

## **Evaluating Effectiveness of Foster Homes in Delhi: An Assessment of the Needs of Children**

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### **Abstract**

India is an abode to maximum number of children who are under the age of 18 years, who comprise of forty percent of the total population. Due to financial constraints and prevalent social stigma, orphan-hood and abandonment of children is not a rare sight in the country. Thirty eight children, 25 female and 13 male, aged 10-18 years, across five foster homes in Delhi were selected using non-probabilistic sampling techniques. Their emotional, educational, interpersonal and basic/fundamental needs were assessed using a questionnaire. Descriptive and inferential statistical tools were employed along with thematic analysis for condensing the collected data. The results showed that the children's viewpoints on the quantitative dimensions were highly in agreement with each other, and indicated that the agency was able to cater to most of their needs. However, the qualitative responses were highly varied and indicated a greater disparity in fulfilment of needs across individuals'. The study has implications for policy making, research and development.

**Keywords:** foster care, child welfare, orphan and abandoned children, foster home, needs

### **Introduction**

According to the United Nations, approximately 143 million children across the globe have been abandoned by their parents out of whom 104 million alone reside in Asia<sup>1</sup>. Further out of these, 31 million children live in India, a country which has adoption rate as low as 0.18%.

Abandoned children refer to children who are deserted by their biological or adoptive parents, caretakers or guardians. The abandonment may be physical (absence of parents from the child's life) or mental (neglect, lack of attention etc. from the parents). Similarly, the word orphan is used to refer a child, whose parents are either dead, or are unwilling to take care of him/her<sup>2</sup>.

The term foster care is used to refer to a temporary abode for an abandoned child. Provision of foster care was initiated in India in the 1960s. Foster homes are abodes for children who have lost their parents due to adverse circumstances or have been abandoned by them as they were children of unmarried couples, children born in poverty struck family, or the sex of the child was girl, or a child with special needs etc.

The foster care parents/care takers of these children are usually selected, approved, trained and qualified as fit by Child Welfare Committees for taking care of these children until they are formally adopted. According to the guidelines given by Union Ministry of Women and Child Development Indian citizens above the age of 35 years who are financially independent, medically healthy and have no criminal record can provide foster care. These foster care families are fully responsible for fulfilling the basic needs of these children including food, shelter, education etc. Although there are different kinds of foster family arrangements, however foster care usually ends when the child turns 18 years of age, until which if he/she is not adopted, can be adopted by foster parents themselves.

Throughout the world, ample literature is available which purports that poor nutrition and medical care, lack of optimal human interaction,

dearth of play facilities and overcrowding significantly affect abandoned children by hampering their psychological, social and cognitive growth<sup>3,4</sup>. These children often belong to minority groups and experience high levels of guilt, fear and insecurity, and find it difficult to trust others. Foster care provides the necessary love, care and respect<sup>5</sup> which these children have lacked in their homes where they might have faced neglect, abuse, disownment, violence etc. Paradoxically, researches show that the love and affection a family is able to provide its children, foster homes are unable to replicate<sup>6</sup> because of which these children develop high rates of depression<sup>7</sup>, are more likely to engage in criminal activity and may sometimes even be at a higher risk of committing suicide<sup>8,9</sup>. This poses important questions on the existence and functioning of foster homes. Few countries around the world have gone ahead to abolish such shelters as they felt that these temporary abodes were legalising and promoting more abandoning of children.

The overall well-being of children, whether abandoned or not is moulded by an amalgamation of biological, social, behavioural and environmental factors. In the past literature, although the emotional and economical needs of abandoned children have received significant attention from researchers around the globe, their educational, basic and social needs have not been addressed as much<sup>10</sup>. It was found that meeting the materialistic needs of these children was only a partial step in their empowerment<sup>11</sup>. Identifying the possible range of factors affecting a child's life is thus an important step in laying the foundation of effective childcare<sup>12,13,14</sup>.

### **Methodology**

**Objectives:** The primary objective of the present study was to find out the extent to which the current foster homes are being able to meet the various needs of the orphaned and abandoned children residing there. An attempt was made to bring the voices of these children into limelight thereby highlighting the suggestions made by them about ways in which their unmet needs could be met, further enhancing the effectiveness of these foster homes.

**Instrumentation:** For the purpose of the study, an open ended semi-structured questionnaire was used. There were four main sub-sets in the questionnaire, covering the main areas of the child's life. The Questionnaire was designed to assess the fundamental, emotional, educational and interpersonal needs of these children.

Basic/ fundamental needs were defined as comprising of the traditional list of immediate needs such as food, shelter, clothing, sanitation and health care. Emotional needs were operationalized as buffers which helped facilitate good psychological health. Example of emotional needs included need for security; give and take of attention, sense of autonomy and control, sense of belongingness, need for friendship and intimacy etc. Educational needs were defined as the needs related to education and career. Lastly, interpersonal needs included the need for social acceptance, prestige, and access to certain people, social events, or resources.

To answer each question on the questionnaire, the child was required to mark one out of the four options: never, sometimes, most of the times, always. In case they answered 'never', they were directed to the next part of the questionnaire where they got a chance to give their suggestions. There were a total of 29 questions.

**Sample:** The research was conducted on 38 children, 25 female and 13 male, aged 10 years and above, belonging to 5 foster care homes in Delhi (located in different parts of the city but being run by the same agency). Children with special needs/with IQ lower than 70 were not included in the study as their needs may have varied from that of the mainstream children. Non-probabilistic sampling techniques namely purposive sampling and convenient sampling were used to recruit the sample in the city of Delhi.

**Data collection:** Permission from the respective mentor mothers/fathers was taken in writing before starting the process of data collection. Informed consent was taken from all the children who met the criteria of the study to participate in the same. Before giving out the questionnaire, the purpose and the objectives of the study were made clear by the researcher. The process of data collection was made as objective as possible. Each child was assured the confidentiality of his/her responses. The children were

advised to answer all the questions keeping in mind last one year only.

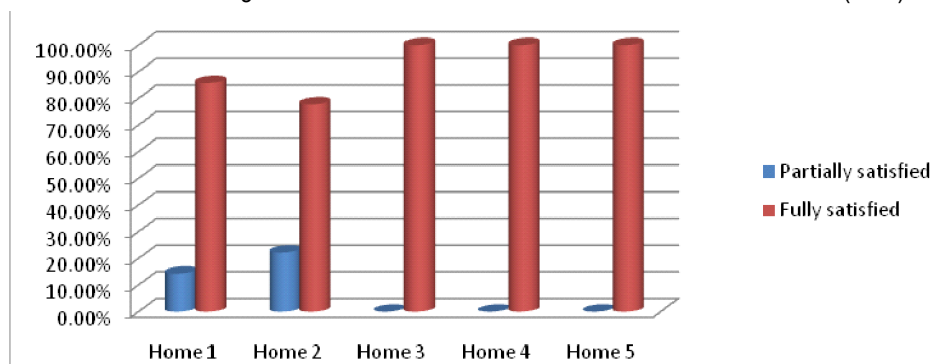
The questions were read out and answers were written for those children who could not read or write. Though even for the children who could read and write, the understanding of the nuances of each question was cross-checked properly by the researcher who was conducting the study.

The data was mostly collected during afternoon and evening time when children returned from their respective schools. Few of them were conducted in study rooms and dining halls/sitting areas, while others were conducted in the bed rooms of the children. On a whole, the environment was calm and un-disturbed; however as the number of children in the homes increased gradually as they returned from their tuitions/school/taekwondo classes, it became a little difficult to ensure that no child, other than the one filling the questionnaire was coming inside the room where data collection was taking place. Also, as the number of younger children increased in the home, it became slightly difficult to maintain a sound proof environment. However, attempts were made by the researcher, supervisors, caregivers and tuition teachers to keep the children who were filling the questionnaires away from any kind of disturbances around. For majority of them, the researcher recorded their verbal responses, as most of the children were too young to fill the questionnaire, didn't know how to read/write or were more comfortable giving verbal responses as compared to written.

**Data Analysis:** Appropriate descriptive and inferential statistical measures were applied to the quantitative data. The assessment and the analysis of the data were done on the basis of scales of never, sometimes, most of the times, and always. Each response was given a score of 1, 2, 3 or 4 (depending on the response). The scores were summed to obtain a grand total which was categorized on the basis of the following scale/key: 1-40 (not satisfied), 41-80 (partially satisfied) and 81-120 (highly satisfied). The qualitative data was analysed using thematic analysis. After reading the content multiple times, codes and themes were carefully identified, followed by their categorization into broader themes and classes. The names of the five foster homes have not been reported in order to ensure confidentiality and anonymity.

## Results and Conclusion

**Home 1:** The study indicated that 85.72 % of the children staying in home 1 were highly satisfied with respect to their basic/fundamental needs, emotional needs, educational needs and interpersonal needs (figure 1). On the other hand, 14.28 % of the children were partially satisfied regarding the same. The average individual total score obtained was 90.14 (n=7).



**Figure 1.** The level of satisfaction of the children with respect to their respective needs across five foster homes

**Home 2:** It was seen that 77.78 % of the children staying in home 2 were highly satisfied with respect to all their needs (figure 1). On the other hand, 22.22 % of the children were partially satisfied regarding the same. The average individual total score obtained was 96 (n=9).

**Home 3:** Hundred per cent of the children staying in home 3 were highly satisfied with respect to all their needs (figure 1). The average individual total score obtained was 109.4 (n=9).

**Home 4:** Similar to home 3, hundred per cent of the children staying in home 4 were highly satisfied with respect to their basic/fundamental needs, emotional needs, educational needs and interpersonal needs (figure 1). The average individual total score was 96 (n=7).

**Home 5:** Akin to home 3 and home 4, hundred per cent of the children staying in home 5 were highly satisfied with respect to their basic/fundamental needs, emotional needs, educational needs and interpersonal needs (figure 1). The average individual total score obtained was 104.33 (n=6).

It was seen that the children from homes 1 and 2 had a slender amount of needs which were being partially met as opposed to the homes 3, 4 and 5 where all the needs of all the children were being fully met. Also, out of the three homes (where the needs of all the children were being fully met), the decreasing order of the mean total scores obtained by the children staying in them were as follows:- home 3 (109.4), home 5 (104.33) and home 4 (96).

If all the 38 children were to be divided amongst their respective age brackets, it would be correct to assume that the mean total scores obtained by the different aged children in the decreasing order were as follows:- 16 and above (103.55), 12-14 years (101.25), 14-16 years (96.2) and 10-12 years (95.8). This could possibly indicate that the foster home agency is perhaps more successfully able to meet the needs of the children aged 16 and above, and those who are aged between 12-14 years as compared to the other two age groups.

If all the children were to be divided on the basis of their gender, i.e. into two groups of that of 13 boys and 25 girls, the mean total score obtained by both the sexes individually was not significantly different from each other. The average score for boys was 99.84 while that of girls was 99.2 (figure 2). This is suggestive of the fact that gender amongst the group of children studied, did not play any crucial role in terms of the agency being able to meet the needs of the children. This implies that the agency is as responsive to the needs of girls as it is for boys.

■ Boys (99.84) ■ Girls (99.2)



**Figure 2.** Gender wise average of total scores

If all the girls were to be bifurcated into different age groups, then the mean total scores obtained by different aged girls, in decreasing order could be arranged as follows:- 16 and above (105.43), 12-14 years (99), 14-16 years (98.25) and 10–12 years (93.7). While if all the boys were to be bifurcated into different age groups, then the mean total scores obtained by different aged boys, in decreasing order could be arranged as follows:- 12-14 years (104.4), 10-12 years (99.5), 16 and above (97) and 14 – 16 years (92).

If we were to analyse the degree of similarity in the viewpoints of the children across different homes, different age groups and different sexes, we would reach the following conclusions:-

**TABLE 1: Variables Investigated Across Five Homes**

HOME	AVERAGE OF TOTAL SCORE	STANDARD DEVIATION	COEFFICIENT OF VARIATION
Home 1 (n=9)	96	13.09	12.85%
Home 2 (n=9)	109.4	8.03	6.92%
Home 3 (n=7)	90.14	9.23	9.48%
Home 4 (n=7)	96	10	9.64%
Home 5 (n=6)	104.33	11.76	10.28%

As indicated in table 1, there is less diversity or more uniformity in the viewpoints of the children staying in home 2 as compared to all the other homes. In increasing order of diversity/differences in opinion, the children who stay in the home 1 and home 4 have considerably uniform viewpoint, as opposed to the children who stay in home 5 and home 3, where a slight amount of disagreement/contradiction has been reported in terms of the degree of fulfilment of various needs.



**Table 2 – Variables Investigated Across Different Age Groups Among Boys and Girls**

DIMENSIONS/ VARIABLES/ STUDIED	NUMBER OF RESPONDENTS		AVERAGE OF TOTAL SCORES		STANDARD DEVIATION		COEFFICIENT OF VARIATION	
	BOYS	GIRLS	BOYS	GIRLS	BOYS	GIRLS	BOYS	GIRLS
10 – 12 YEARS	4	7	99.5	93.7	13.50	14.7	11.75%	14.51%
12 – 14 YEARS	5	7	104.4	99	11.86	14.15	10.16%	13.24%
14 – 16 YEARS	2	4	92	98.25	0	7.76	0	6.85%
16 AND ABOVE	2	7	97	105.43	12.73	11.86	9.27%	10.41%

As indicated in table 2, girls who belonged to the age group of 14-16 years of age thought alike as compared to those girls who belong to the other age brackets. In increasing order of diversity/differences in opinion, girls who are aged 16 years and above had considerably uniform point of view, as opposed to the girls who belonged to the age brackets of 12-14 years and 10-12 years, where a slight amount of disagreement was reported in terms of the degree of fulfilment of various needs.

Similarly, boys who belonged to the age group of 14-16 years of age completely thought alike as compared to those boys who belonged to the other age brackets (Table 2). In increasing order of diversity/differences in opinion, boys who were aged 16 years and above had considerably consistent point of view, as opposed to the boys who belonged to the age brackets of 12-14 years and 10-12 years, where a slight amount of discrepancy was reported in terms of the degree of fulfilment of various needs.

**Table 3: Need Wise Thematic Analysis of Qualitative Data**

Need	Qualitative Codes/ Data Excerpts
BASIC/FUNDAMANTAL NEEDS	<i>Everyone cleans home; care giver cleans daily; kids dirty house; kids clean only on holidays; unhygienic washrooms; unable to sleep due to noise; unable to sleep because scared of ghosts; whenever hurt/ill get necessary aid; hardly fall sick; not adequate band-aid; mentors get what we need; no adequate space for self-study; not allowed to dance; musical instruments not there; cell phones not allowed; lack of indoor games; no restriction on the amount of food; healthy nutritious food; mostly food is delicious; dislike particular vegetables.</i>

EDUCATIONAL NEEDS	<i>Scared of peers; fear of mockery; support from faculty and mentors; lack of facilities and opportunities; get tuitions; no career related guidance; have books and library; mentor always guides if we approach him/her; facing difficulties in specific subjects; unable to concentrate for long; always dependent on others for study; kids make too much noise; capable of self-study but need help sometimes; unable to introspect at times.</i>
EMOTIONAL NEEDS	<i>Feel scared of ghosts; don't feel scared because house remains locked; uncle aunty take good care; bhaiya takes care; I am heard in the home; sometimes don't listen; loved; scolded when do wrong; stay like a family; feel respected if I respect others; no one listens to me; recognize that this family can't replace real family; feel lonely at times; doesn't feel safe in neighbourhood; scared to approach people; scared of dark; mentor helps in difficult situations; help outsiders whenever possible; unable to help people because hardly go outside.</i>
INTERPERSONAL NEEDS	<i>Take initiative to clean the house; clean only when holidays/festivals or asked to; doesn't take initiative in cleaning; help others if they helped me; help others as they will help me later; help others when they ask; help only brothers and sisters not outsiders; others help if I ask them for help; unable to open up with others; supervisors and caregivers help solve problems; scared if others would leak my talks; others unable to relate because of age differences; respect everyone except when angry; sometimes rude to others; have good friends at school; feel proud to tell others about foster home; unable to tell others because scared of differential treatment.</i>

It is interesting to note that the responses of children on the qualitative questions were more discrepant as compared to the results obtained on the quantitative domain (see Table 3). For instance, one child from the same home mentioned that everyone cleaned the house daily, yet another child quoted that the house was extremely dirty. Similarly children's views differed drastically on the availability of medical aid. While one child felt that whenever he got hurt, he got the necessary first-aid, however another child mentioned that there was a paucity of band-aids in the house.

### Limitations and Scope

Since the data for the present study was collected from five homes

being run by the same agency, comparison of results with other foster homes was not possible. It is advised that future studies could increase their sample representativeness so that the results could be generalized to the entire population of orphans and abandons in the city/country. On a parallel note, children with special needs were not included in the study as their needs were assumed to be different than the mainstream children. Designing a method through which their need assessment could take place, could be a prospective project in the future. Furthermore, comparative analysis of needs of orphans and non-orphans could help fathom the differences between the needs of the two populations as well as the ways in which they could be better met.

Another major challenge that was faced throughout the study was that though almost all the children were quick in giving their responses, they were not able to provide reasoning of those self-chosen options. None of them could come up with any valuable suggestions pertaining to how their needs could be better met by the agency. It may be speculated that the children were too scared to express their true points of view (which could be against the agency) and thus the results should not be accepted at their face value. However this limitation was partly addressed by the researcher's constant reminder of confidentiality and anonymity of responses.

Most of the children did not know their actual age, but the age which was told to them by the agency workers. Since the two may not actually coincide in reality, it is advised to draw interpretations from the quantitative analysis with caution. While interpreting the results, the duration of the stay of each child in their respective homes should also be taken into consideration while drawing conclusions about their met/unmet needs.

The degree of satisfaction with respect to the educational needs may differ for every child depending upon the school that they go to, duration of formal education they have obtained in the past and the class they are currently in, rather than having anything to do with the agency. Further, since the data was collected in the leisure time of children, some children filled the questionnaires extremely quickly, at times frowning and counting the total number of pages. They were looking forward to spending quality time outside (playing etc.). While on the other hand, some children who

got to miss their tuition to be a part of the study, were more willing to devote additional time for the process. Such time constraints could have significantly impacted the data.

The agency's ability to fulfil the needs of the children rests upon adequate funding and strategic planning. Throughout the world, the financial aid offered to foster parents for taking care of these children is substantially less (reimbursement is hardly enough to match actual expenses) or is not there at all. In order to maximize the two for better need fulfilment, the government could offer sponsorship or additional funding and give these external agencies greater decision making power. They could hold centralized training sessions for foster care staff such that there is a more uniformity in care providing. Further, assigning mental health professionals who could assess the needs of these children in a more nuanced fashion is advised.

### References

- 1 Connolly, M. (2004). *Children on the Brink*. New York: UNICEF.
- 2 Ministry of Women and Child Development. (2015). Model guidelines for foster care. Retrieved from [http://www.wcd.nic.in/sites/default/files/Final%20Edited\\_guidelines.pdf](http://www.wcd.nic.in/sites/default/files/Final%20Edited_guidelines.pdf)
- 3 Brown, K. (2009). The Risks of Harm to Young Children in Institutional Care. Better Care Network.
- 4 Csaky, C (2009). Keeping Children out of Harmful Institutions: Why we should be investing in Family-Based Care. Save the Children.
- 5 Chisholm, K. (1998). A three-year follow-up of attachment and indiscriminate friendliness in children adopted from Romanian orphanages. *Child Development*, 69, 1092-1096
- 6 Everychild. (2005). Family Matters: A study of institutional childcare in central and eastern Europe and the former Soviet Union. Everychild, London.
- 7 Ruiz-Casares, M., Thombs, B., & Rousseau, C. (2009). The association of single and double orphan-hood with symptoms of depression among children and adolescents in Namibia. Retrieved from <http://link.springer.com/article/10.1007/s00787-009-0739-7>
- 8 Tobias, D. (2002). Moving from Residential Institutions to Community-Based Social Services in Central and Eastern Europe and the former Soviet

Union.The World Bank.

- 9 Makame, V., Ani, C. & Grantham-McGregor, S. (2002). Psychological well-being of orphans in Dar El Salaam, Tanzania. *Acta Paediatrica*, 91, 459–465. doi: 10.1111/j.1651-2227.2002.tb01671
- 10 Rockwood, M., Morico, D., Figuereo-Supraner, C., & Thompson, E. (2015). Addressing emotional needs in abandoned children at the Rita Zniber foundation. Worcester Polytechnic Institute. Retrieved from [https://www.wpi.edu/Pubs/E-project/Available/E-project-101615-124849/unrestricted/Final\\_Zniber\\_IQP\\_2015.pdf](https://www.wpi.edu/Pubs/E-project/Available/E-project-101615-124849/unrestricted/Final_Zniber_IQP_2015.pdf)
- 11 DeWitt, M. C., & Lessing, A. C. (2010). The psychosocial well-being of orphans in Southern Africa: The perception of orphans and teachers. Retrieved from [http://dspace.nwu.ac.za/bitstream/handle/10394/3878/DeWitt\\_Lessing\\_TD6\(2\).pdf?sequence=1](http://dspace.nwu.ac.za/bitstream/handle/10394/3878/DeWitt_Lessing_TD6(2).pdf?sequence=1)
- 12 Richards, J., & Pickett, O. (2013). *Life course and social determinants resource brief*. The Maternal & Child Health Library at Georgetown University. Retrieved from <http://www.mchlibrary.org/lifecourse/index.html>
- 13 Robert Wood Johnson Foundation Commission to Build a Healthier America. (2014). *Time to act: Investing in the health of our children and communities*. Retrieved from <http://www.rwjf.org/en/research-publications/find-rwjf-research/2014/01/recommendations-from-the-rwjf-commission-to-build-a-healthier-am.html>
- 14 Larson, K., et al. (2008). Influence of multiple social risks on children's health. *Pediatrics*, 121(2), 337-344. Retrieved from <http://pediatrics.aappublications.org/content/121/2/337.full>