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# TRAINING HOUSE PARENTS OF THE GOVERNMENT RUN CHILDREN HOME: EXPERIENCE OF TRAINING HOUSE PARENTS IN THE STATE OF KARNATAKA

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#### **INTRODUCTION:**

India is home to almost 19% of the world's children. More than one third of the country's population, around 440 million, are below 18 years <sup>[1]</sup>. Child Protection' is about protecting children from and against any perceived or real danger to life, to freedom and to their rights, risk to their life, their personhood and childhood'. It is estimated that around 170 million - 40 % of India's children are vulnerable and living in difficult circumstances <sup>[2]</sup>, needing care and protection'. Children have been provided shelter in the government's children home (institutional care), as part of respite and some time long term care as part of rehabilitation. Protection is thus not only about reducing their vulnerability to any kind of harm and protecting them from the harmful situations, it is also about ensuring that no child falls out of the social security and safety net and fails to receive the necessary care, protection and support <sup>[3]</sup> as a matter of right.

No longer are children considered as the future citizens of the country, in fact they are the present citizens, hence their rights and needs should be respected. In addition to providing a safe environment for children living in difficult circumstances, it is imperative that every child in general must remain protected and secure and experience dignified living. Child protection is inherently linked to every other right that a child enjoys. Failure to ensure the rights of a child to protection has an adverse effect on all the other rights of the child [4]. The Government of India, while amending the Juvenile Justice Act (Care and Protection) of 2000 in the 2006 and

2010, and in new act in 2015 has provided mandate for the ministry to ensure care and protection to children by introducing the Integrated Child Protection Scheme (ICPS).

Institutional care for children can be regarded as a form of an alternative care that is provided in an organised manner, while keeping in mind the best interests and protection of the child. It is therefore imperative that this alternative care should respond to the physical, psychological, emotional, social, moral, ethical and spiritual needs of children in an age appropriate manner. Tolfree<sup>[5]</sup> defined institutional care for children as "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 is very different to the one that is parental. Often children express their problems through their behaviours, which is perceived as problem behaviour, children express their feelings for their survival, protection, and general development. Rather than labelling child as 'problem child', there is a need for understand the 'child in the situation', behaviour need to be understood, help the child in experiencing the sense of safety and security. If through the process of providing care, a child is able to open up and share, the process becomes an effective way of addressing the psychosocial and emotional issues faced by children in difficult circumstances. Mediums of psychosocial care can be utilised as a tool for intervention and as a method of practice during the capacity building training programmes.

There is an urgent need for the involvement of helping professionals in service delivery respecting the rights of children and paying way for the children to experience dignified living. The young professionals coming out from the universities seeking their carrier in helping profession need to be mentored and build their capacities in filling the gap between theory and practice <sup>[6, 7]</sup>. The ICPS programme<sup>1</sup> has opened up jobs for the young

The Integrated Child Protection Scheme is expected to significantly contribute to the realization of Government/State responsibility for creating a system that will efficiently and effectively protect children based on cardinal principles of "protection of child rights" and "best interest of the child". Hence, the ICPS objectives are: to contribute to the improvements in the wellbeing of children in difficult circumstances, as well as to the reduction of vulnerabilities to situations and actions that lead to abuse, neglect, exploitation, abandonment and separation of children. These will be achieved by: (i) improved access to and quality of child protection services; (ii) raised public awareness about the reality of child rights, situation and protection in India; (iii) clearly articulated responsibilities and enforced accountability for child protection (iv) established and functioning structures at all government levels for delivery of statutory and support services to children in difficult circumstances; (v) introduced and operational evidence based monitoring and evaluation.

<sup>&</sup>lt;sup>1</sup> Integrated Child Protection Scheme in Brief:

professionals to start their carrier helping children in difficult circumstances to find a secured and protected environment for experiencing their basic right of survival.

#### **METHOD AND MATERIALS**

Government of Karnataka has been pioneering in implementing ICPS programme, the Department of Women and Child Development (DWCD) has appointed 560 field functionaries like protection officers-institutional and non-institutional, counsellors, social workers, outreach workers, house parents for implementing the ICPS programme. The Karnataka State Integrated Child Protection Society (KSICPS) in the recruitment process, understood the felt needs of counseloors, house parents, social workers and outreach workers, appointed in the district headquarters, for enhancing the quality care for children in difficult circumstances so that they can implement uniform psychosocial care activities for children in difficult circumstances.

Enhancement of capacities of all functionaries including, administrators and service providers, at all levels working under the ICPS is one of the objectives of the strategy plan of KSICPS. KSICPS had requested the Department of Psychiatric Social Work (PSW), and Department of Child and Adolescent Psychiatry (CAP) to develop a curriculum for training child protection functionaries. The curriculum main focus was to enhance the helping skills and initiate psychosocial care for children in their respective districts. The Department of PSW and CAP in collaboration with KSICPS of the DWCD Department, GoK, organized capacity building activities through 14 training programmes for the various child protection personnel. The present paper describes the process involved in developing the curriculum for training the house parents and the process involved in field testing the training programme and modifying it based on the feedback received from the trainees.

#### PROCESS INVOLVED IN DEVELOPING CURRICULUM:

The aim of the present paper is to develop a curriculum focusing on building the capacities of personnel working with the child protection unit. The team comprised of four faculty members from the Department PSW, and one faculty member from the Department of CAP, and a Doctoral student from the Department of PSW having 3 decades of experience working with children. These faculty members have also been involved in training pre doctoral and doctoral students and have conducted several capacity building workshops.

The team felt that that the central task of the trainer is to support the trainees learning which Lynton and Pareek [8] describes it has "learning takes place within the individual as a result of a co-influence of diverse,

intertwining and occasionally opposing influences ... the function of the trainer is to entice this mysterious process to develop within the participants...."

The team reviewed the curriculums of the training programmes conducted by the Department of Women and Child development, MSW specialization paper on family and child welfare (MSW Syllabus of University of Pune, Thiruvalluvar University, Dibrugarh University, University of Calcutta) and three international syllabus (Website: http://www.unbc.ca/social-work, school of social work, university of Michigan, Berkeley Social Welfare syllabus UC Berkeley School of Social Welfare) on the family and child welfare paper. The team also had discussions with the KSICPS state functionaries to understand the need for training the child protection personnel.

It was decided that the main aim would be to recognise already existing skills among the house parents, this curriculum would be used as a means to hone there already existing skills and upgrade knowledge. The training should be able to provide opportunities for learning and implementation regarding process and practice of providing community based psychosocial care while working with children in difficult circumstances. The team had four meetings to discuss the curriculum including the methodologies to be followed for each session. The draft curriculum was shared with the KSICPS team. Post this meeting a few suggestions were presented to the team designing the curriculum. These suggestions included areas related to legislations, functioning of ICPS, roles and responsibilities of child protection personnel. A consensus was reached and it was decided to field test the draft curriculum designed for training in capacity building for the house parents, counsellors, social workers/outreach workers, child protection officers, and probationary officers. Feedbacks from the participants were taken with regard to the content and the methodology adopted. Based on the feedback, areas of field observation and timing of the session were changed to improvise the curriculum.

The present paper captures the capacity building training programme aimed at building the skills of house parents who were suppose to help the counsellors in developing Individual Care Plan for children in difficult circumstances. The 90 house parents were appointed and their profile been given in the below table. We also have analysed the feedback given by the participants while field testing the draft curriculum.

#### **RESULTS**

Table 1: Describe the socio demographic details of the hose parents attending the training programme

| Sl No | Particulars                | Frequency | Percentage |
|-------|----------------------------|-----------|------------|
| 1     | Age of the House parent    |           |            |
|       | 23- 30 years               | 66        | 82.2%      |
|       | 30 years and above         | 14        | 17.8%      |
| 2     | Sex of the hose parent     |           |            |
|       | Male                       | 25        | 58.8%      |
|       | Female                     | 55        | 68.8%      |
| 3     | Educational qualification  |           |            |
|       | Degree                     | 80        | 100 %      |
| 4     | Past experience of working |           |            |
|       | Present                    | 80        | 100 %      |

The above table indicates that nearly 82.2% of participants were aged below 30 years and 68.8% of the participants were females for the post of House parents. All the house parents had completed their degree. Less house parents (80.2%) had past experience of working with children but had work experiences in industry and some in development sector.

Table 2: Describes the broad areas of training programme for the hose parents

| Day 1 | Understanding psychosocial needs of children in difficult circumstances and |  |
|-------|---|--|
|       | initiating play activities with the children                                |  |
| Day 2 | Importance of group interventions and understanding ICPS in understanding   |  |
|       | and addressing the Bio-psychosocial needs of children in difficult          |  |
|       | circumstances   |  |

The training programme been designed for 2 days covering the broad areas as given in the below table and the session used participatory methodology with more scope for participation from the trainees aiming at fine tuning the already existing caregiving skills. The training also demonstrated some of the mediums of psychosocial care and group activities which can be used as a means for communication and building rapport from the child. The trainees were asked to write down the reflection dairy at the end of the day, where in the trainees were asked to record their reflections of the day, their personal learning and their confusions so that same can be discussed on the next day before starting the session.

Table 3: Describes the details of the Topics covered with the methodology used and content of each session

| Training topics               | Methodology         | Description   |  |  |  |
|-------------------------------|---------------------|---|--|--|--|
| Day One                       |                     |   |  |  |  |
| Status of children in India   | Interactive lecture | Statistics about status of children in India -rationale for |  |  |  |
|                               | method              | child protection  |  |  |  |
| Concept of child              | Interactive lecture | Process of normal child development, Areas of child         |  |  |  |
| Development                   | method, Group       | development, theories of child development,                 |  |  |  |
|                               | discussion          | understanding developmental needs of children               |  |  |  |
| Psycho social needs and       | Brain storming,     | Understanding psycho social needs of children in difficult  |  |  |  |
| issues of children            | Group Discussion    | circumstances during developmental stages- Infancy,         |  |  |  |
|                               |                     | early childhood, childhood, adolescence. Difficulties in    |  |  |  |
|                               |                     | availing needs and process of providing needs               |  |  |  |
| Day 2                         |                     |   |  |  |  |
| Orientation towards           | Interactive lecture | Other legal aspects related to children like, UNCRC,        |  |  |  |
| legislations for children in  | method, case        | POCSO, Child Marriage Act, Child Labor (Prohibition         |  |  |  |
| India- special focus on care  | discussion, Group   | and Regulation) Act 1986, Legal aid services                |  |  |  |
| and protection                | activity.           |   |  |  |  |
| Application of medium of      | Group activity,     | Children in difficult circumstances – types,                |  |  |  |
| Psycho social care in         | lecture method      | Understanding the concept of psycho social care, need for   |  |  |  |
| understanding children in     |                     | psycho social acre, Use of different mediums to work        |  |  |  |
| difficult circumstances       |                     | with children- play, drawing, writing, painting, clay,      |  |  |  |
|                               |                     | family portrait, emotions pictures card, story cards etc    |  |  |  |
| Preventive and promotive      | Lecture method      | Concept of preventive and promotive mental health           |  |  |  |
| mental health activities with | Individual activity | activities – Introduction of concept of Life skills         |  |  |  |
| children in the institutions  | Group Activity      | Need for Life skills activities for children and            |  |  |  |
| and non-institutions          | Brain storming      | adolescents, Structure of Life skill education programme    |  |  |  |
|                               | Story session       | Experiential learning in Life skills education              |  |  |  |
|                               |                     | Methodologies used in imparting Life skill Education        |  |  |  |
|                               |                     | Application of Life skills education to work with children  |  |  |  |
|                               |                     | in difficult circumstances                                  |  |  |  |
|                               |                     |   |  |  |  |

| Day 3                      |                     |  |  |  |  |  |
|----------------------------|---------------------|--|--|--|--|--|
| Group interventions for    | Lecture method      | Concept of group interventions, need for group           |  |  |  |  |
| children in difficult      | Group activity      | interventions with children, principles of group         |  |  |  |  |
| circumstances              | Demonstration of    | interventions, skills for facilitator to carry out group |  |  |  |  |
|                            | group sessions      | interventions, methodologies for group interventions,    |  |  |  |  |
|                            |                     | structure of group session                               |  |  |  |  |
| Approaches to child        | Lecture method      | Understanding concept of child protection,               |  |  |  |  |
| protection                 | Group discussion    | Child protection mechanism in India, protection of       |  |  |  |  |
|                            |                     | children within the institution and in community,        |  |  |  |  |
|                            |                     | working with different stakeholders in child protection, |  |  |  |  |
|                            |                     | use of technology in the process of child protection,    |  |  |  |  |
| Role of ICPS in protection | Group discussion,   | Guidelines from ICPS and institutions.                   |  |  |  |  |
| of children                | interactive lecture |  |  |  |  |  |
|                            | method              |  |  |  |  |  |
| Stress management for the  | Brain storming and  | Recognition of the stress and distress                   |  |  |  |  |
| Staff                      | group discussion    | Stress management techniques                             |  |  |  |  |

Table three describes that the house parents working with children need to have a good knowledge and understanding about child development, normal development, and psychosocial needs of children at different stages of development, which would help them assessment and in understanding children, so that they can initiate psychosocial interventions like life skills education, preventive and promotive mental health services, group interventions. The helping professionals also need to have good insight about their stresses so that they can evolve strategies and deal with their own stresses.

It was observed that there were changes in understanding, in commitment, in statement or in the behaviour due to the reflections and opportunities been provided by the training. The reflection diary provides following sample statements:

Mrs S, said that 'in the training, I was able to understand the need for small activities in the home for building rapport with children, and make child life comfortable'

Mr R said that 'I was not able to understand why children do not cooperate, and always disobey. Understood that due to insecurity feeling, often children feel sad, throw anger outburst and would be isolated.

Ms T said 'often wonder why children won't believe us? Reflected on this question, and understood why should they believe us, we are unknown persons to them, the children have experienced problems in their young age'

Mr X said 'often we get stressed out while being with many children in home, the training has helped me to recognize the stress level, and given us tips to deal with the stress'

#### **DISCUSSION:**

Training and capacity building programme for the staff has increased greatly over the past few decades, mainly because of lack of trained professionals to work in the field and also due to lacuna in the current education system <sup>[6,7]</sup>. More so in the development sector as the lab for training and practicing skills would be the people and in the community <sup>[9,10,11,6,7]</sup>. KSICPS recognized the need for training the newly recruited house parents of Integrated Child Protection Scheme, and approached Department of Psychiatric Social Work and Department of Child and Adolescent Psychiatry for developing the curriculum of counselling training for the counsellors. The Departments are well established and have experiences of conducting such short term training programmes and workshops for the professionals including lay people. <sup>[12]</sup>

The training programme for the house parents not only helped them to understand their skills but also motivated them for quality care in the child care institutions. Training is generally regarded as a subset of Human Resource Development; it can also be understood as a structured learning experience. As defined by Dessler 'training is a process that applies different methods to strengthen employee's knowledge and skill needed to perform their job effectively'. Other researchers have defined training with similar perspectives [14,15,16].

The training programme began by addressing the concerns expressed by the house parents while working with children in the institution of disciplining and difficult in comforting the children. They were named as being 'problem children' The training programme made them to understand that there is no 'problem children', it is the environment which would make the child to learn faulty or deviant behaviours [17,6,7]. A need for strong conviction, commitment and skill in helping children while ensuring that the children experience a normal development was identified as key learning. Similar views were found to be shared in the manual developed by UNICEF [18] on Training Handbook on Psychosocial Counselling for Children in Especially Difficult Circumstances A trainer's Guide. The training programme started with unfolding the misconceptions. The programme was facilitated keeping in mind to develop a strong conviction and belief in understanding the child and support children to experience dignified living [19].

As awareness amongst people has been increasing so has the incidence of neglect of child rights, child abuse been reported in media <sup>[20]</sup>, the bio-psycho-social needs of children especially those living under difficult circumstances are to be attended to the earliest. India despite being a developing country appears to be unequipped to address and provide the required training for professionals. There is an urgent need for disseminating helping skills among the various professionals dealing with the bio-psycho-social needs of children in difficult circumstances. Similar views were found to be shared in the children as active citizen by UNICEF <sup>[21]</sup>.

Children in difficult circumstances need to be provided an institutional care, which involves the integration of accommodation and personal care with house parents to monitor, support the children. Institutionalised setting appears to be mostly a mechanical living arrangement, which creates a weakening of social relationships, to strengthen the relationship, the staff need to take initiatives to build rapport and create child friendly environment so that children won't be threatened and experience secured feeling. Similar views been shared by Varthagowry Vasudevan [22].

The helping professionals need to have good understanding of child development, issues and concerns of children, rights of children, and legislations governing children in order to address problems of children in difficult circumstances <sup>[6,7, 23, 24]</sup>. The professionals working with children should have good knowledge of child development, and developmental stages so that they will be able to understand the changing needs of children at different stages of development. Professionals can facilitate environment for children to experience normal development <sup>[6,7]</sup>. They need to realise the importance of initiating preventive and promotive mental health services using life skills approach and group intervention method while working with children <sup>[25]</sup>. The authors have, thus made an attempt in developing curriculum for addressing the training needs of personnel's working with children, so that they can enhance quality of psychosocial care for children both in institution and in the community. Training is one of tool through which the capacities of the workers can be enhanced; Raju <sup>[26]</sup> while training banking personnel also expressed that training as an effective tool in human resource management.

The curriculum was developed as an influential and powerful agent with an aim at enhancing capability of the house parents in providing quality services. Similar views have been expressed by Hall <sup>[27]</sup>, wherein training was perceived as a powerful agent that brought about organizational expansion, development of capability and performance enhancing the programme. All the training programmes were planned as workshops with more scope for participation from the trainees, aiming at improving their helping skills. The training sessions were able to provide required knowledge and skills to work with children in difficult circumstances. The sessions included

prevention and promotion of mental health through group activity, psycho social needs of children in difficult circumstances, mental health problems among children, group interventions, psychosocial care mediums,; Legal aspects- JJ Act and other legislations related to protection of children; Administrative aspects about ICPS, child protection mechanism, similar contents been seen in the Post-graduation syllabus of social work in their specialization paper on Family and Child welfare of the Universities of Pune, Kolkotta and Bharathiyar.

Training is an important aspect of human resources development, It helps in enhancing and initiating new activities for the welfare of an affected group <sup>[28,29,30]</sup>. In both the private and public sectors, training and capacity building is very critical to the growth and development of the programmes <sup>[31]</sup> and more so for child centred programmes <sup>[6,7]</sup>. For any training to be effective, organization need to examine the extent to which training is closely related to the programme strategy, it should aim at building on the skill, recognizing the already existing skills, similar approach been used by the training team, Haslinda and others <sup>[32,33]</sup> also share similar views.

The reflection dairy helped the team in understanding the day to day learning. It helped the team in understanding the training needs, need for changing methodologies suiting the group dynamics. Feedback from the participation at the end of each session and end of training programme on content of the topic, methodology adopted, relevance to the practice in the field and suggestions to improvise the training. The day to day evaluation was carefully designed to utilize the three levels of training effectiveness; personal learning, suggestions for the trainers, and take home message for the trainee. Hamid Khan, [34] also express similar views regarding the review and evaluation of the training programmes. The trainings aimed at increasingly emphasis on practice as most of the sessions had a participatory methodologies with lot of scope for participation from the training, and lot of handholding teaching techniques were used in demonstrating group activity. Moreover, the effectiveness of training program, in terms of its application in the role play, preparing the road map for next six months has been an important consideration as said by Brinkerhoff [35] and Gordon [36].

The authors through their telephone conversation (six months) and using their network have ensured that the house parents initiated group interventions for children in their respective districts. Training effectiveness is measured on the extent to which psychosocial activities been initiated as said by Krager and others, [37,38].

Training evaluation is also been viewed as field testing of the conceptualizing, designing, analyzing, developing and implementing an effective training program as said in IAEA <sup>[39]</sup>. Moreover, the 3 trainings, day to day evaluation and over all evaluation has been advantage of identifying the area that needs further improvement and it also provides an insight on methods of improvement as reported by Goldstein & Ford <sup>[40]</sup>. Kirkpatrick <sup>,41,42</sup>,

often referred to training evaluation as an 'evaluation of four different areas; reaction, learning, behavioral changes and return on investment, similar approach was used by the authors. Majority of the participants opined that the training programme was useful for them to enhance their knowledge and skills to work effectively with children in difficult circumstances. They expressed that participatory methodology was very helpful as they felt encouraged to share their already existing experience and skills. The trainees expressed that they are confident of implementing the psychosocial care activities in the field and same been confirmed during our telephone conversation.

#### **CONCLUSION**

The training programme for house parents reflected that there is a need for continued education and training to equip professionals with transformational solutions and goal oriented skill set so that they work effectively with the challenges arising in the process of implementation. Capacity building activities are very essential to update knowledge and skills. It should continue as booster sessions and to continue handholding support and enhance their skills. There is a continuous need for reviewing the training programme periodically, so that there would be mutual learning for the trainer and also for the trainee.

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