18yrs	262	24.7	499	33.2
18+yrs	80	7.6	127	8.4
<b>Total</b>	<b>1059</b>	<b>100</b>	<b>1503</b>	<b>100</b>

Out of the 28 per cent orphaned children the majority were in CCI in Colombo (14.2 per cent or 45 orphans) district followed by Gampaha (13.9 per cent or 44 orphans) district whilst the least percentage of orphans were found in Monaragala (3 orphans) district. Moreover, nearly 60 per cent (59.4 per cent or 1521 orphans) of orphaned children had guardians whilst 36 per cent of the orphans did not have guardians. Among the guardians, Grand Parents (20.1 per cent) as well as grand parents and aunt/uncle (19.4 per cent) were prominent personnel who were responsible authority to care these orphans in addition to child care institution.

### 3.11. Children with Special Needs in the CCI

One of the major concerns of child care institution is to pay special attention to the disabled children. Out of the 414 respondent care institutions, 33 per cent stated that there are children with special needs (Figure 11; see also Table 4 in Annexure I). The majority of respondents (83 per cent or 112 respondents) reported that this disability condition has been certified by mostly a doctor (94.6 per cent) or a Psychological Counselor or by Probation office. It is noteworthy that there is only one child care institution for the full care of disabled children, but most of the other institutions look after the disabled children with other care needy children.

**Figure 11: Children with Special Needs (per centage)**

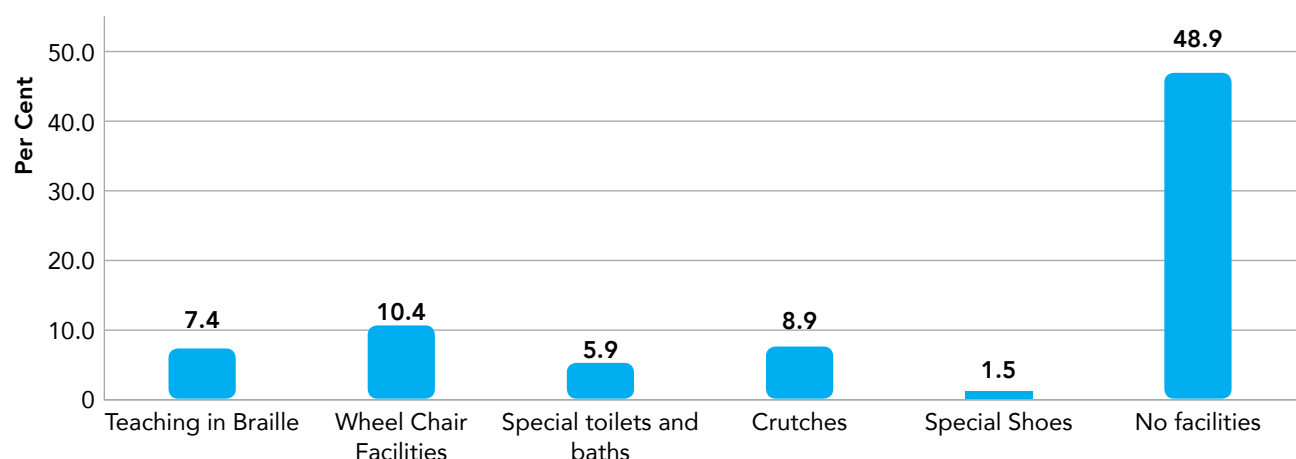


As revealed from the survey, among the 112 Child Care Institutions out of 414, where the facilities are available for the disabled children, 49 per cent of Institutions recorded there are no

facilities available for the disabled children in the child care institutions (Figure 12). The policy makers should draw attention to these institutions that require facilities

to disabled children. Wheel chair facilities (10.4 per cent), Crutches (9 per cent) and Teaching in Braille facilities (7.4 per cent) are available only in few institutions.

**Figure 12: Facilities Available in the CCIs for Disabled Children**



It is an important matter to consider whether these disabled children are monitored by a doctor or specialist

and how often that monitoring takes place. As Table 15 shows, 68Per cent reported that these children

who need special care are regularly monitored.

**Table 15: Number of CCIs Regularly Monitored Children by a Specialist**

children regularly monitored by a specialist	No.	Per Cent
Regularly Monitored	91	67.4
Do not regularly monitored	29	21.5
Some	15	11.1
<b>Total</b>	<b>135</b>	<b>100.0</b>

Most respondents (37.7 per cent) reported that these disabled children are monitored by a specialist monthly and 36 per

cent of respondents reported that the disabled children are monitored once in a three months (Table 16). The frequency of monitoring these

children is important for their protection and special attention.

**Table 16: The Frequency of Monitoring the Special Needs Children**

How often monitored by a specialist	No.	Per Cent
Monthly	40	37.7
Once a three month	38	35.8
once a nine month	8	7.5
Once a six month	2	1.9
if it is necessary	18	17.0
<b>Total</b>	<b>106*</b>	<b>100.0</b>

When categories of children with special needs are considered, in addition to disabled children, it is noticeable that majority of male children are in Psychological disorder category (27.1 per cent or 195 children) followed by mentally deformed (20.2Per cent). The female children are mostly in the mentally deformed category (25.5 per cent) (Table 17- see also Table 7 in Annexure I).

**Table 17: Categories of Children with Special Needs**

Categories of children with special needs	No. of Male	%	No. of Female	Total
Disability	143	19.9	94	16.0
Psychological disorder	195	27.1	107	18.2
Disease/ ailment	64	8.9	48	8.2
Juvenile delinquency	96	13.4	46	7.8
Mentally deformed	145	20.2	150	25.5
Other	76	10.6	143	24.3
<b>Total</b>	<b>719</b>	<b>100.0</b>	<b>588</b>	<b>100.0</b>

The survey revealed that out of the children with special needs slow learners are 26.9Per cent out of 536 male children (144 male children) and of 32Per cent out of 527 female children (171 female children). In addition, there are noticeable proportion of children with special needs (23.9Per cent of male children and 20.7Per cent female children) who have disabilities of mental health and hearing difficulties. As respondents reported, 50 Per cent of male children with special needs (230 male children) are able to meet their all needs whilst there are more percentage such female children (68.6Per cent) (Table 18).

**Table 18: Degree of Disability**

Degree of disability	No. of Male	%	No. of Female	Total
able to meet all needs	230	50.3	313	68.6
able to meet part of the needs	116	25.4	80	17.5
cannot meet any need	109	23.9	63	13.8
Other	2	0.4	0	0.0
<b>Total</b>	<b>457*</b>	<b>100.0</b>	<b>456*</b>	<b>100.0</b>

\*this number indicates that both male and female children reported degree of disability only.

The above discussion on children with special needs discloses that this segment of children is a vulnerable group in the child care homes & therefore the authorities should pay special attention to their health & safety.

### 3.12. Children’s Admission and Birth Certificates

In order to prove the legitimacy of the birth of children, in general, it is important to have a birth certificate. The birth certificate is also important for admission. Therefore all institutions request from the parents

to produce the birth certificates at the admission of children to the institutions. As the survey revealed, 89.3 per cent of both male and female institutionalized children had their birth certificates (Table 19).

It is discernible that more female children had birth certificates (91.8 per cent) than the male children (85.4 per cent).

**Table 13: Reasons for Institutionalization (with both parents alive)**

Birth Certificate	Male	%	Female	%	Total	%
Children with birth certificate	4817	85.4	7841	91.8	12658	89.3
Children without birth certificate	824	14.6	697	8.2	1521	10.7
<b>Total</b>	<b>5641</b>	<b>100.0</b>	<b>8538</b>	<b>100.0</b>	<b>14179</b>	<b>100.0</b>

A considerable percentage of respondents (30 per cent) reported that presumptive birth certificates (considering probable date of birth) are considered for those children who do not have birth certificates at the admission. Twenty six Per cent of respondents reported that they considered the orders of the Department of Probation and Child Care Services whilst 16 per cent and 12 per cent of respondents reported that the Principal’s recommendations and court orders respectively were considered to admit children who do not have birth certificates. In general the children who do not have birth certificates are admitted

to informal education units by the managers of institutes. Moreover, majority of respondents (73.7 per cent) reported that admission of children to the institutions do not based on ethnicity.

The survey revealed that the register of admission is available and accessible in almost all the institutions (99.7 per cent). After the admission to the Child care institutions it is necessary to verify their presence by daily roll call document. In that case, 94.4 per cent of respondents (391 persons) reported that the roll call documents are available in their institutions

whilst also maintaining a personal file for each child. Further, 75 per cent of respondents (75.12 per cent or 311 respondents) stated that care plan for each child is available as well as accessible. However, the residual of 25.1 per cent, which is a considerable proportion of respondents, reported unavailability of care plans, which is matter for policy makers. Nearly 90 Per cent of respondents (89.1 per cent) reported they update these care plans once a month (19 per cent reported), once in 3 months (42 per cent reported), once in six months (16 per cent reported) and once a year (13 per cent reported).

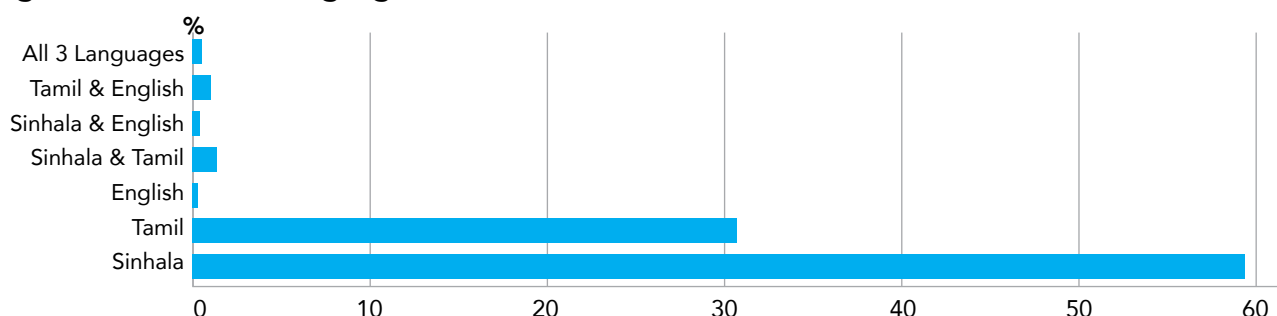
### 3.13. Language Use at the CCIs

It is important to note that the children are encouraged to use their mother tongue. 60 per cent of the respondents (249 respondents), reported using Sinhala whilst a considerable proportion of

respondents (32 per cent or 131 respondents) reported that children use Tamil as the common language within the institutions (Figure 13 and Table 6 in Annexure-I). About 2 Per cent of respondents stated that

children use bi-lingual languages (Sinhala and Tamil and Tamil and English) as common language. However, the usage of English (7 per cent reported) is minimal.

**Figure 13: Common Language Used in the Institution**



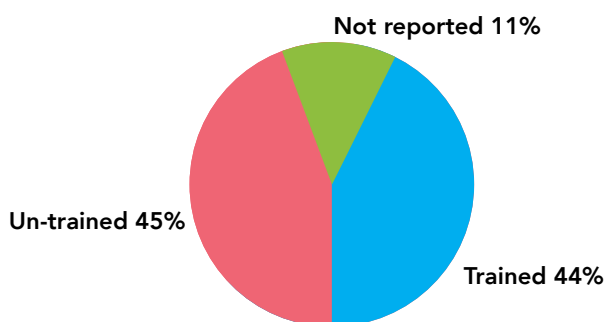
### 3.14. Professional Staff in the Institution

As referred to in the survey, the total number of professional staff employed in the 414 child care institutions was 2,979. This indicates that a 8 Per cent decrease from the figures stated in the survey conducted by the Ministry of

Child Development and Women's Empowerment in 2007 perhaps due to the number of children decreasing since 2007 in the CCIs. The female staff (59.7 per cent) outnumbered the male staff (40.3 per cent).

Among the professionally qualified staff, 44.9 per cent or 1340 of the staff was trained while 45.5 per cent or 1,357 were not trained for formal areas like child care or counselling (Figure 14). This calls for immediate attention.

**Figure 14: Professionally Qualified Staff**



Among the trained staff, majority of them were found in the Galle district (14.2 per cent) followed by

Colombo district (11.6 per cent) whilst the most untrained staff were found in Gampaha (23.2 per cent)

Colombo (10.2 per cent -Table 20).

**Table 20: Number and Percentage Distribution of Professional Staff with Skills Districts**

District	Trained	%	Untrained	%
Gampaha	90	6.7	315	23.2
Colombo	155	11.6	138	10.2
Kalutara	70	5.2	76	5.6
Ratnapura	43	3.2	26	1.9
Kegalle	34	2.5	20	1.5
Badulla	67	5.0	31	2.3
Monaragala	34	2.5	15	1.1
Kandy	97	7.2	46	3.4
NuwaraEliya	56	4.2	30	2.2
Matale	13	1.0	13	1.0
Galle	190	14.2	66	4.9
Matara	6	0.4	13	1.0
Hambantota	8	0.6	14	1.0
Anuradhapura	85	6.3	27	2.0
Polonnaruwa	10	0.7	10	0.7
Kurunegala	47	3.5	79	5.8
Puttalam	15	1.1	87	6.4
Kilinochchi	43	3.2	4	0.3
Jaffna	88	6.6	108	8.0
Mannar	9	0.7	27	2.0
Mulativu	28	2.1	15	1.1
Vavuniya	34	2.5	9	0.7
Ampara	38	2.8	24	1.8
Batticaloa	65	4.9	101	7.4
Trincomalee	15	1.1	63	4.6
Total	1340	100.0	1357	100.0

Note: 282 staff members not reported their professional qualifications.



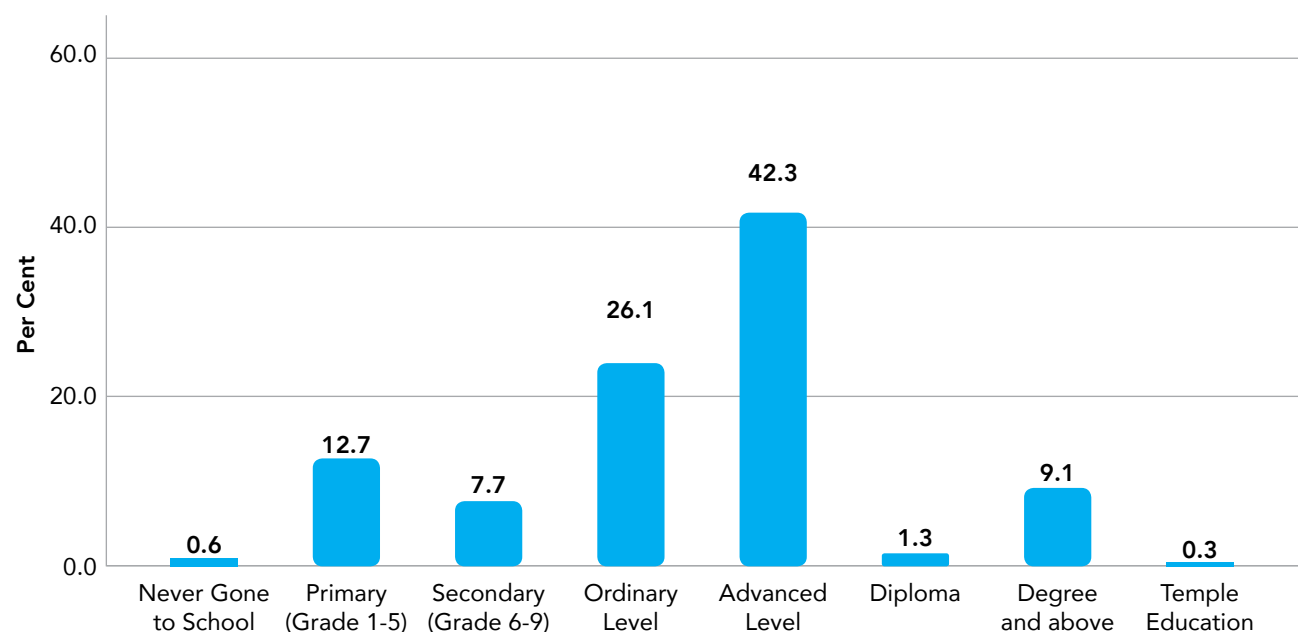
Table 21 shows the different employment categories, that a total of 2,979 persons in CCIs are engaged in. Sixteen per cent of workers (477 persons) provide direct care to children and they are classified as caregivers. Majority of them (21.6 per cent or 644) are Matrons who also provide child care directly or indirectly. Therefore the total number of caregivers adds up to 1,121 persons (37.6 per cent).

**Table 21: Occupational Types of the Staff in the CCIs**

Title of the Employment	No. of Staff	Per Cent
Matron	644	21.6
Caregivers	477	16.0
Manager/Deputy Manager	375	12.6
Cook	324	10.9
Labour	225	7.6
Teachers/Vocational Trainers	185	6.2
House Mother/House Father	178	6.0
Security	185	6.2
Office Assistant/Development Officer	104	3.5
Driver	62	2.1
Helper/Servant	37	1.2
Cleaner	37	1.2
Principal	9	0.3
Secretary	30	1.0
Gardener	29	1.0
Accountant	25	0.8
Nurse	18	0.6
Others	35	1.2
<b>Total</b>	<b>2979</b>	<b>100.0</b>

Computed on the basis of the data given above children-to staff ratio works out to 12 children per caregiver. This shows a significant improvement since the 1987 survey which referred to a children to staff ratio of 16 children per care giver. Qualification wise most staff members (2038 or 68.4 per cent) have G.C.E (O/L) or G. C.E (A/L) qualifications, whilst 271 or 9.1Per cent of the employed staff have degrees and/or parallel qualifications (Figure 14). Generally, such educational qualifications are useful to provide a quality care for the institutionalized children.

**Figure 15: Educational Qualification of the Staff Employed**



It is useful to know the professional qualifications of the staff members who provide child care services to the institutionalized children. Among the trained staff, a considerable proportion of the staff (26.3 per

cent) has trained in the field of child care and child development (Table 22). Moreover, 12 per cent of the staff has trained in counseling, 11 per cent had diplomas in primary school and 10 had social work diploma. In

fact, having training on such child related fields' improves the quality of child care provided and the skills of the children in institutions.

**Table 22: Distribution of Professional Qualification**

Professional Qualification	No of Institution	Per Cent
Child Care & Child Development	62	26.3
Counseling	28	11.9
Diploma in Primary School	25	10.6
Social Work Diploma	24	10.2
Certificate course for Matron	21	8.9
Child Protection	20	8.5
Diploma in Management	17	7.2
Diploma in Disable Child	8	3.4
Diploma in Computer	7	3.0
Diploma in Home Science	5	2.1
Diploma in Youth Development/Technical Training	4	1.7
Diploma in Community Development	3	1.3
Diploma in First Aid	2	0.8
Diploma in Sinhala	2	0.8
Diploma in English	2	0.8
Criminology	2	0.8
H.R.M	2	0.8
Other	2	0.8
<b>Total</b>	<b>236</b>	<b>100.0</b>

Majority (45 per cent) of the staff reported that they have separate

accommodation in the institution and the rest reported not having

accommodation and therefore stay in boarding houses.

### 3.16. Residential Facilities of Institutionalized Children .....

The most important aspect of the survey was to find out the

residential facilities available to the institutionalized children

the questionnaire was designed accordingly.

#### 3.16.1 Sleeping Space

The majority of the CCIs (67.87 per cent or 281) claimed that more than 36 square feet of floor space was available as sleeping space per child

(Table 23). Approximately 68 per cent of the CCIs have succeeded in providing the minimum quality standards in this respect i.e 36

square feet of space recommended by the Department of Probation and Child Care Services (DPCCS).

**Table 23: Sleeping space per child**

Sleeping space per child	No.	Per Cent
Less than 36 sqft	133	32.1
36 sqft or more	281	67.9
<b>Total</b>	<b>414</b>	<b>100.0</b>

It is noteworthy to indicate that most basic needs are provided by the Child Care Institutions. Table 24 shows that the basic needs are provided by the child care institutions. Ninety eight per cent of institutions (98 per cent) provided beds for each child, 99 per cent of

institutions have electricity 95 per cent of institutions have telephone facilities etc. (Table 24).

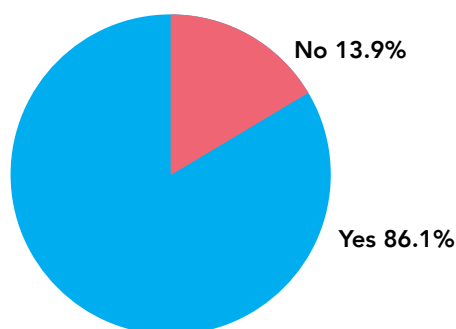
**Table 24: Basic Needs Provided by the Institutions**

Residential facilities	Yes	No
Beds available for each child	97.6	2.4
Availability of electricity	99.3	0.7
Availability of telephone services	95.2	4.8
Are separate areas for washing clothes	88.8	11.2

Having a healthy sanitary environment is also important for institutionalized children. Eighty six per cent of respondents reported that separate toilets are available for male and female children in the child care institutions (Figure 16). It was reported that separate toilets

for staff (92.4 per cent) were also available in the institutions.

**Figure 16: Availability of Separate Toilets for Male and Female Children**



Data from this survey reveals that 43 per cent and 39 per cent of institutions have water seal and water seal (Commode) type of latrines respectively, which is considered to be the hygienic type of toilet by health authorities (Table 25). However, a considerable number of institutions (17.4 per cent or 103 institutions- e.g. Colombo, Gampaha, Piliyandala, and Kandy etc.) have pits which are in hygienic

type of latrines and therefore the authorities should consider this matter to improve the sanitary condition in those institutions.

**Table 25: Types of Latrine in the Institutions**

Type of toilets available	No.	Per Cent
Pit	103	17.4
Water seal	256	43.2
Water seal (Commode)	232	39.2
Baby Commodes	1	0.2
<b>Total</b>	<b>592*</b>	<b>100.0</b>

\*:- mixed types of toilets are in the same institutions

Data from the survey also reveals that 98 per cent of the institutions are keeping account inventories whilst 97 per cent of those institutions are keeping books of accounts which are available and accessible. These accounts were mostly updated once a month (30 per cent) or at least once in 3 months (24.6 per cent) or once a year (25.8 per cent) in the institutions

(Table 26). Among those institutions that kept books of accounts properly, the availability and accessibility to these accounts books were found mostly in Gampaha district (13.2 per cent).

**Table 26: The Frequency of Updating the Accounts Books**

How often are they updated	No.	Per Cent
Once a 3 month	102	24.6
Once a 6 month	23	5.6
Once a year	107	25.8
Daily	49	11.8
Once a Week	6	1.4
Once a Month	124	30.2
Twice a Month	2	0.5

Table 27 shows other basic needs that over 90 per cent of institutions provide clothes and school children. It is important to note uniforms, cupboards, linen, meals menus etc. for the children.

**Table 27: Other Basic Needs Available in the Institutions**

Basic Needs	No.	Per Cent
Menu/ list available (quality & quantity)	91.4	8.6
Instructions available for preparation of balanced & nourishing meals	81.0	9.1
Sheets & towels available for each child	98.8	1.2
Cloths & school uniforms available for each child	97.3	2.7
Cupboards for personal belongings available to the children	90.2	9.8
special facilities available for under 5 years children	34.4	65.6

According to the survey, several whilst 84 per cent of institutions the educational level. Fifty nine infrastructure facilities were also provided reading and study per cent of institutions provided provided by the institutions. For rooms for these children which computer facilities whilst 28 per instance, 75 per cent of institutions are important for improvement cent only have access to internet provided library with news papers of their reading habits as well as facilities (Table 28).

**Table 28: Infrastructural Facilities Available in the Institutions**

Infrastructure facilities	Yes (%)	No (%)	Inadequate (%)
Library with news papers available	75.1	10.5	14.4
Reading// study rooms available	83.7	11.5	4.9
Computer facilities available	58.8	30.7	10.5
Access to internet facilities	28.3	67.3	4.4
Recreational materials available	84.6	4.1	11.2
Playground or sport facilities available	68.8	15.4	15.9
Outdoor or indoor game materials available	81.0	6.3	12.7

### 3:17. Educational Levels of Children in the CCIs

As seen in Table 29, the majority that the parents admit children to level seem normal. of the children in CCIs are at the CCIs for education purposes. The secondary level which indicates numbers in primary and territory

**Table 29: Education Levels of Children Living in CCIs**

Current schooling Levels	Male	Female	Total
Preschool	272	290	562
Primary	1197	1658	2855
Secondary	2752	4412	7164
Tertiary	384	627	1011
No Schooling (disabled are included)	65	104	169
<b>Total</b>	<b>4670</b>	<b>7091</b>	<b>11761</b>

Note; children institutionalized by court orders and those in remand homes and safe homes are not included

The overall school attendance is very positive with only 8.9 per cent and 1.9 per cent not attending and attending irregularly (see Table 30). The reasons for this fact are the ignorance of schooling of the children, some illnesses and court cases etc.

**Table 30: School Attendance of Children from CCIs**

School Attendance of Children from CCIs	Per Cent
Attendance regular	85.0
Do not attend	8.9
Attendance not regular	1.9
Not relevant (infants, under age)	4.1
<b>Total</b>	<b>100.0</b>

Among the causes that determine school attendance illness and disability and personal problems outweigh the other factors (Table 31). This is an area the Probation and Child Care Services is needed. intervention of the Department of

**Table 31: Causes for Inability of CCIs Children to attend School regularly**

Reasons	Per Cent
Long distance to school	0.6
Personal problem	42.5
Learning difficulties	1.4
Illness/ disability	48.0
Has never attended school	3.0
Other	4.56
<b>Total</b>	<b>100.0</b>

### 3.18. Health and Nutrition

It is worthy to report that 97 per cent of institutions have first aid facilities in the institutions (Table 32). However the percentage of having records for the children are inadequate as it was recorded only 70 per cent. Approximately 78.1 per cent of the institutions monitored the nutritional level of the children (Table 32).

**Table 32: Health and Nutritional Status of Children in the CCIs**

Health and Nutrition	Yes (%)	No (%)
Every child have health record	69.5	69.5
Child been hospitalized / warded during the last one year	52.4	52.4
Provide first aid before taking the child to hospital	96.5	96.5
Nutrition levels of the children monitored	78.1	78.1

### 3.18.1. Administrative and Legal Basis of Child Care Centre

As seen in Table 33, majority of institutions have conducted administrative committees to institutions. Ninety two per cent of the institutions reported that they conduct these meetings once a month or once in three months.

**Table 33: Number of Administrative Committee Meetings Held**

Number of administrative committee meetings held (once a month)	No.	Per Cent
Yes	381	92.0
No	33	8.0
<b>Total</b>	<b>414</b>	<b>100.0</b>

# Chapter Four

## SURVEY FINDINGS BASED ON QUALITATIVE ANALYSIS

### 4.1. Introduction

Of the two methodologies adopted in this study the qualitative approach was used to gather information that was otherwise unavailable. Case studies, focus group discussions, interviews and observations, were the instruments used to obtain such information.

During this process of gathering qualitative information individual interviews were held with institutionalized children, their parents, and group discussions were held with children, probation officers, and Provincial Probation Commissioners while close observations of the institutions too gave additional information. Discussions held with different

stakeholders on the same subjects provided the opportunity to triangulate the responses. Table 34 given below shows the number of discussions and interviews that were held and the responses received. The total number of respondents used in the qualitative survey was 80, selected on the basis of samples of categories of respondents in the nine provinces. The majority of them were resident children of institutions. The transcripts of children's interviews were considered as central in this study and information from other sources, i.e. focus groups, parents, probation officers, Provincial Probation Commissioner and overall assessments of the enumerators were used to triangulate the

information provided by the children.

The Framework Analysis approach adopted in the analysis of qualitative data seemed more suitable for achieving the objectives of the study. The present study, in addition to revealing the status of institutionalized children, aims at providing information with policy relevance for improving their conditions.

In the content analysis of the children's transcripts they were categorized in to the six themes depicted in Table 35 below.

**Table 34. Transcripts: Number and Source by Province**

Interviewee/ Discussant	Province									Total
	Western	Central	Southern	Sabaragamuwa	North Western	Northern	Uwa	Eastern	North Central	
Provincial Probation Commissioner	1	1	1	1	1	1	1	1	1	9
Case Studies	7	1	5	2	3	6	3	4	2	33
<b>Focus Groups</b>										
Probation Officers	1	1	1	1	1	1	1	1	1	9
Parents	1	-	1	1	1	-	1	-	-	5
Institutionalized Children	3	1	1	1	1	2	1	2	2	14
Overall (NISD officers)	1	2	1	2	1	1	1	1	-	10
<b>Total</b>	<b>14</b>	<b>6</b>	<b>10</b>	<b>8</b>	<b>8</b>	<b>11</b>	<b>8</b>	<b>9</b>	<b>6</b>	<b>80</b>

The analysis of these themes brought out a multitude of categories that could be elaborated into sub-categories (Table 35)

**Table 35: Major Themes and Categories (FGD)**

Theme No	Theme Title	Categories
1	Reasons for being institutionalized	problems at home
		no home
		poverty
		other
2	Children's life at institutions	happy
		somewhat happy
		unhappy
3	Educational/ career opportunities	yes
		to some extent
		no
4	Condition of the institutions	very good
		good
		average
		not satisfactory
5	Present psychological condition of the Children	normal
		somewhat imbalanced
		imbalanced
6	Children's attitudes and aspirations	positive
		negative
		indifferent

## 4.2. Reasons for Children being Institutionalized .....

According to children's responses (transcripts) the main reason for their institutionalization is the unfavourable conditions prevailing at home. 72 per cent of the children's case studies revealed that they had been institutionalized due to problems at home. A few who did not like to live with their parents in spite of their parents being able to maintain them had chosen to live in the institutions. Therefore it could be said that a majority of the children chose to live in an institution. This has been the view of Probation Commissioners' in various provinces. Almost all Commissioners had cited family dysfunction as the

cause for children choosing to live in an institution. Moreover, 65 per cent of the parent groups interviewed was also of the same view. Broken families and insecure homes were the main reasons given by these parents.

The unfavourable conditions at home had many dimensions. Some of the parents of children were divorced and the mother was not able to raise a child. In another case, father was an alcoholic and there was no interest in him to raise the family. 70 per cent of the children in the case studies reported that their mothers had gone abroad

and there was insecurity at home especially with regard to female children. Most often, female children were the targets of sexual abuse by neighbours and even by their close relatives including their own fathers leading to incest.

Another major reason for the children to leave their homes was poverty. Nearly two thirds of the children said that poverty of their parents were a major reason for their institutionalization. Lack of financial resources made it difficult to raise children and provide them with an education. A 14 year old girl from an institution in the Western province



said: "My father is dead. My mother does not have money to take care of me. I have only my mother. She does not have money to send me to school. That is why she handed me over to this home."

At the same time, there were cases with exceptional mental stress. It was not really the unfavourable situation or poverty that led them to be institutionalized. In fact their parents could afford to raise them and wanted their child to live with them but the child did not like it. It was the child's parent's unacceptable living style lack of love and care that led to this dislike. For example:

"My family consist of my father, mother and myself only. Since my childhood I did not love my mother and father. I did not like to talk to them or live with them. I liked to live with my grandmother and grandfather. Most of the days, I stayed with my grandparents. But in the evening my parents come and take me home. Even then, I do not speak with them because I did not like them. When I was in Grade 4 my mother and father got divorced. Then, my mother went abroad. It was with my grandmother who took care of me. But she could not take care of me forever and therefore she admitted me to this institution. Both my parents love me. Sometimes my father comes to see me. But I do not like to see him. My mother brings presents from overseas. But I do not like to accept them. I do not know why I dislike them so much

even though they have not done any wrong to me' (The story of an 18 year old girl).

The loss of love at home led male children also to be institutionalized. A 17 year old male child now living in a correction centre had this story.

"My mother does not love me nor my father. When I was just 3 years old, she had abandoned me in a rubber estate. An uncle in our village had found me and handed me over to my grandfather. Then my mother took me home. She has not even fed me well. When I could understand things, I remember she did not feed me or my father. She was not a good woman. She had connections with other men."

In Northern and Eastern Provinces, poverty coupled with insecurity especially due to the conflict situation prevalent there had led many children to be institutionalized with the help of non-Governmental organizations and neighbours. A girl aged 11 years and living in a voluntary children's home narrated her story prior to her arrival at the institution. She was living with her adopted parents.

'Tragedy struck during the conflict in Mullaitivu when I lost both my adopted parent. Relatives took me to my ammamas' (maternal grandmother) house. I lived with my amamma for some time and she took care of me like my chitthy (adopted mother) did but she was

feeble and had no money to look after me well for a longer period. So she decided to send me to my Maamas' (uncle) house and mamma agreed to take me to his family. So I went to mamas' house to start a new life.

At my uncles house things started going bad for me. Mammi (Aunt) along with my uncle used to give me a lot of work there and I could attend school only after completing the household chores. From the time I wake up in the morning till night, apart from attending the school, they gave me all sorts of work to complete including cleaning the house, the compound, watering the plants, helping my aunt with cooking etc. They often scolded and beat me up and at times tied me up. Due to this, I could not concentrate on my studies. When I got 0 marks for my English exam my aunt beat me up severely and my uncle after drinking heavily one day dipped me into the well and then took me up and asked me to spend the whole night in wet cloths. I realized that their intention of taking me from my grandmothers' house was to keep me as a servant in their house ".

As apparent from the foregoing the main reasons for children being institutionalized can be identified as poverty, lack of financial resources along with mental stress caused by feelings of insecurity.

### 4.3. Children's Life at Child Care Institutions

Children's life at institutions needs close attention as it could vary by the age of the child, their previous life experiences and the situation at the institution itself.

The children's life experiences at their respective institutions seemed to have had severe impact on their lives. These institutions are considered as temporary homes that help children at difficult times of their lives. They are meant to prepare children to face the challenges of their lives and eventually become good and productive citizens. As such, their stay at these institutions should provide a conducive environment to make them such persons.

According to the information gathered, satisfaction or dissatisfaction of life at the institution depends mainly on two factors. The condition of life prior to the arrival at an institution is one of them. The other is the new life at the institution in comparison to the previous life experiences. Almost all the children interviewed did compare their present life with the previous one. They used many criteria such as protection, opportunities for education, love and care, facilities available at institutions in this comparison.

The intimate relationship with caregivers at the institution was a major determinant of their satisfaction. An 18 year old girl in an institution located in Negombo expressed her satisfaction in the

following words: "I like it very much to stay in this home. Even when I go home for holidays I want to return to this home. I have many friends here. Also, the sisters here provide protection to us. They show us our mistakes kindly without punishing us. The sister in charge of this home is like a friend to us. She is very friendly with us. She loves all of us. We can talk anything with the sister." Another girl of 16 years from a home at Moratuwa felt the same way: "Sister is very close to children. There are nine children in this home and we are like a family. We can discuss our problems with the sister very openly." A 15 year old girl in a Buddhist home at Kegalle had the same feeling. According to her since the matron is not that old she could talk to her like a friend and any problem could be resolved in a friendly manner.

Another contributory factor to children's satisfaction was the opportunities available for education and career development. Almost all children had been provided with school education and they were very happy at school. Again, the school teachers were very cooperative and sympathetic to these children. Some of the children had been provided with facilities to attend tuition classes. The provision of education facilities, in a way, provided a window to these children to experience the life in the outside world.

The facilities available to the children at these institutions such as recreation and sports

facilities ranked high. Some of the institutions provided their children with televisions and computers (sometimes with internet facilities). Facilities for indoor and outdoor games also made children happy. Some children were appreciative of the medical facilities provided to them.

In general, the life at the institution has been organized in an orderly manner. Children are required to work according to a time schedule. Some children spoke of this life style with satisfaction. They saw a meaning in that life style.

At the same time, there were unhappy children, too. A main reason for their unhappiness has been the unsatisfactory relationships they had with their matrons. Many probation officers, nearly 50 per cent, also had observed this unhappy situation. Also, all probation officers were of the view that untrained matrons have been a major cause underlying such situations. A 14 year old girl from an institution located at Kalutara was of the view that it is much better if they had an understanding matron. The present old matron is unkind, she said. Another girl from Galle, too, expressed her dissatisfaction about matron's unkind behaviour. Due to the unkind behaviour of these matrons children have become frustrated. The interviews with Probation and Child Care Officers revealed another view of this problem. On average, the monthly salary of a matron ranged between Rs. 3,000 and 8,000. The

low level of salaries had made it difficult to recruit qualified persons. According to Probation Officers most of these matrons are not trained and it is therefore difficult to expect an optimal service from them. In some instances, although the institution as a whole was of a good standard (physical environment, space, cleanliness, facilities like play rooms, music room etc), the children seemed unhappy. The strict administration of rules and regulations was one reason for the unhappiness. In some instances, children were barred from playing in the garden and they were expected to play only in the designated play rooms.

As revealed in the focus group discussions with the children some were of the view that small children are vulnerable to crude behaviour of the older children. This applies

both to males and females. Among the older male children, some are accustomed to consume liquor and smoking. Among females, too, sexual abuse of younger children could be found. According to the children, these vulnerable children go back to the society with such experiences.

On average children did not like living according to a time tables as time tables were administered very strictly, limiting their freedom.

Some children were unhappy because they were still immersed in their previous life experiences. A girl at an institution in the Eastern Province said: "Ever since I came to this home I have been feeling lonely. I do not know why God sent me to this world and why did all abandon me." A caretaker in that institution responded saying that she doesn't

seem to have any support from her family, she has poor concentration on activities, normally she does not have good friends, keeps worrying about her drunken father and the stigma related to that."

As illustrated in the foregoing section, children's life at institutions appear to depend on many factors such as the close and intimate relationship they have with their caregivers, opportunities available for education and career development, behaviour of the older children and nostalgic feelings about the previous life experiences. These factors seem to have acted both ways, i.e. to make them happy or to make them unhappy. Some of the factors affecting children's happiness/unhappiness will be discussed in detail in the following sections.

#### 4.4. Educational and Career Opportunities .....

Almost all the children interviewed had been provided with educational facilities by the institutions. A vast majority of them were females and their age ranged from 9 to 18 years. Some of them had received school education before being institutionalized but not regularly. The unfavourable conditions prevailing at home coupled with economic problems have adversely affected their schooling. As some transcripts show, especially the parents' responses, some of the children had been institutionalized with a view to providing them with regular school education. Provision of schooling for the institutionalized

children was made compulsory by the Department of Probation and Child Care Services. 60 per cent of the parents were of the view that their children in institutions were being provided with good educational opportunities.

A large majority of children were in Grade 10 and above. 10 graders were preparing for their Ordinary Level examinations. However, just sending children to schools would hardly make a change in them. Even at their homes they did go to school but there was no conducive environment for learning at their homes. It is encouraging to note

that most of the institutions provide educational facilities and conducive environments for children to engage in their educational activities. Many institutions allocate specific time periods for educational activities in the daily time schedules. Many of them provide children with necessary books and other required equipment also such as exercise books, pencils and pens. There were some instances where children were provided with tuition facilities in order to improve their subject knowledge. In a few institutions children were provided with computer and sports facilities. According to the officials of the

Department of Probation and Child Care, some school principals did not like to enrol children coming from the institutions fearing that the standards and the social recognition of the school would be endangered. At the same time, there were children who have never been to school and now they are unable to enter classes that match their age. As a result, they are being enrolled into lower grades making their school life miserable.

Another very important factor is the social environment at school. In some instances, both teachers and students were not very cooperative with the children coming from the institutions. Some students were

trying to keep away from these children. And some teachers were very harsh on them. But in general, the attitudes and responses of the school teachers were encouraging. They seemed to have understood the difficulties faced by these children and tried to help them.

However, the most decisive factor is the children's attitudes and responses. Over 80Per cent of the children were happy with the opportunities provided by the institutions to continue their education. As mentioned before many of them had been to schools and have understood the value of education. A 14 year girl who has been in the institution for 8

years said, I like very much to be in school. Every day I go to school. I have many friends in school. They are very good. Teachers are really good. They look after us. They treat us well. I like history, Sinhala and religion very much. However, not all the children were happy about the institution's assistance with regard to education. A 21 year girl (not a child anymore) who had been in the institution for 12 years and has finished her education complains about the help received to improve her career opportunities. She follows a course in Juki machine operation and was unhappy that she is not given enough workbooks. She was very critical of the matrons.

#### 4.5. Conditions of the Institutions

From the children's perspective the conditions at the institutions depended on many criteria. The freedom within the institution, safety, space, food, availability or non-availability of a homely environment, rules and regulations, attitudes of the management, counselling services and the cooperation of other children are some of them.

In almost all institutions, according to the information provided by the children in the case studies as well as by Probation Officers (65 per cent) the daily life has been organized on the basis of a time schedule. Although this arrangement may have eliminated the free and open environment found in a home, the children, in general, do not complain about it. The major reason for this could be their previous life

experiences. They have undergone many difficulties not only of economic nature but also, in many instances, of sexual abuse and harassment and associated social problems. In such cases, children find the new life at the institution safe and free of day to day problems. In some instances, children do not like to go back to their homes fearing that they will have to encounter the same unhappy situations. However, there were children who still value a life style without a time table. They have criticized the strict administration of the rules and regulations.

Many children were satisfied with the safe living arrangements in the institutions. The institutions have provided security for the children and the security rules and regulations are strictly administered. It has to

be noted that a large number of institutions under review was for females (in the age group between 9 and 18) and their security must be ensured.

Some of the institutions are well administered and their management committees meet at regular intervals. In a few instances the management committees consisted of personalities with social recognition. Generally the personalities included school principals and priests. At their meetings they discuss the progress of the institutions and problems the institutions encounter. Some institutions receive financial assistance from various sources for which regular meetings of their management committees are compulsory. However, in many instances, although there were such

committees, their performance was not satisfactory. In order to improve their performance several measures could be undertaken. Besides meeting at regular intervals the composition of the committees could be reorganized. It is the opinion of more than two thirds of the Probation Officers the situation could be improved if they could have direct access to supervise them.

According to the Probation Officers, in general, the institutions administered by the Catholic/Christian church are well managed. They are of the view that sisters who work there are very flexible. Many of these sisters are trained

in counselling too. On the other hand, parents also like to admit their children to institutions administered by the church because they are of the view that church maintained institutions have good discipline and provide good education to their children. The main reason for this situation, according to the Probation officers is the availability of financial resources.

Another factor that adversely affects the expected performance of the institutions was the absence of trained counsellors. Out of the 23 interviews conducted there were only 3 counsellors. Children were also aware of the absence of

counsellors. They would like to have a person who could listen to them and offer advice on various issues as they do not like to discuss some problems with their care givers. In one instance, a girl used to write her problems in small pieces of paper and later tear them off.

It was noted from the transcripts that living in an enclosed community have also created some unfavourable situations. Some of the children were unhappy about the behaviour of older children living with them. Sometimes, they have been sexually abused by the older children. This has been due to the lack of supervision, especially at night.

#### 4.6. Mental Conditions of the Children .....

A large majority of children are mentally disturbed. According to the transcripts nearly 70 per cent of the children are mentally imbalanced at different degrees. Among the many reasons thoughts of returning home and living happily with their loved ones, especially the mother seemed to disturb their minds. They are living in two worlds. "A 14 year old girl in an institution in Wadduwa said, 'In this institution I have everything. There is security also. I can be happy. I have a friend here. I am happy about that. Even though everything is available it is not like home. I like to be with my mother. You cannot find mother's love here. Teacher also loves me. But I always think it is not like home.'" The lack of love disturbs children mentally. To quote a child, I like studying very much. But I did not have an opportunity for that. Not

only that, my mother does not love me. I am very sad. She has never taken me to her and cuddled me. I like very much to receive her love. The word love means a lot to me. The behaviour of some caregivers has been a reason for a frustrated life experienced by some of the children in the institution. To quote an example 'A child said she is frustrated mainly due to the unfriendly behaviour of the caregiver. This corroborates and strengthens the views expressed by some children about some of the caregivers.

In most cases the past experiences seemed to haunt the children still. In one instance, when a child was asked to draw a picture showing the location where she would like to live she drew a picture of her father and mother. But, her father

is separated from her mother. Previous experiences still haunts these children showing the necessity for counselling. At the same time, parents cannot remain idle thinking that their children are being taken care of by an institution and they do not have a role to play anymore. It is their responsibility to see that 'out of sight should not be out of mind'. A child who was raped by her own father still lives in a state of shock. She hates her father and stepmother. When she was asked to draw a picture of her family she did so but put a cross on father's face showing her hate. In another case, the girl had been raped by her uncle. He has expressed his willingness to marry her but she has refused. She is afraid to leave the institution because of the uncle who is awaiting to marry her.

The strict administration of rules and regulations has also pressurised the children. Sometimes children are of the view that they are being discriminated. This state of frustration has been aggravated by the unfriendly behaviour of some care givers.

Another unsatisfactory situation in the institutions, especially the

ones that are managed by Buddhist organizations, has been the practice of alms giving to children by groups of people. As Probation Officers point out, although this is done with good intentions, the practice of visitors watching children when they are given their meals seems to harm the dignity of the children.

The favorable and friendly atmosphere prevailing at some

of the institutions have greatly contributed to the stable mental conditions of the children. In one instance, the children treated the sister and father of the institution as their own mother and father. Children are of the view that the care givers, in turn, consider them as their own children.

#### 4.7 Attitudes and Aspirations of Children

The attitudes and aspirations of the children show a mixed picture. Some children had very clear-cut aims in their life. Although these are mere expressions of the children, there is a possibility to work on these feelings to transform them into good citizens

A child in an institution from Southern Province had these aspirations:

'Excel in sports and become an instructor in sports, represent Sri Lanka at SAAF Games and Olympics. To be the best short distance runner in the world, Build a house and lead a happy life with the mother. Another child from the same province had these targets 'find gainful employment after finishing school education ,purchase a plot of land and build a house with the help of his brothers go overseas, marry an employed woman and raise a family',

Another girl wanted to be a lawyer while another preferred to be a teacher.

All these children had problems in their life and, to some extent,

have come out of those unpleasant experiences and now want to start a new life. It would be of importance to know the reasons/factors underlying their transformation. Interviews with those children, helped to identify a few contributory factors .To them the institution was the, 'home' with surrogate fathers and mothers living in a friendly atmosphere with a caring staff. They had an opportunity to continue with their education and the environment at the institution was conducive to educational activities.

Not all children, however, had such aspirations. Most of them were indifferent to the society or had negative attitudes. At a focus group discussion with children, it was possible to feel the fear that many of them were harbouring about their eventual assimilation with the society. They were of the view that they will be marginalized and would be ill-treated by the people. According to them they will not be considered equal with other children because they were at an institution. In a way this also showed children's negative feeling

towards child care institutions. Some Probation and Child Care officers were of the view as expressed by one of them.

'World opinion is to do away with child care institutions. But the situation in Sri Lanka is quite the opposite. Eventually, when a child goes home the neighbors and relatives try to stigmatize them saying that he/she has come from an institution. As such parents have no other alternative but to keep the child at the institution until he/she reaches 18 years of age.'

Eventually, almost all the children want to leave the institution, at some point of time, to enter the larger society. When parents were interviewed on this a completely opposite picture emerged. The majority of the parents interviewed were happy with their children's life at the institutions. They were comparing their children's unpleasant early life experiences at home with the new life at the institutions. Some of these children, especially females had been subject to sexual abuse and

harassment. Some parents continue to remain poor and it seems to be a better choice to allow their children to live in institutions as long as possible. They appreciate the services provided by the institution and hardly criticize them. As such one could see a conflict of interests between the children and institutional expectations and between parents' expectations and

children's aspirations. Such situations demonstrate very clearly that each situation needs to be considered on a case by case basis. However, the necessity to implement parallel programmes, not only economic but more importantly, socio-psychological, aimed at alleviating or minimizing the problems faced by the parents should be given priority. Many of these parents are poor and

find it difficult to raise children. Educationally they are at the bottom level and lack proper knowledge on raising children. Their marital life will remain disrupted and familial peace denied. Whatever the reason, the presence of such conflicts would adversely affect the future life of the children who are awaiting to be recognised as fully fledged citizens of this country.

## 4.8. Conclusions

Although the situation with institutionalized children at global level, as stated in the above mentioned Save the Children report, is not satisfactory, the situation in Sri Lanka, according

to the children and their parents, is much more satisfactory. Factors like, safety, better food and health care, educational opportunities are much valued by children and their parents. However, the situation

could be improved further. In this respect the views expressed by the respective Probation Commissioners as well as Probation Officers need attention.

- At present, the institutions are funded by the Central government in addition to the support extended by the Provincial Councils (only in Five PCs). Other sources of funds are foreign donors and the NGOs. However, almost all Probation Commissioners were of the view that funds are not adequate to maintain the institutions. In fact all the probation officers were of the same view.
- Low salary scales given to caregivers in the institutions is reportedly the major reason for the poor services rendered by them. All Probation Officers interviewed mentioned this deficiency.
- Low salary scales make it difficult to attract well trained personnel to work in the institutions. This has resulted in the recruitment of untrained personnel (100Per cent of the PC s was of this view).
- Lack of counselling ability has been mentioned as a problem by about 60 per cent of the Probation Commissioners. This could be related to the difficulty in recruiting qualified personnel due to the low level of salaries offered.
- Nearly 55 per cent of the Probation Commissioners had mentioned the lack of programmes to involve parents in the institutional activities as a deficiency.

Only in the Provinces of Western, Central and Uva have separate Acts to administer the institutions. Others at present follow the Central

government Act. According to the discussions with Commissioners in the above mentioned Provinces having a separate Act empower

them to supervise the activities of the institutions in their provinces.

# Chapter Five

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## CONCLUSION, RECOMMENDATION AND POLICY OPTIONS

### 5.1. Introduction

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Institutionalization of children is taking place due many reasons. This study while identifying the two major reasons that account for the institutionalization of majority of these children, as poverty and education – has also come up with new and better recommendations that could be contributed to bring about success and happiness in children’s lives.

As is evident, the underlying philosophy of the institutionalization of children in Sri Lanka is changing conceptually.

The opinion expressed by the parents interviewed referring to these institutions as getaway homes for their helpless children indicated that they valued these institutions as safe living arrangements providing accommodation, food, security, and education to their children.

The main reason for institutionalization of children that surfaced in this study was poverty in its broadest sense. The parents of those children are not only economically poor but were also vulnerable, voiceless, sometimes physically weak and socially marginalized. They remain immersed in a deprivation trap triggered by poverty.

The living standards of the children maintained in these institutions

were generally satisfactory with exceptions in certain respects. These exceptions appear to be largely the result of poor management and care, that were evident from the observations, views and experiences of the institutionalised children and officials of the Department of Probation and Child Care. In this context the institutionalised children and some officials had opined to say that those institutions maintained by the Catholic Church seemed to offer better service.

The study also revealed that the perfect outer appearance of some institutions does not always convey the real situation. Some such institutions though equipped with many facilities such as play rooms, reading rooms, well maintained gardens, protecting walls, and neatly dressed management staff, were not popular among the children due to the strict rules and regulations upheld by the staff.

Furthermore a large number of the staff in many such institutions were found to be inadequately trained in child care and counselling. This has resulted in the poor service provided and making the children unhappy. But it must be mentioned, that there are institutions that provide a homely environment which are very much valued by the children. Almost all children want to leave the institutions at some point of time

normally at the age of 18 years. Some of them, in fact, have appreciable aspirations and have clear-cut targets to be achieved. At the same time, some are still sceptical about the society’s reactions to their entry into the society. They seemed to fear that they will be marginalized by the society making them, more vulnerable and will be unable to find love and care in their homes once they leave the institution to return home.

In the opinion of some officers of the Department of Probation and Child Care Services there appears to be a difference of opinion between their department and the Children’s Secretariat on the rules and regulations adhered to by the CCIs. The Secretariat values the human rights dimensions of children very much while some departmental officials were of the view that there should be some law and order in the institutions which limit to some extent the freedom of the children. All institutions are keen to provide educational opportunities to the children in their care. A large number of children attend government schools in the neighbourhoods of the respective CCIs. Those schools vary in their capability to meet with the educational needs of these children in CCIs. In some institutions, the in-house facilities provided for education is not sufficient with no facilities provided for reading/



writing. However in some CCl's the children who are preparing for their O/Ls or A/Ls are provided with tuition facilities. Despite this situation certain school authorities have been reluctant to admit children from CCl's into their schools fearing that the social recognition of their schools may decline by admitting such children.

According to the UNICEF (2005) the preferred solution to resolve the

shortcomings of the institutionalizing process is to try to prevent children being separated from their homes in the first place. In cases where families are unable to take proper care of children, networks of foster families, provided with additional support from the state, may be the backbone of an alternative care system for a child, which is considered the next-best- to family care.

On the whole this report provides information on important areas for implementation in the area of probation and child care services – in particular those defined within the National Plan of Action for Children in Sri Lanka. Furthermore this report is expected to serve as a vital document for the formulation of new policies that focus on improving the conditions of lives of children who are separated from their families, temporarily or permanently.

## 5.2. The Way Forward (Recommendations and Policy Options) .....

The way forward to resolve the problems encountered by the institutionalized children are twofold.

Firstly, the conditions creating the tendency towards institutionalization of children should be dealt with without delay.

In this context, parents, relations and neighbours play a critical role. At familial or community level they must be supported to gain strength through the provision of sources of income that would, to some extent, strengthen the capacity of parents to take care of children. Parents should also be properly counselled.

The Department of Probation and Child Care, Children's Secretariat or other voluntary organizations could conduct such programmes to educate the parents and close relatives on how to deal with problems faced by the children. Parents should be made to understand that institutionalization is the last resort for children facing problems.

Secondly, the responsive measures that cover actions taken after the institutionalization should be developed.

The institutionalization of children is a temporary measure and at some point in time children are expected

to leave the institution and merge with the society. As such, their mindsets should be strengthened to face the situations in the real world when discharged.

For this process of integration of institutionalised children with the society the DPCCS introduced the Case Management system in 2010. The success of which depends on the support rendered by the individuals connected to the institutionalisation process.

**The following measures are also recommended in response to many of the issues identified affecting children in CCl's:**

- Provide a homely environment in CCI's keeping in mind the temporary nature of the children's stay in the CCI's.
- Provide training to matrons and others involved in care-giving to offer a humane and effective service.
- Provide opportunities for matrons and other officials from various institutions in the island to meet and share their experiences and discuss problems. Such meetings will provide them with an opportunity to know the good practices adopted in other institutions.
- Review and revise strict administration rules and regulations.
- Provide opportunities for vocational training for the institutionalized children.
- Provide a conducive environment for educational activities within the institutions.
- Provide sufficient number of caregivers to maintain close supervision of the inmates.
- Persuade all staff to engage in extracurricular activities, such as outings with children.
- Ensure the registration of all the CCI's and conducting regular inspections in collaboration with the DPCCS.
- Involve CRPOs in ensuring the welfare of children in need of protection and monitor the implementation of minimum quality standards prescribed by the Provincial Commissioners of Probation and Child Care.
- Ensure the active involvement of POs in admissions of children to residential care. Necessary directions should be given to POs to avoid institutionalization of children who are not suitable for institutionalization. Necessary amendments to the law should be introduced in this regard.
- Prepare case files for each child admitted to residential care, for the development of care plans. The introduction of the Case Management System prepared by the Department of Probation and Child Care should resolve such issues.
- Evaluating the needs and prioritizing the use of available resources and thereby improving the use of existing facilities and developing alternative care services – such as foster families.
- Regular and continuous monitoring of children with special needs.
- Review and introduce necessary amendments to the Law on child protection.
- Ensure the enactment of Provincial Statutes on Probation and Child Care Services in all provinces without further delay (as only three provinces have enacted such Statutes).

End Notes

Page 5: (rajivawijesinghe.wordpress.com. 2014/03/16/the care of children 1-children's homes)

# Annexure I

**Table 1: Distribution of unregistered homes by District**

District	No.	Per Cent
Gampaha	3	13.6
Kaluthara	1	4.5
Kandy	1	4.5
Galle	2	9.1
Mathara	2	9.1
Hambanthota	1	4.5
Puttalam	1	4.5
Kilinochchi	1	4.5
Jaffna	2	9.1
Vavuniya	6	27.3
Ampara	1	4.5
Trincomalee	1	4.5
<b>Total</b>	<b>22</b>	<b>100.0</b>

**Table 2: Child Care Institutions (CCIs) with Paying/ Non Paying Inmates**

Type of Institution	Paying	Non Paying
Government	0	37
Private	2	48
INGOs	1	15
NGOs	0	47
Voluntary	0	130
Boarding houses	1	1
Orphanages	1	29
Religious institution	5	97
<b>Total</b>	<b>10</b>	<b>404</b>

**Table 3: Distribution of orphans (both parents are not alive) Children CCIs by district**

District	No.	Per Cent	District	No.	Per Cent
Gampaha	216	10.7	Anuradhapura	51	2.5
Colombo	408	20.1	Polonnaruwa	6	0.3
Kaluthara	89	4.4	Kurunegala	157	7.7
Rathnapura	29	1.4	Puttalam	108	5.3
Kegalle	24	1.2	Kilinochchi	74	3.6
Badulla	70	3.5	Jaffna	105	5.2
Monaragala	55	2.7	Mannar	64	3.2
Kandy	72	3.6	Mulathivu	47	2.3
NuwaraEliya	37	1.8	Vavuniya	169	8.3
Matale	10	0.5	Ampara	29	1.4
Galle	99	4.9	Batticaloa	22	1.1
Matara	7	0.3	Trincomalee	55	2.7
Hambantota	25	1.2			

**Table 4: Kind of disability had the children with special needs**

Kind of disability had the children with special needs ( Multiple response)	Male	%	Female	%
Physical	56	10.4	103	19.5
Learning (Mental)	144	26.9	171	32.4
Visual impairment	49	9.1	29	5.5
Mental Health	128	23.9	109	20.7
Hearing/language impairment	128	23.9	86	16.3
Other	31	5.8	29	5.5
<b>Total</b>	<b>536</b>	<b>100.0</b>	<b>527</b>	<b>100.0</b>

**Table 5: Common language use in the institution**

Common language use	No.	Per Cent
Sinhala	249	60
Tamil	131	31.7
English	3	0.7
Sinhala & Tamil	10	2.4
Sinhala & English	4	1
Tamil & English	10	2.4
All 3 languages	7	1.7
<b>Total</b>	<b>414</b>	<b>100</b>

**Table 6: Children with special needs by district**

District	Yes	%	No	%	Total	%
Gampaha	18	13.1%	38	13.8%	56	13.5%
Colombo	18	13.1%	30	10.9%	48	11.6%
Kaluthara	9	6.6%	18	6.5%	27	6.5%
Rathnapura	2	1.5%	9	3.3%	11	2.7%
Kegalle	1	0.7%	6	2.2%	7	1.7%
Badulla	3	2.2%	9	3.3%	12	2.9%
Monaragala	1	0.7%	3	1.1%	4	1.0%
Kandy	11	8.0%	8	2.9%	19	4.6%
NuwaraEliya	1	0.7%	7	2.5%	8	1.9%
Mathale	0	0.0%	7	2.5%	7	1.7%
Galle	14	10.2%	14	5.1%	28	6.8%
Matara	6	4.4%	1	0.4%	7	1.7%
Hambantota	3	2.2%	1	0.4%	4	1.0%
Anuradhapura	7	5.1%	5	1.8%	12	2.9%
Polonnaruwa	1	0.7%	3	1.1%	4	1.0%
Kurunegala	10	7.3%	13	4.7%	23	5.6%
Puttalam	7	5.1%	12	4.3%	19	4.6%
Kilinochchi	4	2.9%	1	0.4%	5	1.2%
Jaffna	4	2.9%	20	7.2%	25	6.0%
Mannar	1	0.7%	4	1.4%	5	1.2%
Mulathivu	3	2.2%	1	0.4%	4	1.0%
Vavuniya	4	2.9%	8	2.9%	12	2.9%
Ampara	1	0.7%	11	4.0%	12	2.9%
Batticaloa	3	2.2%	36	13.0%	39	9.4%
Trincomalee	5	3.6%	11	4.0%	16	3.9%
<b>Total</b>	<b>137</b>	<b>100.0%</b>	<b>276</b>	<b>100.0%</b>	<b>414</b>	<b>100.0%</b>

**Table 7: Reason for institutionalization (Multiple Responses)**

Description	Male	%	Female	%
Economic difficulties	1081	19.1	1951	20.5
Dysfunctional families	1056	18.6	2406	25.3
Abuse	55	1.0	249	2.6
Abandon	354	6.3	449	4.7
Temporary inability of parent to cope	89	1.6	177	1.9
Parent migrating	119	2.1	191	2.0
Law/court orders	1316	23.2	2189	23.0
Education	409	7.2	391	4.1
Protection	613	10.8	571	6.0
Need for special care	197	3.5	234	2.5
Conflict in the country	86	1.5	194	2.0
Natural disaster	5	0.1	29	0.3
Other	284	5.0	481	5.1
<b>Total</b>	<b>5664</b>	<b>100.0</b>	<b>9512</b>	<b>100.0</b>

**Table 8: Duration of stay of children in the CCIs by institution type**

Description	0 - 2 years		2 - 5 years		5 - 10 years		10 - 14 years		More than 15 years		Total
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	
Government/probation & child care	245	261	372	201	75	97	9	129	1	12	1402
Private	158	239	230	493	163	236	51	38	8	15	1631
INGOs	59	103	65	56	145	90	138	84	36	120	896
NGOs	89	392	361	411	228	382	14	83	34	28	2022
Voluntary	561	706	690	792	297	528	151	313	52	59	4149
Boarding houses	2	17	8	10	7	3	0	0	0	0	47
Orphanages	69	177	76	265	56	100	7	25	0	0	775
Religious institution	342	702	512	779	222	443	28	92	80	57	3257
<b>Total</b>	<b>1525</b>	<b>2597</b>	<b>2314</b>	<b>3007</b>	<b>1193</b>	<b>1879</b>	<b>398</b>	<b>764</b>	<b>211</b>	<b>291</b>	<b>14179</b>

**Table 9: Children with/without Parents by institution type**

Description	No Parents	With one parent	With both parents	Total
Government/probation & child care	252	529	621	1402
Private	223	793	615	1631
INGOs	154	589	153	896
NGOs	295	1033	694	2022
Voluntary	924	2019	1206	4149
Boarding houses	1	17	29	47
Orphanages	283	402	90	775
Religious institution	461	1740	1056	3257
<b>Total</b>	<b>2593</b>	<b>7122</b>	<b>4464</b>	<b>14179</b>

# Annexure II .....

## QUESTIONNAIRE

Serial No.

All information collected in this survey will be treated as strictly confidential. Individual information will not be released.

### Current Situation of Institutionalized Children in Sri Lanka .....

<b>Identification Particulars</b>		
District .....		<input type="text"/> <input type="text"/> <input type="text"/>
DS Division .....		<input type="text"/> <input type="text"/> <input type="text"/>
GN Division .....		
Village/ Town .....		
Name of the Home/ Institution .....		
Address of Home/ institutions .....		
Telephone number .....		
Email address/website .....		
Date of interview	Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Month <input type="text"/> <input type="text"/>	
Name of the interviewer .....		
Name of the processor .....		

<b>Interviewer's Visits</b>				
Visit	1 <sup>st</sup>	2 <sup>nd</sup>	3 <sup>rd</sup>	Final Visit
Date .....	.....	.....	.....	Date <input type="text"/> <input type="text"/>
Status of completion	<input type="text"/>	<input type="text"/>	<input type="text"/>	Month <input type="text"/> <input type="text"/> Year <input type="text"/> <input type="text"/>
				Int. No. <input type="text"/> <input type="text"/>
				Final Result <input type="text"/>
<b>Codes for "result"</b>				
Completed ..... 1			Refused ..... 4	
Not at home ..... 2			Partly completed ..... 5	
Postponed ..... 3			Other (Specify) ..... 6	
<b>Supervisor</b>	<b>Field Editor</b>		<b>Office Editor</b>	<b>Keyed by</b>
Name: .....	Name: .....		<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
Date: ..... <input type="text"/> <input type="text"/>	Date: ..... <input type="text"/> <input type="text"/>			

<b>1. Information on Child Care Centre/ Institution/ Home</b>			<b>For office use only</b>
1	Name of the Organization Managing the institution		
2	Name of the Manager of the institution and the contact number		
3	Date of commencement of the institution	Month ..... Year.....	
4	Commenced by	1. Government / Commission <input type="checkbox"/> 2. NGO <input type="checkbox"/> 3. Private <input type="checkbox"/> 4. Individual <input type="checkbox"/> 5. Other (specify)..... <input type="checkbox"/>	
<b>2. Respondent's details Information on the Home Manager of child care center / Care giver</b>			
5	Name of the respondent		
6	Designation		
7	Age		
8	Sex	Male <input type="checkbox"/> Female <input type="checkbox"/>	
9	Marital Status	1. Unmarried <input type="checkbox"/> 2. Married <input type="checkbox"/> 3. Divorced <input type="checkbox"/> 4. Separated <input type="checkbox"/> 5. Widow/ widower <input type="checkbox"/>	
10	Ethnicity	1. Sinhalese <input type="checkbox"/> 2. Tamil <input type="checkbox"/> 3. Sri Lankan Moor <input type="checkbox"/> 4. Other (Specify) .....	
11	Educational level	1. Primary (Grades 1 - 5) <input type="checkbox"/> 2. Secondary (Grades 6-9) <input type="checkbox"/> 3. O/L & A/L <input type="checkbox"/> 4. Degree and above <input type="checkbox"/> 5. Other ( Specify) .....	
12	How long have you worked in this institution	..... Years	

3. Type Of Institution		
13	Is it an institution for male or female or mixed (gender)	1. Male 2. Female 3. Mixed
14	Type of Centre/ Home/Institution	1. Government/probation & child care : <b>Non paying / paying</b> 2. Private : <b>Non paying / paying</b> 3. INGOs : <b>Non paying / paying</b> 4. NGOs : <b>Non paying / paying</b> 5. Voluntary : <b>Non paying / paying</b> 6. Boarding houses : <b>Non paying / paying</b> 7. Orphanages : <b>Non paying / paying</b> 8. Religious institution : <b>Non paying / paying</b> 9. Other (Specify) ..... <b>Non paying / paying</b>
15	If government, specify	1. Remand Homes 2. Certified School 3. Safe house 4. Receiving homes 5. Detention homes 6. National Training and counseling centers for children 7. Approved school 8. Voluntary childrens' institutions 9. Others specify .....
16	If religious institution, specify	1. Pirivenas of the Buddhists 2. Araneripadasalais of the Hindus 3. Madrasa of the followers of Islam 4. Seminaries of the Catholics and Christians 5. Other .....
17	If NGO, specify	1. Remand home 2. Unmarried mothers home 3. Safe house 4. Approved school 5. Voluntary children's institute 6. Other .....



4. Source of Funding																								
18	Source of funding (multiple response)	1. Private donations (within Sri Lanka) <input type="checkbox"/> 2. Private donations from abroad <input type="checkbox"/> 3. Sustained by faith groups <input type="checkbox"/> 4. Government funds <input type="checkbox"/> 5. Individual fund <input type="checkbox"/> 6. Other (Specify) .....																						
19	Is funding full or partial	1. Full 2. Partial if partial, state name of the sources .....																						
2. Respondent's details Information on the Home Manager of child care center / Care giver																								
20	Is the Home Registered?	Yes <input type="checkbox"/> No <input type="checkbox"/> <i>if no, go to question no 25</i>																						
21	If yes, registered under	1. Orphanage ordinance 2. Provincial statutory 3. Act/ordinance (social services act/, Parliment act) 4. Other(specify).....																						
22	If yes, Year of Registration	Year .....																						
23	Year of last renewal	Year ..... Month .....																						
24	If NGO, registered under	1. National 2. District 3. Divisional 4. Other (specify) .....																						
25	If No, Status of the registration process:	1. No action <input type="checkbox"/> 2. Document under preparation <input type="checkbox"/> 3. Document submitted, waiting for approval <input type="checkbox"/> 4. Other (Specify) .....																						
2. Respondent's details Information on the Home Manager of child care center / Care giver																								
26	Total number of children currently resident (Including Orphans)	<table border="1"> <thead> <tr> <th>1. Male</th> <th>2. Female</th> <th>3. Total</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>	1. Male	2. Female	3. Total																			
1. Male	2. Female	3. Total																						
27	Currently Resident Children by sex and age groups:	<table border="1"> <thead> <tr> <th>Age Group ⇒</th> <th>1) 0-2 yrs</th> <th>2) 2-5 yrs</th> <th>3) 5-10 yrs</th> <th>4) 10-14 yrs</th> <th>5) 14-18 yrs</th> <th>6) 18+ yrs</th> </tr> </thead> <tbody> <tr> <td>Male</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Female</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Age Group ⇒	1) 0-2 yrs	2) 2-5 yrs	3) 5-10 yrs	4) 10-14 yrs	5) 14-18 yrs	6) 18+ yrs	Male							Female							
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Male																								
Female																								

28	Currently Resident By ethnicity	No.	Ethnicity	#	No.	Religion	#
		1.	Sinhala		1.	Buddhist	
		2.	Tamil		2.	Hindu	
		3.	Muslim		3.	Islam	
		4.			4.	Christian	
		5.			5.	Roman Catholic	
29	Duration of stay of children in the institution	No.	Duration	Number of Children			
				Male	Female		
		1	less than 2 years				
		2	2 to 5 years				
		3	5-10 years				
		4	10 – 15 years				
30	Children with parents:	1. No parents <i>if no, go to question # 30</i>	1. With one parent	1. With both parents			
31	If both parents are available reasons for institutionalization <i>(multiple responses)</i>	No.	Reasons	Number of Children			
				Male	Female		
		1	Education				
		2	No one to care				
		3	low income				
		4	Working parents				
		5	Parent living abroad				
		6	Domestic violence				
		7	disfunctional family				
		8	Law/ court orders				
		9	dissability/ illness				
10	Other(specify) .....						
11							
32	If no parents,	No.	Details	Number of Children			
				Male	Female		
		1	Children under guardian				
		2	No guardian				
3	Other (Specify) .....						
33	if yes, is the guardian	1. Grand Parents 2. Old sibling 3. Aunt/Uncle 4. Other relatives 5. Friend of the parents 6. Representative of the Social organization 7. Well wisher 8. Other (specify).....					

34	Number of orphans by Sex and Age	Age Group ⇨	1)	2)	3)	4)	5)	6)	
			0-2 yrs	2-5 yrs	5-10 yrs	10-14 yrs	14-18 yrs	18+ yrs	
		Male							
	Female								

## 2. Respondent's details Information on the Home Manager of child care center / Care giver

35	Do all the children have birth certificate?	No.	Birth Certificate	Number of Children	
				Male	Female
		1	children with birth certificate		
		2	children without birth certificate		
36	If no, how did you get school admission				
37	Is there a daily roll call document to verify the presence of children available	1. Yes <input type="checkbox"/>		2. No <input type="checkbox"/>	
38	Is the admission of children based on ethnicity/religion?	1. Yes <input type="checkbox"/>		2. No <input type="checkbox"/>	
39	Reason for getting admission (Multiple response)	No.	Details	Number of Children	
				Male	Female
		1	Economic difficulties		
		2	Disfunctional families		
		3	Abuse		
		4	Abandon		
		5	Temporary inability of parent to cope		
		6	Parent migrating		
		7	Law/court orders		
		8	Educatuion		
		9	Protection <i>Specify : domestic violence / disobedience / Neglect</i>		
		10	Need for special care		
		11	Conflict in the country		
		12	Natural disaster		
13	Other (specify) .....				

40	If court order (specify)	1. Rape 2. Abuse 3. Child offendtens 4. Eloping 5. Child Labour 6. Abandoned 7. Other (specify).....	
41	Register of admission available & accessible	1. Yes <input type="checkbox"/>	2. No <input type="checkbox"/>
42	Care plan for each child available & accessible	1. Yes <input type="checkbox"/>	2. No <input type="checkbox"/>
43	If yes whether updated	1. Yes <input type="checkbox"/>	2. No <input type="checkbox"/>
44	If yes, how often were they updated	1. Once a 3 month 2. Once a 6 month 3. Onace a year 4. other (specify).....	
45	Do you maintain personal file for each child	1. Yes <input type="checkbox"/>	2. No <input type="checkbox"/>

### 8. Use of common Language

46	What is the common language used in school	1. Sinhala 2. Tamil 3. English 4. Other .....	
47	What is the common language used in this institution	1. Sinhala 2. Tamil 3. English 4. Other .....	

### 9. Details of employees (Administrative and others) attached to the institutions

47	Total number of staff employed	No.	by sex	Number of Staff
		1	Male	
		2	Female	
		3	Total	
48	Number of children per employee			
49	Name the designation of the officers in the institution <i>Example : manager/principal/ care giver</i>	Job Title		Number of Staff

50	State educational qualification of the staff employed	Job Title			Education Qualification	Professional Qualification
		1.				
		2.				
		3.				
		4.				
		5.				
51	Professional qualifications of staff	No.	Details			Number of Staff
		1	Trained			
		2	un trained			
		3	Total			
52	If trained specify the number of qualified in each category <i>1.Child care</i> <i>2.Child rights</i> <i>3.Reproductive health</i> <i>4.Administration and management</i> <i>5.Counseling</i> <i>6.First aid</i> <i>7.Other</i> .....	Course Title	Workshop/ Training	Diploma	Degree	# of Staff in the institute
53	Are separate accommodation available to all the employees	1. Yes <input type="checkbox"/>				2. No <input type="checkbox"/>
		If yes specify .....				
		If no specify .....				
54	Are Account / inventory books available & accessible?	1. Yes <input type="checkbox"/>				2. No <input type="checkbox"/>
55	If yes whether updated	1. Yes <input type="checkbox"/>				2. No <input type="checkbox"/>
56	If yes, how often are they updated	1. Once a 3 month				
		2. Once a 6 month				
		3. Once a year				
		4. other (specify).....				
<b>10. Residential Facilities available to the Institutionalized Children (Verify by inspection)</b>						
57	Total floor space of the institution					
58	Sleeping space per Child	1. less than 36 sqft				
		2. 36 sqft or more				
		3. Other (specify) .....				
59	Are Beds available for each child?	1. Yes <input type="checkbox"/>				2. No <input type="checkbox"/>
60	Type of bed	1. Single bed				
		2. Bunk				
		3. other .....				

61	Number of toilets/ lavatory available	...../ .....	
62	Number of children sharing the same toilet	1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/>	
63	Are they available separate toilets for male and female	1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/>	
64	Are they available separate toilets for staff	1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/>	
65	Type of toilets available	1. Pit <input type="checkbox"/> 2. Water seal <input type="checkbox"/> 3. Water seal (Commode) <input type="checkbox"/> 4. Other .....	
66	Access to water in the toilet	1. Running water available in the toilet 2. Carry water in a bucket 3. other .....	
67	Type of washing facility	1. Bathroom/shower cubicle with running water 2. Bathroom/shower cubicle without running water 3. Outside well within the premises with/without enclosed area 4. Outside well outside the premises with/without enclosed area 5. Nearby river/stream	
68	Are separate areas for washing clothes ?	1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/>	
69	Source of water available	1. Tap water 2. Well (inside premise) 3. Well (outside) 4. River water 5. Others .....	
70	Availability of electricity	Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes <input type="checkbox"/>	
71	If no electricity source of energy for lighting	1. Kerosen 2. Diesel/ petrol (Generator) 3. Kerosene/petrol Lamps 4. Other .....	
72	Availability of telephone services	1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/>	
73	Availability of safety measures	1. Fire extinguisher 2. Smoke allam 3. Fire allam 4. Fire exit door 5. First aid box 6. Other	

<b>11. Basic Needs (Verify By Inspection)</b>			
74	food: Is there a menu list available (quality & quantity)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
75	Are Instructions available for preparation of balanced & nourishing meals (according to age)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
76	Clothing and linen : Are Sheets & towels available for each child ?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
77	Are Cloths & school uniforms available for each child ?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
78	Are cupboards for personal belongings available to the children?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
79	Are there special facilities available for under 5 years children (like milk room)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
80	If yes, give details of the facilities	1..... 2..... 3..... 4.....	
<b>12. Availability Of Infrastructure</b>			
81	Are Library with news papers available?	Yes <input type="checkbox"/>	No <input type="checkbox"/> Inadequate <input type="checkbox"/>
82	Are there reading/ study rooms available?	Yes <input type="checkbox"/>	No <input type="checkbox"/> Inadequate <input type="checkbox"/>
83	Are computer facilities available?	Yes <input type="checkbox"/>	No <input type="checkbox"/> Insufficient <input type="checkbox"/>
84	Is there access to internet facilities?	Yes <input type="checkbox"/>	No <input type="checkbox"/> Insufficient <input type="checkbox"/>
85	Are there Recreational material available?	Yes <input type="checkbox"/>	No <input type="checkbox"/> Insufficient <input type="checkbox"/>
86	Are there playground or sport facilities available?	Yes <input type="checkbox"/>	No <input type="checkbox"/> Insufficient <input type="checkbox"/>
87	Are outdoor or indoor game materials available?	Yes <input type="checkbox"/>	No <input type="checkbox"/> Insufficient <input type="checkbox"/>

13. Health care/ nutrition																																	
88	Have the children been given the compulsory vaccination?	Yes <input type="checkbox"/> No <input type="checkbox"/>																															
89	What common illnesses did the children have during the last year	.....																															
90	Do doctors visit the children regularly?	1. once per week 2. once per month 3. once in three months 4. once in six months 5. once a year 6. Never 7. other specify.....																															
91	Does every child have health record (including under 5 year children)	Yes <input type="checkbox"/> No <input type="checkbox"/>																															
92	Has any child been hospitalized / warded during the last one year?	Yes <input type="checkbox"/> No <input type="checkbox"/>																															
93	If yes, how many of the children were hospitalized ?	Male..... Female.....																															
94	If yes, what kind of diseases	.....																															
95	If yes, admitted to	1. Government hospital 2. Private 3. Indiginous 4. Other																															
96	Do you provide first aid before taking the child to hospital	Yes <input type="checkbox"/> No <input type="checkbox"/>																															
97	Are the nutrition levels of the children monitored?	Yes <input type="checkbox"/> No <input type="checkbox"/>																															
98	Who monitors the nutritional levels?	1. Food specialist 2. Family health worker 3. Doctor/ MOH 4. Others (specify).....																															
14. Children with Special Needs																																	
99	Are there children with special needs?	Yes <input type="checkbox"/> No <input type="checkbox"/>																															
100	If yes, Categories the children with special needs	<table border="1"> <thead> <tr> <th rowspan="2"></th> <th rowspan="2">Categories</th> <th colspan="2">Numbers</th> </tr> <tr> <th>Male</th> <th>Female</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>Disability</td> <td></td> <td></td> </tr> <tr> <td>2</td> <td>Psychological Disorder</td> <td></td> <td></td> </tr> <tr> <td>3</td> <td>Disease / illnesses</td> <td></td> <td></td> </tr> <tr> <td>4</td> <td>Juvenile delinquency</td> <td></td> <td></td> </tr> <tr> <td>5</td> <td>Mentally deformed</td> <td></td> <td></td> </tr> <tr> <td>6</td> <td>Other specify</td> <td></td> <td></td> </tr> </tbody> </table>		Categories	Numbers		Male	Female	1	Disability			2	Psychological Disorder			3	Disease / illnesses			4	Juvenile delinquency			5	Mentally deformed			6	Other specify			
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101	If Yes, has the condition been certified?	Yes <input type="checkbox"/> No <input type="checkbox"/>																															
102	If yes, by whom	1. Doctor 2. .... 3. ....																															
103	What kind of disability do children with special needs have ( Multiple response)	<table border="1"> <thead> <tr> <th rowspan="2">No.</th> <th rowspan="2">Disability</th> <th colspan="2">Number of affected Children</th> </tr> <tr> <th>Male</th> <th>Female</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>Physical</td> <td></td> <td></td> </tr> <tr> <td>2</td> <td>Learning (Mental)</td> <td></td> <td></td> </tr> <tr> <td>3</td> <td>Visual impairment</td> <td></td> <td></td> </tr> <tr> <td>4</td> <td>Mental Health</td> <td></td> <td></td> </tr> <tr> <td>5</td> <td>Hearing/ language impairment</td> <td></td> <td></td> </tr> <tr> <td>6</td> <td>Other specify .....</td> <td></td> <td></td> </tr> </tbody> </table>	No.	Disability	Number of affected Children		Male	Female	1	Physical			2	Learning (Mental)			3	Visual impairment			4	Mental Health			5	Hearing/ language impairment			6	Other specify .....			
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104	Degree of disability? <i>Categorize on the basis of children's ability to meet their own need</i>	<table border="1"> <thead> <tr> <th rowspan="2">No.</th> <th rowspan="2">Degree of Disability</th> <th colspan="2">Number of affected Children</th> </tr> <tr> <th>Male</th> <th>Female</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>able to meet all needs</td> <td></td> <td></td> </tr> <tr> <td>2</td> <td>able to meet part of the needs</td> <td></td> <td></td> </tr> <tr> <td>3</td> <td>cannot meet any need</td> <td></td> <td></td> </tr> <tr> <td>4</td> <td>Other specify</td> <td></td> <td></td> </tr> </tbody> </table>	No.	Degree of Disability	Number of affected Children		Male	Female	1	able to meet all needs			2	able to meet part of the needs			3	cannot meet any need			4	Other specify											
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105	What kind of facilities are available for the disabled (Multiple response)	1. Teaching in Braille 2. Wheel chairs facilities 3. Special toilets and baths 4. Other specify .....																															
106	Are those children regularly monitored by a specialist?	Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes <input type="checkbox"/>																															
107	If yes how often?	1. Monthly 2. Once a three month 3. Once a six month 4. Other (specify) .....																															
<b>15. Educational levels of the children (Home)</b>																																	
108	Do all the children regularly attending school at present?	Yes <input type="checkbox"/> No <input type="checkbox"/>																															

109	If unable to attend or is irregular the reasons are	<table border="1"> <thead> <tr> <th rowspan="2">No.</th> <th rowspan="2">Causes</th> <th colspan="2">Number of Children</th> </tr> <tr> <th>Male</th> <th>Female</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>Long distance to school</td> <td></td> <td></td> </tr> <tr> <td>2</td> <td>Personal problem (specify) .....</td> <td></td> <td></td> </tr> <tr> <td>3</td> <td>Learning difficulties</td> <td></td> <td></td> </tr> <tr> <td>4</td> <td>Illness/ disability</td> <td></td> <td></td> </tr> <tr> <td>5</td> <td>Has never attended school</td> <td></td> <td></td> </tr> <tr> <td>6</td> <td>Other .....</td> <td></td> <td></td> </tr> </tbody> </table>	No.	Causes	Number of Children		Male	Female	1	Long distance to school			2	Personal problem (specify) .....			3	Learning difficulties			4	Illness/ disability			5	Has never attended school			6	Other .....			
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110	What action is taken on those not attending school /irregularly attending school?	1..... 2..... 3.....																															
111	Do you provide additional facilities to improve learning and if yes what?	1. Tuition classes outside home 2. Teacher within the institution 3. Internet courses 4. Others/ specify.....																															
112	Level of schooling	<table border="1"> <thead> <tr> <th>No.</th> <th>Level</th> <th>No. of Children</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>Pre-school</td> <td></td> </tr> <tr> <td>2</td> <td>Primary</td> <td></td> </tr> <tr> <td>3</td> <td>Secondary</td> <td></td> </tr> <tr> <td>4</td> <td>Tertiary</td> <td></td> </tr> <tr> <td>5</td> <td>No schooling</td> <td></td> </tr> </tbody> </table>	No.	Level	No. of Children	1	Pre-school		2	Primary		3	Secondary		4	Tertiary		5	No schooling														
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<b>16. provision of additional facilities to children</b>																																	
114	Is there a time table for daily activities, including reading & play?	Yes <input type="checkbox"/> No <input type="checkbox"/>																															
115	Are children formally involved in the planning of their activities?	Yes <input type="checkbox"/> No <input type="checkbox"/>																															

116	Are there facilities available for children of different religions to practice their faith	Yes <input type="checkbox"/> No <input type="checkbox"/>	
117	Are there any rehabilitation programme available for implementation before reunification with parents/society	Yes <input type="checkbox"/> No <input type="checkbox"/>	
118	Are there any awareness programme on reproductive health	Yes <input type="checkbox"/> No <input type="checkbox"/>	
119	If yes, for which age and specify action	Age..... ..... Activities .....	
120	How many new children were admitted during the last two weeks		
121	If admitted, from where did they come ?	1. Other child care institution 2. Home 3. Other .....	

**17. Relationship between children & parents / guardian when resident at Child Care Institution**

122	How frequently are the children visited by parents/guardians/ relatives ( <i>skip this question when they don't have parent or orphans</i> )	1. Monthly 2. Once a year 3. Never							
123	How often are the children allowed to spend a full day with family?	1. Monthly 2. Vacation 3. Depends on Children & need for their parents 4. Other (specify) .....							
124	Have legal guardians been appointed to those children without parental care?	Yes <input type="checkbox"/> No <input type="checkbox"/>							
125	if yes, how many have legal guardians ( <i>specify number of children</i> )	<table border="1"> <tr> <td>1</td> <td>Male</td> <td></td> </tr> <tr> <td>2</td> <td>Female</td> <td></td> </tr> </table>	1	Male		2	Female		
1	Male								
2	Female								
126	Is there a plan for the reunification of each child with the family? <i>see Q 118</i>	Yes <input type="checkbox"/> No <input type="checkbox"/>							
127	if yes, at what age will the children be reunified	1. before reaching 18 years of age 2. after reaching 18 years of age 3. Other .....							
128	Do you have the plan for them when they leave the institution if so what action is taken	1..... 2..... 3..... 4.....							
129	if no, any plan to care above 18 years old children								

130	Have orphans been placed for adoption or any other alternatives?	Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes <input type="checkbox"/>										
131	if yes, how many children have been given for adoption to date	<table border="1"> <thead> <tr> <th>No.</th> <th>by</th> <th>Number</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>Local People</td> <td></td> </tr> <tr> <td>2</td> <td>Foreigner</td> <td></td> </tr> </tbody> </table>	No.	by	Number	1	Local People		2	Foreigner		
No.	by	Number										
1	Local People											
2	Foreigner											

**18. Administrative and legal basis of child care center (home)**

132	Are children legally assisted	Yes <input type="checkbox"/> No <input type="checkbox"/>	
133	Do you have Administrative committee meetings regularly?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
134	If yes specify	1. Once a month 2. Once in three month 3. Once in six month 4. Other specify.....	
135	Are minutes of the meeting available?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
136	In what activities of the institutions do you encourage/allow children's participation? (Multiple response)	1. Cleaning of rooms 2. Cooking 3. Collecting water 4. Collecting firewood 5. Taking care of younger children 6. Other .....	

137. State briefly the challenges that you encounter when managing your institution

.....  
 .....

138. In your opinion what are the drawbacks of the existing situation in the institution

.....  
 .....

139.State briefly your opinion on how child care institutions may be improved in the future .....

.....  
 .....

140. Note: enter any special activities that you observed during your visit(example : cleaning/ cooking/ scrapping coconut /making tea)as well as your impression of the institutions

.....  
 .....

# Annexure III

---

## FIELD WORK TEAM

### Field Work Coordinators

---

- Mrs. Shamini Attanayaka
- Mr. M. Vijenthiran
- Mr. K. P. U. Keerthi Jayawardena
- Mr. H. M. Saman Bandu Herath
- Mrs. P. P. G. Chamila Siriwardena
- Mrs. H. K. Sandya Sirikumara
- Ms. Aloka Manamudali

### Field Supervisors

---

- Dr. Riddley Jayasinghe (Director General)
- Prof. K. A. P. Siddhisena (Consultant)
- Mr. M. U. Peiries (Additional Director General)
- Mr. K. M. Y. Karunarathna (Director School of Social Work)
- Mr. Karunarathna Gamage (Director Training)
- Mrs. Shamini Attanayaka (Director Social development, Policy, Research and Publications Division)
- Mrs. V. Vasudevan
- Mr. V. Jeyaruban
- Mr. U. L. M. Ashker
- Mr. S. Hariharathamotharan
- Mr. M. Vijenthiran
- Mr. K. P. U. Keerthi Jayawardena
- Mr. H. M. Saman Bandu Herath
- Mrs. P. P. G. Chamila Siriwardena
- Mrs. H. K. Sandya Sirikumara
- Ms. Aloka Manamudali
- Mr. Irone Jayasekara

## LIST OF ENUMERATORS

S/n	Province	District	Name of the Enumerator
1	Northwestern	Kurunegala	Ms. Malki Suraweera Ms. M. D. P. PushpaKumari Mr. P. H. S. Walikumbura
		Puttlam	Mr. M. A. T. B. Hearth Ms. Pradeepa Kumari
2	Northern	Jaffna	Ms. Tharshani Thevaraja Mr. Mahadevan Ms. Sivajini
		Vavniya	Mr. I. Jeewakumar Mr. S. Kokilavathanan
		Kilinochchi	Mr. Arul Raj
3	Eastern	Ampara	Mr. Ijas Mohamed
		Batticaloa	Mr. A.H. Hasfer Mr. M. I. M. Riyas Mr. A. M. Usanar
		Trincomalee	Mr. U. M. Fais
		Mannar	Mr. M. I. M. Imthiyas
4	North Central	Anuradapura	Ms. Nadeeka Mr. Susil Ariyadasa Ms. Ganga Damayanthi
		Polonnaruwa	Mr. Ranathunga
5	Sothern	Mathara	Ms. Wasundara Premathilaka
		Hambantota	Mr. Abegunawardana
		Galle	Ms. Thanuja Ms. Rasangikia Premathilaka Ms. Niranga Liyanarachchi
6	Central	Kandy	Mr. Hemantha Dissanyaka Mr. W. Athurupana
		Matale	Ms. Samantha Senadeera
		NuwaraEliya	Ms. Sailaja
7	Uva	Badulla	Mr. Nuwan Dharmasiri
		Monaragala	Mr. Chamath Jeewan
8	Western	Colombo	Mr. Nihal Gunasena Ms. Swarna Dayakanthi Ms. Lakmini Jayabandu Ms. Menaka Prasadi
		Gampaha	Ms. Lakmali Thennakoon Mr. Liyanarachchi Mr. T. A. J. C. Thennakoon Ms. Ranmali Jayasinghe Mr. K. S. P. Kumara
		Kalutara	Ms. Nirmani Kottage Ms. Dishani Rupasinghe Ms. P. T. N. Perera Mr. Ajith Premalal Mr. Piyal Kumarasiri
9	Sabaragamuwa	Ratnapura	Ms. Dilrukshi Mr. G. V. D. W. H. Withanage S. A. S. H. Thilakarathna Mr. Ajith Kumara
			Ms. Rasanjali Karunarathna





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