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**INSTITUTIONAL CARE AND SOCIAL RE-INTEGRATION OF  
ORPHANS: EXAMINING POST-DISCHARGE CASES FROM  
NAIROBI CHILD-CARE INSTITUTIONS**

BY  
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## DECLARATION

This Project is my original work and has not been presented for a degree in any other university

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Finally, the researcher acknowledges the tireless efforts by the two supervisors Dr. Benson Agaya and Dr. Pius Mutie both of Department of Sociology in the University of Nairobi, under whose guidance this study was undertaken and completed.

## **Dedication**

The researcher would like to dedicate this research to the Child Care Institutions in Kenya. Findings and recommendations contained herein would greatly inform programming for rehabilitation and reintegration of children passing through their care programmes.

## **Executive Summary**

This study titled Institutional Care and Social Re-integration of Orphans: Examining post-Discharge cases from Nairobi Child-Care Institutions was carried out in Nairobi province.

The study aimed to establish how residential care of children affects their social adjustment in terms of social relationships within and outside the receiving communities after discharge, and their ability to fit in the community after discharge. In terms of emotional adjustment, the study aimed at establishing the impact of residential care on the children's ability to cope with life challenges after reintegration, their ability to establish and maintain lasting relationships, adjust into a community life, develop a sense of independence and autonomy and their acceptance into the communities in which they are reintegrated. The study sought to investigate individuals who are 15-21 years who have stayed under residential care for two years or more and have been released back to the society. However, due to difficulties in tracing only those within the expected age bracket, some who were below 15 years representing unique cases and some above 21 years with experiences relevant to the study were also interviewed.

Intensive literature review revealed that a number of studies have been done on institutional care for children but very little on the post institutional phase of rehabilitation (reintegration). This study therefore sought to fill that gap.

The study applied a combination of data collection methods and tools. This resulted in both qualitative and quantitative data. Simple observations, in-depth interviews, use of structured questionnaire, recording of case studies, review of secondary data and use of photography were some of the methods used to gather data. Descriptive statistics such as percentages, frequencies and tables were some of the methods used to summarise, analyse and describe the data obtained.

The study revealed that there is no common framework for providing residential care and reintegration to children both by government and charitable children institutions. There is also no common curriculum for imparting knowledge and skills in both government and charitable children institutions. In terms of reintegration and ability to engage in economic and social activities, most of the discharged individuals lacked basic skills to engage meaningfully in the economic activities. For example, lack of institutional support (71.8%) which is blamed on 66.6% of unrealized economic and social goals was cited by 76.9% of the reintegrated former inmates as their hindrance to accessing basic services such as food, accommodation, transportation and even medication. This further contributed to erosion of the social fabric with 84.6% of the former inmates unable to support marriage commitments and opting for single life even at ages above 40 years.

The study also revealed that negative community perceptions played a major role in hampering effective reintegration of discharged inmates leading to homelessness among some of the former inmates. For example, 5% of the former inmates reported that the community barred them from inheriting property left behind by their late parents on grounds that they had ceased being members of that community on commitment to the institutions.

Despite some of these setbacks, the study revealed that through the institutions, some respondents had discovered their inner worth and had settled in life. Others had changed their way of thinking and were able to look at life more realistically as one inmate suggested when she remarked;

"I wanted to come out and revenge on the lady who made me be committed to the Langata Reintegration Centre. But when I came back and on looking at her realized that I was more empowered than her, I decided to leave her alone"

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## **Acronyms**

<b>AIDS</b>	Acquired Immune Deficiency Syndrome
<b>AMIN</b>	Afro Line Media Initiatives
<b>ANPPCAN</b>	African Network for Protection and Prevention against Child Abuse and Neglect
<b>CBOs</b>	Community Based Organizations
<b>CYNSP</b>	Children & Youth in Need of Special Protection
<b>DCS</b>	Department of Children Services
<b>FBOs</b>	Faith Based Organizations
<b>GOK</b>	Government of Kenya
<b>HIV</b>	Human Immuno-Deficiency Virus
<b>NGOs</b>	Non-Governmental Organizations
<b>OVC</b>	Orphaned and Vulnerable Children
<b>SC-UK</b>	Save the Children - United Kingdom
<b>UNAIDS</b>	United Nations Development Agency
<b>UNICEF</b>	United Nations Children Education Fund

## CHAPTER ONE: INTRODUCTION

### 1.1. Background

The Kenya National Development Plan (2002-8) estimates that there are 1.3 million orphans of whom one or both parents have died of AIDS related causes. UNICEF (2002) projected that there would be 1.8 million HIV/AIDS orphans by 2005. A recent report by Save the Children Canada (SC-UK 2004) observed that institutionalizing these children has been seen as a way of relieving some of the hardships they face.

A report by the GOK (2004) estimated the total number of orphans aged between 0-14 years to be 1.7 million which constituted 12% of the total children population in Kenya. The GOK report also provided a breakdown of the various categories of orphans in the country as summarised in the table 1 below;

*Table 1: Breakdown of categories of orphans in Kenya*

	Description	% totals
a.	Number of children under 18 years (as percentage of total Kenyan population)	15.8%
b.	Total number of orphaned children 0-14 years	1, 700, 000
c.	Children aged 0-14 years orphaned by HIV/AIDS	55-60%
d.	Orphaned children under care of mothers	84%
e.	Female orphans headed households	2.1%
f.	Male orphans headed households	1.8%
g.	Orphans residing with extended families (mainly grandparents)	40%
h.	Orphans residing with other relatives	34%
i.	Orphans under foster care or are adopted	75%

Modified table: Source GOK, 2006 a.

Note: c-i above as percentage of total number of orphaned children aged 0-14 years

The number of children admitted for residential care in Kenya continues to rise due to increasing deaths of parents from HIV/AIDS related illnesses. Social protection systems to support families facing these problems are failing, and the result is that many children orphaned by HIV/AIDS are growing up outside the family context under the residential care. The Department of the Children Services (DCS, 2004) reported that there were 476 children homes in Kenya that provided residential care to an estimated 7, 000 to 30, 000 children majority of who were orphans.

The main purpose of this study therefore was to examine how institutional (residential) care affects social reintegration of children after discharge. This was achieved through a number of data collection methods. These included in-depth interviews, self administered questionnaires, observation and review of secondary data.

## **1.2. Problem Statement**

Many studies have been done to establish the number of orphans in Kenya. A study by SC-UK (2004) reviewed the policy, legislation and practice with regard to institutionalization of children in Kenya. It looked at the situation of children in some institutions and aimed to establish the nature of the physical facilities they lived in, the number of children who lived in them, why they were committed to the institutions, duration of stay, quality of care and quality of staff who looked after them.

The report established that in most of the institutions, the physical facilities were dilapidated and inadequate leading to congestion of children. They were also found to be dirty and often neglected. Most of the institutions accommodated more children than their capacity and more often than not, the staff who looked after the children were either unqualified or underqualified. Concerning the reasons why children were committed to the institutions, many causes were listed that ranged from orphanage to delinquency, physical or mental disability and neglect by parents among others.

A report by the African Network for Prevention and Protection from Child Abuse and Neglect (ANPPCAN, 1999), provided details on possible preventive measures for institutional child abuse, including improving upon the competence of institutional

workers, decongesting institutions and strengthening the relationship between institutions and Department of Children Services. It specifically looked at common forms of abuse in residential institutions and possible victims and perpetrators of abuse among others.

The report identified perpetrators of child abuse to include the staff and administrators who are charged with the day-to-day running of the institutions. They were found to subject children to physical, emotional and sexual abuse. These acts or behaviour often lead to physical injury, emotional disturbances and feelings of rejection, as well as feelings of vulnerability among children. The report proposed capacity assessment of institutions before taking in children to avoid congestion. It also recommended community rehabilitation of children in order to avoid removing children from their natural setting to the institutions. Concerning incompetence of staff, the report recommended actualization of the national guidelines by the Department of Children Services on qualification of child care workers.

Afro-line Media Initiatives (AMIN) in a 2002 report on situation analysis of children homes/orphanages in Nairobi, Kisumu and Busia highlighted cases of child abuse in the studied institutions noting that 47.4 % reported sexual abuse by staffs and 64.8 % presented cases of drug abuse.

Henggler *et al* (1998) examined various aspects of institutional care for children. They revealed that with regard to educational outcomes for children in institutional care, a variety of social, ecological and facility based factors affect educational outcomes for older children and developmental outcomes for younger children.

Concerning permanence and re-entry to community care, they noted that institutional programmes achieve lesser positive outcomes and that children cared for in residential institutions are less likely to go back home after residential care. In terms of post discharge observations, children cared for through institutions were found more likely to be unstable 6 months after discharge.

Concerning long term effects of institutional care, they noted that institutionalized children attain lower education, are likely to get into conflict with the law after

discharge, have higher chances of drugs and substance abuse, higher likelihood to be dissatisfied with the level of contact with their siblings after discharge and less likely to have close friends. They tended to have weak formal support and were less likely to positively assess their lives. These surveys did not however examine the societal conditions that would affect post institutional care social adjustment of reintegrated children.

This study therefore aimed to establish why orphaned children who have undergone residential care tend to exhibit post-institutional discharge behavior maladjustment. It also aimed at establishing how residential care of children affects their social adjustment in terms of social relationships within and outside the receiving communities after discharge, and their ability to fit in the community after discharge. In terms of emotional adjustment, the study aimed at establishing the impact of residential care on the children's ability to cope with life challenges after reintegration, their ability to establish and maintain long-term relationships, adjust into community life, develop a sense of independence and autonomy and their acceptance into the communities after reintegration. The study involved individuals who were 15-21 years who had undergone residential institutional care for two years or more and had been released back to the society.

### 1.3. Rationale of the Study

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The Kenyan law provides for the establishment of charitable children institutions under articles 58-72 of the Children Act 2001. Such institutions provide residential care to children, majority of whom are orphans and particularly AIDS orphans.

The Government of Kenya in 2004 developed detailed guidelines pursuant to the provisions of the Children Act, on management and administration of children institutions. Article 72 specifically outlines the regulations on requirements and procedures of approval of children welfare programmes, their management and inspection. Further, SC-UK (2004) developed quality indicators for childcare programs in East and Central Africa by which compliance with articles 72 of the Children Act 2001 can be tested.

All these initiatives by the Government and SC-UK and other studies as cited earlier promote institutional care for children but fail to indicate how the care affects the

socio-emotional adjustment of children after reintegration into society. The research therefore aimed at establishing how residential care affects the reintegrated children's ability to establish meaningful social relations within the community, fit within the formal education or tertiary training programmes, their behavior in formal employment, adherence to state law and conformity to community morals and norms among others.

It was hoped that the research would serve to strengthen lobbying efforts by childcare professionals and Civil Society Organizations to establish appropriate child care and rehabilitation systems in Kenya. It would also serve as the basis for further research on institutional care for children.

#### **1.4. Research questions**

The study was guided by the following broad questions, which were logically deduced from reviewed literature.

1. How does the shift in economic support and interrupted social relationships affect individuals discharged from childcare institutions?
2. How does the shift from strictly regulated institutional environment to a free society and the nature and orientation of residential care institutions affect social reintegration of individuals discharged from childcare institutions?

#### **1.5. The Overall Objective of the Study**

The overall objective of the study was to establish the impact of institutional child-care on post-discharge social re-integration of orphans.

#### **1.6. Specific Objectives**

Specifically, the study aimed to achieve the following objectives;

1. To determine the consequences of shift from full to reduced institutional economic support for individuals discharged from child care institutions
2. To determine the consequences of interrupted social relationships as individuals are institutionalized and then discharged into society
3. To determine the consequences of shift from strictly regulated institutional environment to a free society for individuals discharged from childcare institutions.

4. To determine the effects of institutional orientation<sup>1</sup> on the ability of individuals to cope with post institutional life challenges.
5. To assess the societal perceptions of individuals discharged from childcare institutions and how the perceptions affect their social reintegration after discharge.

### 1.7. Scope of the study

This study was limited to 4 Residential Care Institutions. These included a Christian, Muslim, Government and individual sponsored and run institution. Selection of these institutions was based on the nature and orientation of the institution and how these were likely to impact differently on the reintegrated individuals. They had to have been in existence for at least 5 years and in addition have a residential care and reintegration programme for children.

The study restricted itself to the post residential care effects on children and not to the general practice of residential care.

The study focused on the orphans and not all categories of children. Orphans were identified as a category of individuals with comparable or similar backgrounds and experiences. Focusing on orphans enabled the researcher to work with a specific category of respondents with a possibility of generalizing the study results to all children discharged from residential childcare institutions.

Theoretically, the study was limited to theories that describe the causal-effects of unstable personalities among orphaned children who have previously been institutionalized and thereafter reintegrated into community. These theories describe relationships between children with parents and how detachment from their natural settings affects their future ability to re-connect with the community/parents.

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<sup>1</sup> Orientation here relates to sponsorship



## 1.8. Definition of key terms

**Charitable children institution:** A home or institution which has been established by a person, corporate or unincorporated body or a religious organization and has been granted approval by the National Council for Children Services (NCCS) to manage a programme for the care, protection, rehabilitation or control of children, (Children Act 2001)

**“Orphanages” or residential institutions:** Facilities used to house children who are orphaned or abandoned

**Orphaned child:** A person who is below 18 years and whose one or both parents have died

**AIDS orphan:** This is a boy or girl whose one or both parents have died of HIV/AIDS or HIV/AIDS related illnesses.

**Social reintegration:** Under this study, it means the process of removing children from the institutions back into the community. It involves issues of acceptance such as the child accepting the community as a place where they belong, acceptance of the child by the community, ability of the child to cope with challenges posed by the re-entry, ability of the child to establish and maintain social relationships, compliance with the requirements of law and authority and their ability to continue or pursue formal education and or training etc.

**After Care:** Continuous service delivered to a former institution inmate on a voluntary basis appropriate for the individual in the transitional period from institutional life to reintegration into society, to assist them to stand by themselves.

**Exit Strategy:** Methods used by children institutions to prepare the inmates for self reliance without compromising intended programme goals.

**Rehabilitation:** Restoration to a good condition or to a former position or reputation. To a delinquent, it is the act of bringing back to a normal life through a special treatment.

**Reintegration:** The process of exiting inmates from the institution back to the community.

**Discharged Individual:** In the context of this study, this term implies a person who underwent care in a child institution and was subsequently discharged back to the society. The person may have outgrown the legal definition of a child.

### 2.0. Introduction

This section presents a critical review of the available literature on institutional care and reintegration of children. It gives a brief framework of institutional care for children in Kenya as provided for by both the government and the charitable children institutions. It operationalizes the concepts of residential care and rehabilitation of children, the exit strategies for children under residential care and its implications on their physical, social and economic adjustment after reintegration. The section also highlights the strengths and gaps in the literature related to the problem under study.

### 2.1. The Framework of Institutional Care in Kenya

A draft report by the GOK (2006 a) reveals that the Department of Children Services (DCS) currently runs 23 children institutions established under the Children Act (2001). Children institutions are categorised in three broad forms.

The first category comprises Children Remand Homes formerly known as the Juvenile Remand Homes established under section 50 of the Children Act. There are 11 Children Remand Homes in Kenya designed to offer safe custody and care to children pending finalization of their cases at the Children's Court.

Category two comprises Rehabilitation Schools formerly known as the Approved Schools. These are established under section 47 of the Children Act of 2001. There are 10 Rehabilitation schools in Kenya and one Reception Centre that rehabilitates and reintegrates children back to the society.

The third category is the Children Homes that cares for and protects abandoned, neglected and other vulnerable children. Currently, Nairobi Children's Home is the only Government sponsored and run Children Home in Kenya.

The report notes that although these Government institutions were originally designed to cater for the children in conflict with the law, the deteriorating socio-economic conditions in the country have seen the institutions open doors to majority welfare cases. These include orphaned children, abandoned, abused and other destitute cases.

Subsequently, there has been a paradigm shift to accommodate this diversification hence the categorization of the institutions.

The same report confirms that there are a number of charitable children institutions complimenting the work of the government to provide services to children. The report indicates that in the year 2005, a total of 708 organizations were reported as undertaking this complimentary responsibility. Out of these were 189 NGOs, 241 FBOs and 278 CBOs all of them reaching a total of 1, 530, 822 children. In Nairobi Province, there are 350 Child Care Institutions and 261 Non-Formal Schools. Both the GOK and Charitable Children Institutions provide residential and non- residential care for the different categories of children in need.

## **2.2. Residential Care: Implications for reintegration of children**

While limited research has been done on post-discharge experiences of institutionalized children, much has been documented about institutional care for children. For example, the GOK (2006 b), recently released a compilation of 39 research abstracts focusing on the various aspects of institutionalization and rehabilitation of the various categories of children. However, none of the abstracts shows that adequate attention has been paid to the post institutional phase of rehabilitation.

Concerning institutional care, Triseliotis (1983) found that institutionalized youth have greater social impairment, exhibit more coercive interactions with adults and consider themselves (when compared with youth in families) as less loved, less looked after, less trusted and less wanted.

Deborah *et al* in Barth R., (2002), noted that care in orphanage settings have consistently been shown to have long-term psychological and social effects on children into adulthood. Studies by Quinton, *et al* in Barth R., (2002), have demonstrated that individuals placed in orphanages early in their lives are at a greater risk of living in poverty, developing psychiatric disorders, having difficulties in interpersonal relationships and having serious problems parenting their own children. The lack of opportunities for close consistent and caring relationships with adults in institutional settings has a significant impact on children into adulthood.

Tizard and Hodges (1978) noted that orphanages do not place much emphasis on children's connections with their parents and members of their extended families. They in fact see themselves as substitutes for children's birth families. That "family" role however, lasts only until children are discharged from the facility at which time, they are left to fend for themselves with no family to support them as they attempt to make the transition into adulthood and independence.

With regard to well being and educational outcomes for children in the institutions, Henggler *et al* (1998) found that a variety of social, ecological and facility based factors affect educational outcomes for older children and developmental outcomes for younger children. Concerning long term effects of institutional care, they further observed that institutionalized children attain lower education than those under family care, are likely to get into conflict with the law after discharge, have higher chances of drugs and substance abuse, higher likelihood to be dissatisfied with the level of contact with their siblings after discharge and lesser likely to have close friends. They have weak informal support and are less likely to positively assess their lives.

UNAIDS (2004:19-20) notes that orphanages, children's villages, or other group residential facilities often seem a logical response to growing orphan populations. Such institutions may be appealing because they can provide food, clothing and education, but they generally fail to meet young people's emotional and psychological needs.

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The report also notes that institutional approach could impede the development of national solutions for orphans and other vulnerable children. This failure and its long-term ramifications support the conclusion of a study in Zimbabwe that children are well served by programmes that keep them within the community surrounded by the leaders and peers they know and love.

The report also notes that traditional residential institutions usually have too few care givers and are therefore limited in their capacity to provide children with the affection, attention, personal identity and social connections that families and communities can offer.

It further notes that institutional care tends to segregate children and adolescents by age and sex and from other young people and adults in the communities. Instead of encouraging independence and creative thinking, it tends to promote dependency and discourages autonomy. For many adolescents, the transition from institutions to positive integration and self-support as young adults with the social-cultural skills and networks of connections in the community become very difficult. It further notes that, in most developing countries, the extended family and community are still the most important social safety nets and disconnection from these support systems greatly increase an orphan's long term vulnerability. Poorly prepared to integrate into community life, and with little knowledge of potential risks and how to protect themselves, these young people may feel hopeless and depressed and become involved in harmful activities

The report further notes that institutionalized children's vital links to local family and clan structures may well decay if institutional care is prolonged. Institutionalized orphans who suffer this loss of family identity and sense of community belonging are at a greater risk of losing future support networks than orphans in foster homes or other community settings.

Bruce (2005) reiterates the impact of missed out connection. He notes that children without touch, stimulation, and nurturing can literally lose the capacity to form any meaningful relationships for the rest of their lives. They may also suffer prolonged interpersonal discomforts that compound social and emotional problems.

### **2.3. Rehabilitation and exit strategies: Implications for physical, social and economic adjustment of children after reintegration**

According to the Oxford Advanced Learner's Dictionary of Current English (1987), to rehabilitate is to restore to a good condition or to a former position or reputation. To a delinquent, it is the act of bringing back to normal life through special treatment.

The GOK (2006 a) guidelines on exit strategies for Children and Youth in Need of Special Protection (CYNSP) defines exit strategies as methods used by CYNSP institutions to prepare the children and youth for self reliance without compromising the intended programme goals.

In the guidelines, the GOK observes that the challenge of exiting disadvantaged children and youth from institutions is as old as rehabilitation itself. In their endeavour to get rid of children and youth from institutions, most of the institutions wait upon opportunities to present themselves such as on completion of academic or training courses (where offered), while others move from employer to employer with the individual at hand shopping for prospects. Other institutions are compelled to unprocedurally send away individuals after they attain 18 years of age while others find fault in them in order to expel them. In other words, the GOK confirms that there lacks elaborate exit strategies in the operations of most of the child care institutions.

The same report notes that, although the Children Act (2001) recommends exit of children from rehabilitation after a maximum of 3 years, it stipulates no exit strategies thereof. Those institutions with exit strategies face the problem of inadequate resources, insufficient information and training to effectively exit the children from these institutions. The report also confirms that most of the strategies are not documented and where there are any, they are very sketchy and often there are no clear guidelines on the process of reintegration.

Other challenges identified by the report include;

- ❑ Lack of clearly laid down rehabilitation programmes.
- ❑ Difficulties in the inmates being accepted back to the community due to stigma of “inmates” or “small rascals.”
- ❑ Lack of opportunities for self advancement for the children after discharge.
- ❑ Dependency by the inmates on the institution.
- ❑ Lack of integrated and holistic approach in facilitating the exit process.
- ❑ The cost of reintegration.
- ❑ Difficulties in reintegrating AIDS orphans and taboo children due to high stigma.

The guidelines indicate that current rehabilitation of children should ideally focus on physical, psychological, moral and spiritual well being of children and youth. They further indicate that exit from children institutions is determined by a number of factors, which include:

- i. The Children Act (Cap 586 of 2001) that recommends exit after a maximum of 3 years or on attainment of 18 years (whichever comes earlier)
- ii. Institution's policies, goals, strategies and resources available
- iii. Readiness of children/youth to exit

The guidelines outline a variety of exit strategies. These include repatriation, equipping children with trading kits to start up own small enterprises, employment in both formal and informal sectors and reintegration back into formal schooling, all of which have own application strengths, weaknesses and challenges. For instance, the guidelines confirm that some children who are assisted with trading kits end up selling them to get quick money and a good number of them return to the streets. Some of those who secure employment end up not retaining it as they either quit or are dismissed. Those taken back to formal schools return to 'mother institutions' for further assistance.

In his study on psychological effects of confinement on juvenile offenders, Indalo revealed that upon reintegration back into the society, 83% of the former inmates would adjust to the society regulations. About 10% were not sure whether they would comply while 7% felt they would not fit in the society. The study also revealed that 82% of the inmates felt that the hope of leaving the institution gave them a positive hope in life while 3% said it made them feel hopeless. Further, 15% could not contemplate the idea of leaving the institution (GOK, 2006 b)

On the society perception of effectiveness of correctional facilities and intervention programmes for juvenile delinquency, Ayora notes that 65% of the juveniles sent to correctional facilities returned to the society reformed while 30% came back un-reformed (GOK, 2006 b)

On approaches, quality and challenges of rehabilitating children in Kenya, Mugo notes that given a choice to leave the institution, 83.3% of inmates would want to remain since the institution offers more opportunities of education and training. Further 8.3% would prefer to go home even though they admitted to benefiting from the institution while 4.1% would prefer to go home because they were essentially agonized by their stay at the institution. The report reveals that those who chose to



stay on anyway did so either because they lacked anywhere to go or dreaded the consequences of being elsewhere (GOK 2006 b).

From the foregoing discussion, Indalo and Ayora point to a pattern that contradicts the common perception that former inmates of children institutions do not fit in the society. This pattern can be explained especially using the experiences that most inmates go through in the institutions that only leave them with an option of going back to the society. For instance, Myers *et al* in a 1999 research reveals that abuse cases are higher in institutional settings than in other home settings. These experiences have led to escapism, injury both physical and emotional and even death. Children who have gone through abuse in the institutions will desire to leave and live among the community.

Confirming the above sentiments, a report by SC-UK (2004) revealed that children are subjected to corporal punishment in some centres; some feel that no one is interested in them and their concerns, many are unhappy, while for others, the carers have no time to talk to them. In other situations, children work most of the day, exhibit negative feelings towards the institutions, or are idle most of the time and don't get an education. They lack sporting facilities in some homes, some look dejected, have poor clothing, live in dirty facilities that are congested and understaffed.

The above are stimulating factors for a high desire to exit the institutions at all costs for most of the individuals. As such, they have to abide with social norms and regulations or else they are returned to the institutions.

In conclusion, the guidelines suggest that due to the challenges and gaps noted above, most of the children and youth exit the institutions with inadequate capacity to fit well as members of society. A collapse of the efforts is sometimes realised when such 'exited' inmates rejoin the streets, become criminals, return to drugs and substance abuse or develop dependency syndrome which makes it difficult for them to survive independent of the institutions from which they were released.

## **2.4. Theoretical Framework**

This study was guided by a number of theories. These theories explore the consequences of detachment or alienation of a child and how it affects the re-attachment and socio-emotional development of a child.

When children are separated from their parents by death and are consequently separated from their extended families into institutions, they are detached from family ties. In the institutions, most of them are subjected to abusive environments and this has implications for their life after reintegration back to the community.

### **Object Relations Theory**

The paradigm of object relations advances the concept of abuse by omission. The theory suggests that abuse by omission leads to negative consequences later in life. These include developing a sense of failure, loneliness and clinging tendencies, feelings of rejection, purposelessness, alienation and indifference (Katie & Sullivan 1995: 37-38). The Object Relations theory suggests that, these are the traits of children who have been omitted/denied physical support, safe touch, play, union, empathy, regard, role modelling, and balance of self and balanced parental care-taking.

### **Attachment Theory**

The Attachment Theory proposed by Bowlby (1944) suggests that attachment constitutes the most thoroughly researched and developed body of knowledge regarding specific care-taking ingredients and the consequent adjustment. Attachment refers to the nature of the relationship between caretaker and a child as well as the resultant personality style demonstrated by the child later in life. The theory suggests that, separation of children from the community and thereafter re-unification leads to personality of avoidance, dismissiveness, resistance, fearfulness and disorganization by the re-united child. It also notes that, insecure attachment predominates in populations of children who have experienced abuse. It further notes that these children are emotionally insulated, hostile, antisocial, lack empathy and often are uncomfortable with intimacy and tend to develop positive view of self but negative view of others. They also exhibit severe dependency, expression of desperate love, anxiety and depression as well as negative self-esteem. They feel socially inhibited.

are dissociative, unstable and have poor impulse control and experience hot and cold relationships.

Bowlby (1944) in his article "Forty Four Affectionless Thieves, their Characters and Home Life" noted that children who have experienced maternal separation and deprivation frequently develop an affectionless personality and engage in delinquent behavior. He went on to conclude that failure of super-ego development in these cases follows a failure in the development of the capacity for the object love (Grusec and Kuczynski 1997:55)

Elaborating on the same theme from a positive perspective in his 1951 report to the World Health Organization about the mental health of institutionalized children, Bowlby drew attention to the parent's role in expediting a child's capacity for self-regulation and openness to socialization. He notes the significant role of parents in the development of the ego and the super-ego of their children from infancy to maturity. In this report, Bowlby notes that ego and super-ego development are inextricably bound up with the child's primary human relationships; only when these are continuous and satisfactory can his ego and super-ego develop (Bowlby 1951:52). He notes that secure attachment patterns are associated with more cooperative, pro-social child behavior both in the context of child- parent relationship and with others.

Katie and Sullivan (1995:49) citing Ziegler (1954) notes that, the theme of a person's story and to a large extent, the fundamental success or failure of his or her entire life is established in early attachment and bonding with his/her environment. He points out that attachment and bonding may well be essential keys to explaining the most fundamental psychological and social problems. Referring to Bowlby's "Inner Working Models" he argues that the model has been found to influence a child's perceptions from early childhood into adulthood. He also notes that a child's experiences in early life predict quality of the attachment he/she develops with her own children.

Bowlby also refers to instincts as a major influence upon attachment. When children are put under residential care, their primary instincts are survival, to socially adjust and adapt to the new environment. Deviations in the evolutionary adaptedness, as

Bowlby describes instinctive behaviors that don't achieve the desired results, can produce maladaptive behaviour patterns. When this occurs, a negative cycle develops with the child slipping further and further away from instinctive goal of connection. After reintegration into the community, the child can easily become a misfit due to the lost connection.

Bruce (2005) reiterates the impact of missed out connection. He notes that children without touch, stimulation, and nurturing can literally lose the capacity to form any meaningful relationships for the rest of their lives. They may also suffer prolonged interpersonal discomforts that compound social and emotional problems. These may include developmental delays (physically, emotionally, cognitively), eating disorders (hoarding food, anorexia nervosa), soothing behavior (very primitive, immature and bizarre soothing behavior), emotional malfunctioning, inappropriate modelling, aggression (lack of empathy, poor impulse control, detached and cold).

### **Macro Theory of Parenting**

Proponents of Macro Theory of parenting or the macro model of parenting demonstrate that parenting practices determine childhood and consequently adulthood social behavior. Its proposition is that parenting practices and contingencies directly control both appropriate social and deviant behaviors of the child. In particular Dix (1991) suggests that families with problem children are characterized by high levels of conflict and negative emotions together with low levels of warmth and positive emotions as is mostly the case in children institutions. In his study, Feshbach (1979) notes that aggressive children are often found to be angry and frustrated. The correlations presented in these reviews confirm the hypothesis that frustration and anger are major causes of aggressive behavior. The theory assumes that lack of parental warmth leads to deviant behavior in children. It advances this argument by noting that, as the affected child moves into the elementary school grades; he/she usually has selected or formed a deviant peer group, which eventually transforms from engaging in childish antisocial acts to juvenile offences.

Other theorists have affirmed Bowlby's Attachment Theory and his subsequent contribution towards the Object Relations theory. Garelli (1989) observes that conflictual and ambivalent behaviour are indicative not of normal development but of

difficulties in the mother-toddler relationship. He notes that all central concepts of Bowlby's schema-object relations, separation anxiety, mourning, defence, trauma, sensitive periods in early life are the stock-in-trade of psychoanalytic thinking and until recently, they have been given but scanty attention by other behavioural disciplines.

This is based on the belief that observation of how a very young child behaves towards his mother, both in her presence and especially in her absence can contribute greatly to our understanding of personal development. When a child is removed from the mother either by a stranger or through orphanage, young children respond usually with great intensity; and after re-union with her parents or community, they show commonly either heightened degree of separation anxiety or else unusual detachment.

In his critique of the Bowlby's theory, Garelli observes that Attachment Theory distrusts memory, which is a key component of Psychoanalytic thinking. Instead, it tends to work from an end product backwards. In this case, physical data are derived from studying, in the analytic setting a personality more or less developed and already functioning more or less well. From those data, the attempt is made to reconstruct the phases of personality that have preceded what is now seen. It entails taking an actual event or experience deemed to be potentially pathogenic to the developing personality.

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To illustrate the above critique, where other psychoanalytic researchers work retrospectively trying to reconstruct a case's infancy, Attachment Theory is determined to see by its "own eyes" what goes on during infancy and early childhood directly, dispensing with untrustworthy informants. For example, Attachment Theorists interview a mother-to-be, or for that matter, anybody else and ask her about her relationship with her mother. From her responses and the way they are made, they infer the kind of early attachment the adult must have had with her own mother as they are convinced patterns of attachment endure unalterably through out life.

From the foregoing critique, it is evident that Attachment Theory and the Object Relations Theory do not investigate the process contribution of detachment but only

relies on the outcome of the same to describe possible impacts of detachment of children from parents.

This may lead to inaccuracy in describing the prevailing personality traits as this may be influenced by other factors other than the bonding or lack of it between children and parents. Thus, their contribution can be over-emphasized.

Theoretically therefore, the study aimed to examine the proposition that early childhood experiences determine their later life social adjustment. This derives from the apparent consensus within the reviewed literature that institutional child-care not only tends to result in some forms of deprivation but also exposes children to experiences that have both short and long-term developmental consequences.

## **2.5. Research Propositions**

The study aimed to validate or nullify the following propositions;

1. Institutional care for orphaned children enhances their effective reintegration after discharge.
2. Institutional care for orphaned children hampers their effective reintegration after discharge.
3. Societal attitudes to orphaned children discharged from childcare institutions adversely affect their social reintegration.
4. Societal attitudes to orphaned children discharged from childcare institutions do not adversely affect their social re-integration.

## CHAPTER THREE: METHODOLOGY

### 3.1. Site Description

The study was undertaken in Nairobi Province. A total of four study sites relevant to the study were visited for purposes of data collection. These included child-care institutions, Department of Children Services, locations where discharged individuals lived and children associates who had relevant information to the study. Orphaned children formed the units of observation. The researcher was interested in their life after reintegration into the community and their ability to cope with the same. The rationale behind this location was mainly cost related, proximity of the Province to the researcher and availability of the institutions with diverse structural and value orientations to facilitate comparisons.

### 3.2. Sampling Procedures

The study focused on institutions providing residential care to children and specifically orphans. In selecting the institutions, a factor also considered was the existence of reintegration programmes for the children. Four institutions were consequently selected. They included (1) Government sponsored and run, (1) Christian sponsored and run, (1) Muslim sponsored and run and (1) individual sponsored and run. All the institutions were drawn from Nairobi. However, the initially selected government institution provided only one case. This led to identification of a second similar institution which subsequently provided another one case. In order to obtain a sizeable sample from government institutions, more respondents with background links to government institutions were identified using snowball technique and were subsequently interviewed without visiting their former institutions.

Selection of these institutions was based on the nature and ethical orientation of the institution and how this was likely to impact on the reintegrated children. The focus was on sponsorship and management which would be classified as individual sponsored and managed, Christian sponsored and managed, Muslim sponsored and managed and government sponsored and managed child care institutions. A purposive sampling method was applied to identify the institutions as well as key informants. Purposive sampling technique allowed the researcher to identify cases that would

yield the required information with respect to the objectives of the study. The general criterion used was the availability of institutions that had both residential care services and reintegration and follow up programs.

### **3.3. Sample of Respondents**

The study aimed to examine a minimum of 8 and a maximum of 12 respondents from each of the sampled institutions. These would include individuals aged 15 years and above, who had stayed in the institution for not less than 3 years. Others would be key informants including 4 child-care workers from the sampled institutions, 2 Children Officers and 4 children associates.

A total of 39 former institutional inmates were either interviewed or filled a structured questionnaire administered to them. Four child care workers were interviewed, 4 guardians and 2 children officers. A total of 49 respondents representing a response rate of 90.7% provided data that was utilized in this study with a deficit of 5 respondents representing 9.2% default rate.

### **3.4. Data Collection Methods and Tools**

A combination of data collection methods and tools were utilised in this study. The choice of methods was guided by the nature and type as well as sources of the data to be collected. For example, it involved a number of data collection methods including key informants interviews, case studies, direct observations, review of secondary data and photography.

The key informants interview approach enabled the researcher to identify and reach respondents known to have residential care experience and thus enabled the researcher to develop an interview guide specifying themes related to the research questions. Interviews were also conducted with accessible primary respondents. In this case, attention was given to the respondents' prior experiences under residential care and how they had subsequently impacted on their post discharge social life.

Direct observations were made of settings, appearances and behaviour that were deemed relevant to the study. It involved observing the respondents during the interview to elicit vital information that augmented the data collected through



interviews and also to avoid double interviewing. Observation focused on among others the respondent's physical appearance, ability to express themselves, their willingness to respond to the interview questions and their economic and social engagements.

Case studies were recorded from individuals reintegrated after residential care. These also included extensive direct quotations from the subjects on their experiences after discharge. Relevant literature and data was reviewed and incorporated to supplement data and information obtained from other sources and especially from respondents.

To increase chances of reaching many respondents, the researcher used a number of data collection tools. These included an interview guide as well as self-administered questionnaires. The researcher also endeavoured to capture data through shooting of photographs of relevant cases in order to supplement data collected through other methods as discussed in section 3.4 above.

Where respondents were not accessible, they filled a questionnaire. This was especially the case where respondents were only available at night yet accessing their residence locations posed security concerns especially at night. Such was the case with most of the respondents drawn from Good Samaritan Children Home, where most of them live in Mathare Valley settlement. The questionnaire however ensured similarity of questions administered targeting to record experiences of those who had information relevant to the study. The questionnaire contained questions with similar themes as those used in the interview guide. This was to ensure uniformity, reliability and validity of data collected (see appendices 1 & 4).

The self-administered questionnaire and the interview guide in both cases captured both qualitative and quantitative data relevant to the study. Open-ended questions were mainly used to enable the respondents give more descriptive data while close-ended questions mainly generated quantitative data (see appendices 2 & 3).

### **3.5. Methods of Data Analysis**

Due to the descriptive nature of the data collected, data analysis was mainly qualitative. Data collected was checked for errors before it was coded manually using

the study's major variables from the interview schedules. It was then tabulated, put into percentages and then descriptive analysis of the data was undertaken. Percentages were used in presentation of data together with tables in order to give a clear picture of the findings. Percentages were also used to organize and interpret the data quantitatively.

### **3.6. Problems encountered in the field and how they were tackled**

The researcher during the process of data collection encountered a number of problems. These included suspicions where respondents suspected the researcher would publicize the findings hence exposing them to stigmatization.

Threat of victimization was another challenge. Respondents feared that the researcher would inform the institutions about the feedback thereby jeopardising their relationship with the institutions. This was worse for those who were still receiving support from the institutions.

Some primary respondents especially those who had not secured any employment or other survival opportunities expected the researcher to commit herself to assisting them after the research process. This was especially difficult because the researcher would not categorically refuse but chose instead to be evasive or vague in responding to such requests.

The other problem was the primary respondent's unwillingness to share their experiences with the researcher possibly on account of fear of "opening up of a healed wound." This was especially the case where discharged individuals went through traumatic experiences while in the institutions, or after discharge.

Traceability of the inmates was a major challenge during the data collection process. Some lived deep in the informal settlements (slums – see photograph 1) while others could not be traced on account of loss of their contacts and addresses. Institutions especially Government run ones did not have much to offer in terms of tracing the discharged inmates.

To overcome the challenges, the researcher reassured the respondents that the research findings would be used solely for academic assessment and programming for institutions and would not be publicised in any way that would expose an individual's identity. Names of the respondents were not recorded during the interview and fictitious names would be used in the reporting if need arose.

In tracing the respondents, the researcher worked with the sampled institutions for guidance on how to locate the reintegrated children. Sampling of the respondents was also done in a way that only those whose whereabouts were known were considered. Innovative skills including snowball research technique were used to increase chances of tracing reintegrated individuals in the community. Also applied was identification and utilization of research assistants from the targeted communities to guide the researcher on where to find reintegrated individuals.

To overcome suspicion and unwillingness of respondents to open up, the researcher applied skills in child development and communication to ensure that a rapport was struck with the respondents in order to secure their cooperation in the study.

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## CHAPTER FOUR: FINDINGS AND DISCUSSION

### 4.1. Background

Though only 4 institutions were initially identified as sources of data, respondents were eventually drawn from 8 institutions with the researcher visiting a total of 5. Five out of the 8 institutions from which the respondents were drawn were government sponsored and run while 3 were charitable children institutions.

This expanded coverage for participating government institutions was attributed to inability of the selected institution to provide enough cases for consideration. The initial one had only provided one (1) out of the required minimum 8 cases. This led to selection of a second similar institution which subsequently provided only one (1) more case. In order to obtain a sizeable sample from government institutions, more respondents that were linked to government institutions were identified using snowball technique and were subsequently interviewed without visiting their former institutions. The additional cases however represented three (3) institutions.

### 4.2. Socio-economic and demographic characteristics of the Sample

The sample comprised of males and females of different ages as illustrated in table 2 & 3 below. It also comprised of primary respondents (former inmates) and key informants drawn from different institutions as illustrated in tables 4 & 5.

*Table 2: Classification of primary respondents (former institutional inmates) by age*

Age	Number	Percentage (%)
Below 15 years	2	5.1
15-21 years	15	38.5
Above 21 years	22	56.4
<b>Total</b>	<b>39</b>	<b>100</b>

A total of 94.9% of the respondents were above the age of 15 years while 5.1% were below 15 years corresponding to 37 and 2 primary respondents respectively. The two

respondents interviewed who were below 15 years represented unique cases. One represented a case of a former inmate who after three years was discharged from an institution and was totally rejected by the community where she was expected to be “reintegrated”. She was rejected inspite of the willingness of an aunt who had offered to live with her. The rejection by the community compelled her to go back to the institution to continue with her education where she still was by the time of the research.

The second represented a case that illustrated acceptance of a former inmate into the community and how it subsequently gave him an opportunity to go back to school. The respondent sat for Kenya Certificate of Primary Education in November 2006 and was hoping to continue with secondary school education in 2007. These two cases were a clear illustration of how community reaction can influence social reintegration of discharged former institutional inmates.

Respondents above 21 years were mainly drawn from charitable children institutions. They also represented unique cases of individuals who had over-stayed in the institutions. Some had stayed for nine or more years and on discharge, they were already above 21 years yet they had experience and relevance to the study.

*Table 3: Classification of primary respondents (former institutional inmates) by sex*

Sex	Frequency	Percentage (%)
Male	24	61.5
Female	15	38.5
<b>Total</b>	<b>39</b>	<b>100</b>

A total of 61.5% of the primary respondents were male while 38.5% were females. This could be explained by the varying numbers of admission between boys and girls into the institutions with most of the girls opting for domestic labour other than being put in the institutions.

In terms of traceability, the number of primary respondents varied from one institution to the other as illustrated by table 4 below;

**Table 4: Classification of primary respondents (former institutional inmates) by Institution**

Institution	Nature of Institution	Frequency	% of total
Mama Fatuma Children Home	Muslim	14	35.9
Rescue Dada Girls Rehabilitation Programme	Christian	9	23.1
Good Samaritan Children Home	Individual	10	25.6
Kabete Rehabilitation School	Government	1	15.4
Nairobi Children Remand Home	Government	1	
Lang'ata Reintegration Centre	Government	1	
Dagoretti Juvenile	Government	2	
Industrial Area E Block	Government	1	
<b>Total</b>		<b>39</b>	<b>100</b>

The above pattern of traceability of respondents from both government and charitable children institutions was attributed to the nature of follow up programmes by both institutions. The study revealed that unlike the charitable institutions, the government institutions did not put any emphasis on follow up of discharged individuals as one Manager from Kirigiti Girls Rehabilitation School remarked;

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"It is very difficult for us to follow up reintegrated cases because they are committed to our institutions from all over the country and once discharged, one cannot really know where to trace them."

The above remark shows that whereas it is difficult for government institutions to keep track of individuals discharged from their institutions, charitable institutions have maintained close links with their discharged cases with some serving as employees of the same institutions or regularly visiting the institutions. This makes it relatively easier to trace former inmates of charitable children institutions.

The study also drew data from secondary respondents who had relevant experience. These included Government Children Officers, Child Care Workers and guardians as illustrated in table 5 below;

**Table 5: Classification of key informants (children officers, guardians, child care workers)**

District Children Officers	2 (Pumwani & Central divisions)
Parent/Guardians	4
Child Care Workers	4
<b>Total</b>	<b>10</b>

### 4.3. General findings on reintegration of children

#### 4.3.1. Issues Addressed by Rehabilitation Programmes and Determinants of Discharge

Child Care Workers reported that there were a number of issues addressed by reintegration programs for children. These included behaviour change in relation to discipline cases, linkage of children with parents and or guardians, pastoral needs of children, preparation of summary assessment reports for review by the District Children Officers (for government institutions) and facilitation of reconciliation between the child and the community. The programmes also assessed the education needs of discharged children, psychosocial stability of the parents and job placement among others. Concerning determinants of discharge, they identified the following;

- i. Proven behaviour change (in relation to discipline cases)
- ii. Discretion of court (for government institutions)
- iii. Expiry of committal orders (where they exist)
- iv. When the Environmental Adjustment Plan has been approved by the District Children Officer (for government institutions)
- v. On completion of grade exams
- vi. When the family has been identified and is willing to take back the individual
- vii. If the individual completes training and secures a job

In both government and charitable children institutions, monitoring of discharged individuals usually involves establishing links with Area Administration Officials such as chief or with the area Children Officer for feedback. They also monitor through feedback from parents and or guardians or through home visits. The duration of monitoring varied from one institution to the other. Of importance is the fact that

Children Officers only monitor cases discharged from Government institutions while the duty of monitoring those from charitable children institutions is purely determined and executed by the institutions themselves.

#### 4.3.2. Duration of stay in the institutions

The duration of stay for inmates in the institutions varied from one category of institution to the other. While the Government institutions ensured that children were discharged on expiry of court order or attainment of 18 years or after 3 years (see GOK, 2006 a), charitable children institutions did not seem to have specific guidelines on when to discharge children. For example, table 6 below illustrates the duration of stay of inmates in the charitable children institutions;

*Table 6: Duration of stay in charitable institutions*

Duration of stay	Frequency	Percentage (%)
1 Year	0	0
2 Years	1	3.0
3Years	1	3.0
Above 3 Years	31	93.9
<b>Total</b>	<b>33</b>	<b>100</b>

From the table above, out of the 93.9% of the individuals who stayed for more than three years in the charitable children institutions, one had stayed for 9<sup>3/4</sup> years and another for 6 years. Two had stayed for 5 years each while another one stayed for 15 years and yet another one for 19 years.

In the government institutions, only one of the interviewed cases had stayed for over 3 years. He stayed for 5 years in the institution. This was a discipline case, whose duration of stay was extended by the court due to failure to reform. The rest had stayed for less than 3 years as illustrated by table 7 below;



*Table 7: Duration of stay in Government institutions*

Duration of stay	Frequency	Percentage (%)
1 Year	3	50.0
2 Years	2	33.3
3 Years	0	0
Above 3 years	1	16.6
<b>Total</b>	<b>6</b>	<b>100</b>

Adherence to strict guidelines for duration of rehabilitation and discharge of institutional inmates in Government institutions ensured that inmates did not overstay the stipulated period. This is also as a result of close monitoring by the Children Officers on children undergoing rehabilitation and their expected dates of discharge.

#### **4.3.3. Mode of resettlement after discharge**

As table 8 below indicates, the mode of resettlement of discharged inmates varied from one inmate to the other. A higher percentage of the inmates settled alone (58.9) compared to the other modes of settlement such as settling with relatives (7.6), settling back home (17.9%) and others (15.4% including settling with a friend or going back to the streets).

The choice of where former inmates could settle was attributed to a number of factors. Such included the willingness of the community to accept the inmate back after discharge as indicated by 5% of the respondents who noted that the community barred them from inheriting any property. Other factors included their orphanhood status with 17.9% going back home since one parent was still living and could therefore host them.

The inability to establish social support through friendship led majority of the respondents to either settle alone or return to the streets or even turn to crime (15.4%) due to frustration. Those reported to have obtained useful skills settled alone and secured formal employment were 20.5% while those who had started their own small enterprises were 2.6%.

*Table 8: Mode of settlement by inmates after discharge*

<b>Mode</b>	<b>Frequency</b>	<b>% total</b>
Went back home	7	17.9%
Settled with relative	3	7.6%
Settled alone	23	58.9%
Others	6	15.4%
<b>Total</b>	<b>39</b>	<b>100</b>

#### **4.4. Key Findings**

##### **4.4.1. Consequences of shift from full to reduced economic support**

Objective one of the study sought to establish the consequences of shift from full to reduced economic support to former institutional inmates after discharge. The study revealed that many individuals do not realize their economic and social goals after discharge. 12.8% had hoped to pursue further education and training while 32.8% had hoped to pursue professional careers such as medicine, engineering, business management studies and journalism. Others had hoped to pursue law, teaching, tour guide and professional football. A further, 13% had hoped to start their own enterprises, while 5% had hoped to start own homes and 3% to secure employment in the public sector.

Out of these respondents, only 23.4% realized their goals while 66.6% did not. About 10% turned to crime or went back to the streets as was reported by some respondents. Out of those who achieved their economic and social goals, 20.5% were able to secure employment either with the public or private sector while 2.6% were self employed.

Absence of or unsustainable institutional support to discharged individuals accounted for the high percentage of unrealized economic and social goals (66.6%). This was evident from the high percentage of respondents who indicated that the institutions had failed to support them despite the fact that they did not have families to return to

after discharge and that they also had inadequate skills to enable them secure jobs. This was clearly illustrated by one respondent who presented the following case;

### Case Study 1

"I stayed in the institution for 9 years within which I learnt a number of valuable skills. I have also kept the Christian faith I learnt in the institution although to some of us, it was more by coercion than a choice to be religious. With the coming on board of a new Coordinator, I was asked to leave the institution on grounds that I had outgrown my stay. I went out not knowing where to go yet I was a total orphan. No efforts to assist me to settle were made and I had to use whatever means to raise money to rent a room thanks to an old friend who came to my rescue. To date, I haven't been able to secure a job and the institution hasn't made any efforts to support me"

From the case study above, it is evident that child care institutions did not have a clear framework of dealing with inmates who were ready for discharge or those who had been discharged. For example, as indicated by the case study, the dismissal of an inmate at the whims of the Institution Coordinator is a clear expression of lack of an institution policy on means and ways of handling special cases. The case also illustrates the nature of orientation that inmates received. For example religious values taught to inmates and not practiced elsewhere after discharge is a clear indication of lack of space for inmates to express the kind of meaningful values that they would prefer while undergoing rehabilitation. Furthermore, the case also clearly indicates lack of support for inmates after discharge, which has left most of the discharged individuals with no alternative but to live in the slums or on the streets.

Table 9 below describes the availability or lack thereof of institutional support to discharged inmates. From the table, 71.8% of former inmates confirmed not receiving any institutional support after discharge while 28.2% received. The support received included sponsorship for further education, linkage with employers, and employment by the institution or economic support for the parent or guardian who received the individual back after discharge.

**Table 9: Institutional support to realize economic & social goals by discharged individuals**

Support	Frequency	% of total
Available support	11	28.2
No support	28	71.8
<b>Total</b>	<b>39</b>	<b>100</b>

The economic implications of the 71.8% of the unsupported cases is the high percentage of unrealized economic and social goals (66.6%) as illustrated by table 10 below;

**Table 10: Distribution of achievement or failure to achieve economic & social goals**

Achievement or none	Frequency	%
Achieved goals	9	23.1
Un-achieved goals	26	66.6
Gone back to crime, streets	4	10.3
<b>Total</b>	<b>39</b>	<b>100</b>

The high percentage of un-achieved economic and social goals translated to 87.2% of the total respondents interviewed experiencing major challenges in securing affordable accommodation, meeting the costs of transportation, food, accessing medical services, supporting families or negotiating for employment opportunities as indicated in table 11 below;

**Table 11: Levels of challenges in securing basic services**

Challenges in accessing basic services	Frequency	Percentage (%)
Inability to secure services	34	87.2
Ability to secure services	5	12.8
<b>Total</b>	<b>39</b>	<b>100</b>

From table 11 above, the high degree of challenges the former inmates encountered especially in trying to secure employment coupled with high costs of transport,

medication, accommodation and food left the discharged individuals with very few options. As one respondent observed;

"I live in a very small room shared by 8 of us and located in a slum area with deplorable sanitation services (See photograph 1 below);



**Photograph 1: Shelter conditions for some former inmates in Mathare Valley**

.....The cost of treatment is unbearable. We have organized ourselves (former inmates) into a group to enable us contribute towards treatment fees for one another when need arises"

Confirming this situation, another respondent who was once hospitalized noted;

"I was once admitted to a National Hospital and had to escape due to lack of money to meet the hospital bill."

From the remarks above, it is clear that discharged individuals do not readily find space or opportunities for any meaningful economic engagement on discharge from institutions. This pushes them into cheap accommodation and more often than not, they cannot access medical care or other basic requirements. This has pushed them further into living conditions unfavorable for human settlement and more so to criminal activities in order to meet their daily needs.

The inmates blamed lack of employment on among other things;

- i. Inadequate skills and experience to enable them secure jobs. This was attributed to the inadequate levels of preparation of the children for discharge by the institutions and the subsequent negative attitude by employers towards the discharged inmates.
- ii. Difficulties in securing identification documents necessary for job placement (30.8%). These include National Identity Cards, Passports, Birth Certificates and Academic Certificates. In this regard, one respondent remarked;

"Since I had neither a job nor a National Identity Card, there was no other option but to collect waste paper, plastics and scrap metal then sell them for some money"

This clearly describes the legal challenges that the former inmates face when they leave the institutions. The government requirements that individuals applying for identification documents provide their parent's identification documents in order for them to secure own identity cards has left most of the orphans discharged from charitable or government run children institutions without any form of official identification. This makes it difficult for even those with technical skills to secure employment since the national identity cards are a prerequisite in any formal employment.

- iii. Lack of job placement and linkage programmes in child care institutions. This was emphasized by a respondent who observed that:

"Getting a job is by who you are, where you come from and who has brought you for the job and that is so disadvantageous to us because we have no parents or relatives to support us and so we are left out."

From this expression, there are other underlying challenges that face the individuals seeking employment. Their disconnection from society makes them lose any formal or social networks and linkages that are so critical in the post-institutional life. Once out of the institutions, they find it difficult to find employment due to the nepotism that is so rampant in the job market. This makes it difficult to fit anywhere or to competitively secure formal employment.

- iv. High professional skills and experience required in the job market.

Other factors blamed for failure of discharges to achieve economic and social goals include;

- v. Poor or lack of planning for discharge of children from care institutions
- vi. Inadequate career guidance during institutional care
- vii. Lack of or inadequate after care programmes in child care institutions

Despite the high rate of failure to achieve economic and social goals, 84.6% of the respondents indicated that they still had not given up and given an opportunity, they would still pursue the same goals. However, 10.3% of the respondents were found to have given up while 5.1% were not sure whether they would still pursue the goals or not.

#### **4.4.2. Impact of negative community perceptions on economic well being of discharged inmates**

Due to their relative financial deprivation, many people view discharged individuals as potential liabilities. In particular, negative perceptions by landlords and tenants hinder discharged individuals from securing housing on return to the community as one respondent noted;

"The community has given us no opportunities at all. They think that we are thieves. They associate people who have been brought up in children homes with laxity and as people who can do nothing in life except stealing and that's not true."

This attitude has posed a major challenge to the economic well being of discharged individuals. Negative community attitudes towards the discharged individuals often aggravate their already depressing circumstances and tend to make them vulnerable to unemployment. Further, the community tends to view the former inmates as worthless. These circumstances are not only traumatic but also often erode the discharges sense of self confidence, which is so vital in facing the challenges of life.

#### **4.4.3. Impact of education and training on economic well being of discharged individuals**

Most respondents blamed their lack of professional skills and knowledge on inadequate education and training in most of the institutions. Inadequate teaching and instruction materials within the institutions was also cited to play a role. On discharge, most of the individuals failed to get further sponsorship to enable them complete education and training. It was pointed that this often leads to a vicious cycle of poverty among the discharged individuals and their subsequent return to crime. Further, it was suggested that the community contributed to this situation through their unsupporting attitude towards the discharged individuals as confirmed by one respondent who remarked;

“When I went back home, I was taken back to school. Teachers there were hostile to me and I had to be taken back to the center (institution) to complete my education. I'm there to date”

The action of rejection that most discharged individuals have lived with has been a major drawback in their development after discharge. It has left some of them homeless while others have been rendered familyless. This has further aggravated the situation since the efforts that the institutions made to rehabilitate the individuals are sometimes rendered futile. Rejection also tends to make the individuals hostile towards the society as a way of hitting back.

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With regard to education and employment, inadequate or lack of training has barred most of the individuals from securing jobs. This is evident from such observation by one respondent who noted that;

“Yes. I wanted to look for a job so that I can establish myself. But I had no skills for any position and also my career in education was not good. So I didn't have any papers to prove. There was nobody who was ready to support me”

This further indicates the lack of effective institutional frameworks for rehabilitating the individuals. Most of the discharged individuals lamented the lack of a structured system of education or skills building within the institutions. As a result, most of the individuals would be discharged without any skills that they could rely on to earn a



living. As such, most would end up in the informal market or take up odd jobs to try and make ends meet.

#### **4.5. Consequences of interrupted social relationships on discharged inmates**

Objective two of the study sought to establish the consequences of interrupted social relationships on discharged inmates. The study revealed that detachment of individuals from the society into the institutions and back to the society had major implications for their ability to re-establish relationships with those found in the community. These particularly related to marriage relationships, their personality, independence and negotiation skills as elaborated below.

##### **4.5.1 Impact of interruption on ability to make friends**

Among the interviewed former institutional inmates, 87% were able to re-establish friendship with relatives, former institutional inmates, or old friends. In other cases, they were able to make friends with other criminals, fellow street families and work mates. However, only 76.9% were able to maintain the friendships. 12.8% former inmates were not able to re-establish friendship within their communities. This was mainly blamed on the negative community attitude towards the discharged individuals as one respondent indicated;

"Because I came back with a different attitude and appearance that made them not to understand me, they did not want to associate with me"

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Due to contact with different people found in the children institutions, inmates are likely to learn some behaviors that may not look normal within the community. This may involve language, interpersonal skills or other life skills. As a consequence, readjusting to the community may pose a challenge to an individual on discharge and the individual may fail to fit in well. As a result, the discharged individual may get frustrated and feel out of place. This may eventually result in aggressive behavior in an attempt to assert oneself.

Table 12 illustrates ability or lack thereof to re-establish friendships;

*Table 12: Classification of respondents by their ability to establish friendship*

Status	Frequency	Percentage
Able to make friends	34	87
Unable to make friends	5	12.8
<b>Total</b>	<b>39</b>	<b>100</b>

Former inmates who did not secure jobs would not easily make friends. Their peers feared that they would consequently depend on them for economic survival. The community also looked at the former inmates as bearing the institution label. This rejection made some inmates go back to crime (5%), to the streets (7.6%) or simply became drug addicts (2.5%) due to frustration.

#### **4.5.2 Impact of interruption on motivation to establish marriage relationships**

The study revealed that out of the sampled former inmates, only 15.3% would or had considered engaging in marriage while 84.6% had no interest in marriage as illustrated by table 13 below;

*Table 13: Classification of respondents by willingness to establish marriage relationship*

Established or desired to establish marriage relationships	Frequency	Percentage (%)
Had desire to marry	6	15.3
Had no desire to marry	33	84.6
<b>Total</b>	<b>39</b>	<b>100</b>

The high rate of demotivation to marry was blamed on a number of factors. For example, one respondent said;

"Parents despise young men from institutions as marriage partners for their daughters"

While another one said;

"It becomes very difficult for a girl to get a man to settle with especially with a background of rehabilitation. Few men will want to settle with a former street girl. They say it is difficult to associate with them because of the negative beliefs and attitudes about the institutions leading to a lot of mistrust for people associated with them. Men simply despise girls from institutions as marriage partners"

As illustrated by the remark above, disregard of individuals from institutions by the community and the subsequent rejection often poses a major challenge in their effort to re-integrate into the community. Rather than accepting back and assisting the discharged inmates to settle, majority of the community members tend to despise them. This results in a state of rejection leaving majority of them unable to secure marriage partners from the community. This eventually breaks the continuity of the family lineage.

Lack of income was also cited as a cause of discouragement for most individuals especially young men who would be interested or eligible for marriage as noted by yet another respondent;

"You cannot go for a partner when you have nothing to eat, no shelter and have not satisfied yourself to enable you support someone else although I would like to marry and have a family"

Negative community attitudes also hindered discharged individuals from securing economic opportunities in the community. Further, lack of adequate skills upon discharge rendered most discharges unemployable. This made it difficult for them to consider or begin family life due to their inability to support the family. Such was the case with a number of respondents interviewed during the study.

#### **4.5.3. Impact of interruption on personality**

Personality problems tended to arise as a result of lost confidence on how to relate with people especially following inmates discharged from institutions. One guardian with 2 reintegrated cases indicated that one was very outgoing while the other was very reserved. The outgoing one was able to easily make friends while the reserved one was not. The guardian said;

"It was very difficult for the girls to accept us as their foster parents or even treat us with the respect that a parent deserves. They took long to identify with our family making us feel like the efforts we made were fruitless"

As indicated earlier that 87% of discharges were able to re-establish relationships, the outgoing case in this personality context describes the dominant pattern of character among the discharged individuals.

#### **4.5.4. Dependency without responsibility**

It has been observed that institutional life exposes children to consistent supply of basic requirements such as food, clothing and other utilities especially those with sustained financial support from Government or other development agencies. Thus individuals who re-enter society and are lucky to get foster parents fail to appreciate the difference between the institution and the home where supply of needs may not be consistent. This often leads to strained relationships between the individuals and their foster parents as reported by one guardian;

"They demand for essentials as though it was their right, not caring whether it was possible to meet their demands. This could be partly due to over-emphasis on the children's rights at the institutions without much emphasis on their responsibilities. Furthermore, their needs in institutions are generally met through annual budgets provided by donors as opposed to family budgets that are not always adequate"

#### **4.5.5. Societal perceptions on discharged persons' rights to property**

About 5% of the interviewed former inmates reported that the society barred them from inheriting property left behind by their parents who died while they were still in the institutions. They indicated that some family members refused to recognize children as part of their family when they are committed to the institutions making it very hard for them to claim any property once they are discharged. This problem is worsened by the former inmates' inability to raise legal fees to pursue court processes on inheritance whenever they are necessary.

#### 4.5.6. Institutions and homelessness

Once children leave parental homes for institutions upon being orphaned or when parents die before children are discharged, they rarely have anywhere to return to on discharge. Confirming this, one respondent observed that;

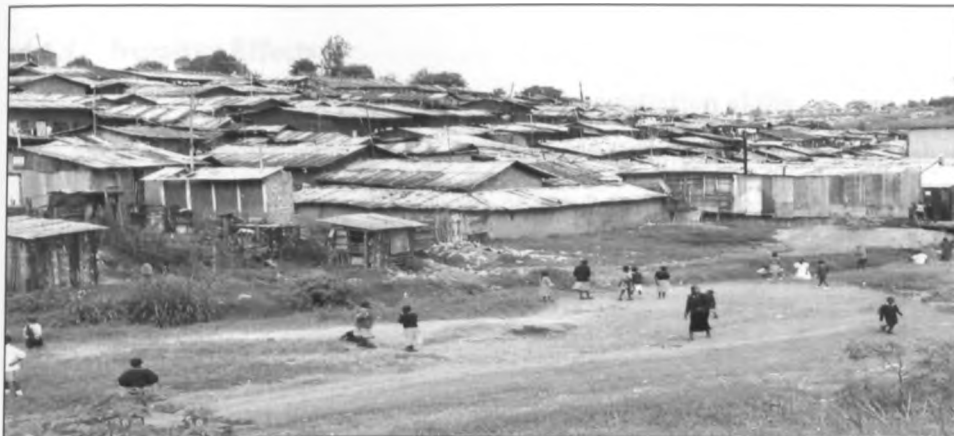
"After discharge, I had nowhere to go and no one was willing to take me in. So I decided to join the street boys at Mesora Supermarket at Buru Buru shopping centre and we would go and fetch wasted food from dustbins for our survival"

On the same issue, yet another respondent observed that;

"I have lived in the slums since I left the institution. I could not go back home after discharge since the community could not allow me back. The slums are congested and lack basic facilities. Movement within them is difficult. The population is high and housing is of very poor quality"

The state of homelessness among the discharged individuals has been aggravated by the community perceptions about institutionalized individuals describing them as worthless or not deserving community privileges. Further, lack of an income has left majority of them unable to secure adequate accommodation or purchase their own pieces of land. This stems from the gaps in institutional frameworks that fail to prepare the individuals adequately for discharge. Such frameworks need to link the individual with both the community and the job market for effective reintegration.

Housing conditions for most of the interviewed respondents were poor since most of them lived in the slums. Accessibility was difficult as well as traceability due to the disorganized nature of the housing as illustrated in photo 2 below;



**Photograph 2: Nature of settlements where most inmates lived in Korogocho Slums**

The photograph above indicates the squalid conditions in which some of the discharged individuals live, and illustrates the socio-economic status of some of the former inmates in the community after discharge. Houses are congested and unplanned, with no access paths and surrounded by garbage and often with poor or no sanitary facilities. It is also an illustration of economic disempowerment that confronts the discharged inmates. Over 70% of the interviewed respondents were found to live in the slums.

#### **4.6. Consequences of shift from strictly regulated institutional environment to a free society**

Objective three of the study sought to establish the consequences of shift from strictly regulated institutional environment to a free society. The study revealed that unlike charitable children institutions, government institutions are governed by strict regulations on the movement of inmates from place to place. The 3 charitable children institutions visited indicated that they allowed children to go on holiday and stay with their parents or relatives (in cases of those who had) and resume when schools re-opened. On the contrary, government institutions are bound by court orders to retain children within the institutional confines for the entire period specified on their committal orders. Lack of frequent interaction between the child and the community had both positive and negative effects on their reintegration as elaborated below.

#### **4.6.1. Negative Effects**

##### **4.6.1. a. Impact on peer relations and negotiation skills**

Out of the 15 females interviewed, 8(53%) got babies while undergoing rehabilitation or soon after discharge. Further, 2 out of the 8 were later able to go back to school while one (1) was employed. The remaining 5 were not employed and were struggling to raise their babies.

Due to the restricted nature of the institutions, most girls were not able to develop negotiation skills especially when faced with sexual threats and exploitation as was the case with most of those who got babies soon after discharge.

#### **4.6.2. Positive Effects**

##### **4.6.2. a. Impact on education and training**

Interviewed guardians indicated that in terms of education and training, the discharged individuals were serious and committed to learning. They had recorded regular attendance in school or training colleges and had not shown any signs of indiscipline.

##### **4.6.2. b. Impact on attitudes towards work**

Out of the interviewed cases, 46% had secured some work opportunities from the society on reintegration while 48.7% had secured none. About 5% were still in school.

Out of the 46% cases who had secured opportunities, over 90% were engaged in white collar jobs while the rest were self-employed. For those in the white collar jobs, over 70% of them had done the same job for more than 1½ years. One guardian described the individual under her custody as hard working and very committed to her job. No case was found to have declined an offer of employment.

#### **4.7. Institutional orientation and ability to cope with post institutional life challenges**

Objective four of the study sought to establish the influence of institutional orientation on the ability of the former institutional inmates to cope with post institutional life challenges. The study revealed that different child care institutions had varied modes

of orientation of the inmates towards exit and coping with life challenges. For example, Kabete Rehabilitation School constantly reminded inmates that they would be in the institution for a specified period of time, thus preparing inmates psychologically for exit and also by molding career interest and guidance for the inmates.

Rescue Dada oriented its inmates through training on domestic work and self management skills involving among others house keeping activities, molding life skills and social skills through sports, dance and drama and also through stimulating innovativeness through art and play therapy. Other efforts included creating psychological stability through counseling and non-formal education and vocational training.

Mama Fatuma on the other hand prepared its inmates through counseling and exposure to useful growth experiences as well as guidance on coping mechanisms. Nairobi Children Remand Home on its part oriented its inmates through home visits and counseling.

The findings revealed that in terms of institutional orientation and the ability of discharged inmates to cope with life challenges, there was;

- Inadequate education and training that led to difficulties in securing employment which subsequently led to inability of inmates to meet basic needs or support a family. This further led to dependency and likelihood of turning to crime.
- Unwillingness to adapt to the society way of life leading to incidents of conflict between the discharged individuals and the society.
- Inability of institutions to link discharged individuals with employers or provide capital for them to establish small enterprises which led to despair in some cases. This subsequently led some to turn to crime as one former inmate indicated;

"I was not employed because nobody cared for me hence I turned to snatching and mugging as the only available option for survival"



- Dependency syndrome fostered through institutional life that made a number of discharged individuals dependent on their fellow former inmates for survival as acknowledged by one respondent;

"Since I haven't secured a job to date, I survive on begging until I have become a burden to my friends"

Confirming this, another respondent said;

"After leaving the institution, I got married and after getting my second baby, I separated with my husband. He was the sole bread winner. Since the separation, a friend of mine meets my basic needs as well as those of my children"

As illustrated by the remarks above, institutions have more often than not fostered dependency thereby undermining the sense of autonomy in the individuals. Most of them tend to provide all the basic requirements to the individuals and do very little to provide them with the rod to do fishing for themselves. As a result, the individuals often fail to appreciate the role of work in the society and expect the community to feed them. This leads to a lifetime dependency syndrome which most of them exploit especially if hosted by a friend or colleague.

One Children Officer noted that most of the discharged individuals did not like life in the institutions as reported by those who visited their offices. Once released from institutions, they are free and able to manage their own lives. However, some develop a care-free attitude and become crooks.

The officer also noted that life after discharge was very difficult especially for juveniles. This was attributed to the nature of rehabilitation and the institutions they passed through (Borstal)<sup>1</sup> and the stigma associated with those who pass through them (often looked at as criminals or law breakers). He however observed that unlike Borstal children institutions, charitable children institutions are not for correction rehabilitation and cases of indiscipline observed among them go uncorrected hence posing a threat of relapse once individuals are discharged.

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<sup>1</sup> Borstal Institutions established by section 3 of the Borstal Institutions are children correctional centres where children of hard character or those in conflict with the law and are above 16 years are committed.

The Children Officer further noted that failure of community to offer support and acceptance to discharged individuals affected their physical and psychological stability. He however observed that some individuals could also find it difficult to fit into society when they are unable to overcome the trauma they may have suffered as a result of the events that led to their institutionalization.

Concerning institutional orientation, he noted that strong attachment to the institutions that cared for the individual affects their ability to let go and adjust to community life. He further noted that some individuals are exposed to abuse while in the institutions. This has lasting traumatic effects on the individual even after discharge. At times, this can also harden the character of the child especially if the institution lacks rehabilitation programmes. Children who were committed to the institutions unfairly tend to resort to lifetime aggression and bitterness.

From their interaction with Children Officers, some former institutional inmates reported that they were able to utilize effectively the few opportunities they got while in the institutions to remold their lives. These included education and training through which they were able to secure employment and settle in life. Confirming this, one respondent noted that;

"I owe my success to them (institution). I'm self employed and I have employed others."

On the same issue, another one noted;

"*Maisha ni mazuri* (life is good). Through my good conduct, I have made and retained many friends especially those that are customers to my business."

Even though children institutions are generally blamed for the negative effects they have on children, they also contribute positively to the growth and development of children into adulthood. Individuals who have been able to take advantage of the limited available opportunities in the institutions are often able to assert themselves in the community on discharge. As a result, they are able to pick up in life and move on as illustrated by the cases above.

As part of the success, Kabete Rehabilitation school noted that  $\frac{3}{4}$  of cases discharged from the institution were engaged in enterprise development while  $\frac{1}{4}$  were in formal employment.

The respondents attributed their success to change of attitude by both the individuals and the community, effective programmes that promoted proper growth and guidance, and programmes that were focused and motivating enough for inmates to work hard. Other determinants of success included positive behavior change (in relation to discipline cases), commitment and willingness to change and work coupled with effective community acceptance and support.

The study also revealed that institutions at times also impacted very positively on individual behavior thus contributing to the positive influence on personal decisions among discharged individuals. This was evident from the experience of some former inmates. One former inmate for instance remarked;

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"I wanted to come out and revenge on the lady who made me be caught and be committed to the Lang'ata Reintegration Centre. But when I came back and I looked at her and realized that I was more empowered than her, I decided to leave her alone"

In terms of addressing personality problems, some institutions were also reported to have oriented the individuals to build confidence in themselves and their ability to face life. This had enabled discharged individuals to compete effectively with other people for economic opportunities as one former inmate observed;

"I have benefited because before I was initially very shy and I didn't have good communication skills. I didn't dream of becoming a model but today I'm one and I'm very proud of myself"

Positive influence of the institutions on the self esteem of individuals, negotiation skills and ability to assert themselves was also evident in a number of cases. Children especially those who passed through street life experience a major erosion of their integrity, personality and esteem. Through institution initiated rehabilitation and psycho-social support, most of them are able to overcome the damage and move on with life.

Some institutions also oriented their inmates towards talents identification and development. This has become a source of livelihood for some of the discharged cases as noted by one former inmate;

"I did not realize that I had a talent but since I joined the institution, I was exposed to sports. Today I'm a good footballer and I'm very impressed. I coach young boys to become good footballers like myself"

#### 4.8. Societal perceptions on discharged individuals

Objective five of the study sought to establish how societal perceptions towards individuals discharged from child care institutions affected their social reintegration after discharge. The study revealed that in most of the cases, the society is aware of the needs of the individuals discharged from child care institutions. For example, 82% of the former institutional inmates reported that the society was aware of their needs. However, only 69% of the respondents had received any opportunities from the society to meet those needs. On the contrary, 15% indicated that the society was not aware of their needs and had not received any opportunities from the same as illustrated by table 14 below;

*Table 14: Classification of respondents by opportunities of livelihood support from society after discharge*

Any opportunities	Frequency	Percentage (%)
Availability	27	69
Unavailability	12	30.7
<b>Total</b>	<b>39</b>	<b>100</b>

The child care workers generally concurred that cultural factors often hindered discharged individuals from developing their already limited skills and mostly led to relapse of corrected behavior especially among the discipline cases.

The guardians described community perceptions towards discharged individuals as mixed. Some thought that it was impossible to live with formerly institutionalized children while others encouraged the individuals to settle and move on with life. One

guardian indicated that the immediate family was very hospitable to the individual and sponsored him back to school where he was still enrolled at the time of study.

In another case involving two reintegrated individuals, it however took the guardian and her immediate family time to accept that the discharged individuals belonged to the family. To them, the individuals bore an institutional label and belonged more to the institution than to the family. In terms of opportunities available to discharged individuals, the guardian maintained that it was not easy especially to secure employment for the discharged individuals. However, with support of willing community members, one of the individuals under her custody secured a job with a parastatal organization while the other secured sponsorship for her secondary school education. She also noted that social interaction had enabled the two individuals to identify with the community and hence shed off the institutional label.

Children Officers reported that at times communities assisted the discharged individuals by facilitating admission in education and training institutions. The community also often benefited from skills acquired by discharged individuals while in the institutions.

According to the Children Officers, it was a big challenge for discharged individuals when the immediate family and or community rejected them. They concurred that part of the concerns and dislikes that the reintegrated individuals reported back to their offices involved community rejection and suspicion. This was confirmed by one former inmate who noted that;

"When I went back home, those who I found never welcomed me. They started calling me names and this made life very difficult for me"

On the issue of rejection, another former inmate observed;

"My hobby was to play soccer but I could not join any group because no youths were ready to associate with me, they thought that to be in my company, one would be in bad company"

Labeling is common among communities where former inmates are discharged. The community members tend to feel that the individual bare a lasting label of the institutions they came from. As a result, the community always creates distinct disparities in provision of space and opportunity between children from institutions and those not from institutions. This creates long-term effects in relationships between the community and the discharged individuals that mostly trigger feelings of agony and revenge in the individuals later.

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## CHAPTER FIVE: CONCLUSION AND RECOMMENDATIONS

### 5.1. Conclusions

The study aimed at confirming or disapproving the following research propositions;

1. Institutional care for orphaned children enhances their effective reintegration after discharge.
2. Institutional care for orphaned children hampers their effective reintegration after discharge.
3. Societal attitudes to orphaned children discharged from childcare institutions adversely affect their social reintegration.
4. Societal attitudes to orphaned children discharged from childcare institutions do not adversely affect their social re-integration.

In conclusion, the study revealed that majority of the inmates settle alone on discharge (58.9%) as opposed to settling back with their families. The high level absence of institutional support (71.8%) renders majority of the inmates incapable of realizing their social and economic goals (66.6%) translating to 76.9% of the inmates not being able to secure basic services such as medication, accommodation, food and transport among others. Consequently, this makes majority of the inmates (84.6%) to keep off marriage and family life which is an important component of life. Therefore based on the foregoing discussion of findings and observations, the research proposition two has been supported by the study findings while research proposition one has been rejected.

The study also concluded that a large number of former institutional inmates faced negative reactions from the community in their attempts to associate with them. Some have been rendered homeless while others cannot get marriage partners in their communities on account of their institutional backgrounds. On this basis therefore, the research proposition 4 is supported by the research findings while 3 has been rejected.

From the findings, it would also be concluded that both government and charitable children institutions have not done enough to prepare inmates for reintegration after care and rehabilitation. This was evident from the high percentage of respondents who

reported on their negative experiences after discharge with only a few cases reporting positively about their life after reintegration.

It was also evident that the District Children Offices do not have control over institutional and discharge programmes for charitable children institutions. This has led to major loopholes especially in the exit strategies adopted by some of the institutions. These include among others dismissal of inmates from institutions without proper reintegration on realization that they have outgrown the age acceptable by the institution.

In order to improve the standards of service delivery to children during and after reintegration, professionalism in children institutions should be a high priority concern. This can be achieved through in-service training of child care workers, improved curriculum for delivery of education and training to inmates and application of modern training techniques.

## **5.2. Recommendations**

From the foregoing discussion of research findings, the researcher makes the following recommendations:

1. Both the government and charitable children institutions should;

- 1a. Initiate and strengthen after care programmes. Through these programmes, the institutions would be able to constantly link up with discharged individuals and ascertain their economic and welfare situation, and support them where possible with resettlement.
- 1b. Through the Department of Children Services, develop a harmonized programme of care and rehabilitation of children. These should among others outline education and skills curriculum for children during rehabilitation. They should however be reviewed regularly to ensure they remain relevant to the societal needs and the job market.



- 1c. Work closely to ensure that minimum standards for care and rehabilitation are adhered to and children are adequately prepared for reintegration.
  - 1d. Develop and keep a database of all reintegrated cases including their contact addresses and their current engagements. This would facilitate follow up of reintegrated cases and evaluation of effectiveness of the various exit strategies adopted by the institutions.
  - 1e. Initiate job placement programmes as part of their exit strategies. This programme would link individuals who are ready for discharge with potential employers and or other institutions for professional or career practice. Furthermore, the institutions should as a matter of priority consider former inmates for any job opportunities that arise in their institutions.
  - 1f. Endeavor to set education and training targets for individuals passing through their care programmes. This would ensure those who are discharged before completing their grade education or training can still continue under the sponsorship of the institution.
  - 1g. Design more innovative exit strategies for children passing through their care programmes. For those who cannot continue with education and training, programmes should be put in place to settle them after discharge and support them to initiate small enterprises for self reliance.
  - 1h. Enhance counseling and psycho-social support programmes to assist especially girls cope with teenage crises. This would enhance their negotiation skills especially when faced with sexual related threats and exploitation before marriage. Through these programmes, inmates would also be psychologically prepared for exit including what to expect from the community.
2. Institutions especially those that keep children for long periods should ensure proper education and training programmes are in place. Qualified educators

should be engaged in order to ensure that quality transfer of knowledge and skills takes place. Career guidance services should also be provided.

3. Institutions should have in place facilities such as transit hostels where inmates without homes to return to after discharge could be accommodated for a specified period of time while looking for alternative accommodation and means of livelihood. This arrangement would deter some individuals from resorting to street life, crime or drug abuse.
4. In order to increase chances of community acceptance of the inmates on discharge, institutions should create more avenues for interaction between the inmates and the community. These may include institution open days, holiday visits for those with parents or relatives or friends who are willing to host them, parent days, sports competition between the institutions and the neighboring schools etc
5. The Charitable Children Institutions should involve Children Officers during discharge of children for purposes of ensuring after care and supervision.

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## APPENDICES: DATA COLLECTION TOOLS

### APPENDIX 1

#### INTERVIEW SCHEDULE ON POST-INSTITUTIONAL IMPACT OF RESIDENTIAL CARE ON SOCIAL REINTEGRATION OF ORHPANED CHILDREN: FORMER INSTITUTIONAL INMATES

##### Section A: Both Cases

1. Tick the box that suitably indicates your age

- (a) Below 15 years
- (b) 15-21 years
- (c) Above 21 years.

2. Sex

- (a) Female
- (b) Male

3. How long did you stay in the institution? (Tick as appropriate)

- (a) 1 year
- (b) 2 years
- (c) 3years
- (d) Above 3 years

4. What are some of the practices that you were taught in the institution that you consider useful in your life after discharge?

5. What are some of the practices that you were taught in the institution that have made it difficult for you to settle after discharge?

6. After leaving the institution, where did you go to (please indicate)

- (a) Back home
- (b) Settled with relative
- (c) Didn't have anywhere or someone to settle with
- (d) Settled alone

(e) Other

If (a) or (b) go to Question number 7

If (c) or (d) go to Question number 15

**Section B: Settled with Someone**

7. How did those you settled with help with your resettlement?
8. After reintegration, did you get any opportunities for livelihood support such as employment or skills training?
9. Were you able to make friends? If yes, with who?
10. Are you still friends with the same people you befriended when you came back home?  
  
If no, why did the friendship fail?
- 11(a) Was there anything you hoped to do after leaving the institution which you have managed to do? If yes what is it?  
(b) How did your institution life experience help you in accomplishing that goal?
12. (a) Was there anything you hoped to do after leaving the institution that you have not done? If yes what is it and why have you not been able to accomplish it?  
(b) How did your institution life experience prevent you in accomplishing that goal?
13. Have you given up on what you hoped to do after reintegration?
  - a) Yes
  - b) No
  - c) If no, would you pursue the same issue in future if you had an opportunity?

14. Has someone offered you employment since you left the institution? If yes, what kind of employment and for how long have you done it?

**Section C: Settled alone**

15. a. (i) When you found that you had nowhere in particular to go, what did you do?  
(ii) When you chose to settle alone, who were you able to associate with?
- b. What are you doing for a living and how did you get involved in it?
- c. Have you been able to make friends and with who?
- d. Are you still friends? If not what led to the failure of the friendship?

**Section D: Both Cases**

16. i. Does your community know about your background  
ii. Are they aware of your needs?  
iii. What are some of the opportunities they have given you to meet your needs?
17. What are some of the most challenging experiences that you have gone through since you left the institution in relation to;
- i. Getting employment?  
ii. Getting affordable accommodation?  
iii. Getting marriage partner (where applicable)?  
iv. Getting enrolled in educational/training institutions?  
v. Getting treatment when you or your friends fall sick?  
vi. Finding food whenever you need it?  
vii. Finding transport whenever you need it?  
viii. Participating in social events (worships, weddings, parties)  
ix. Securing your belongings or property when need arises?
18. What would you say are the benefits that you got by being in the institution?



## APPENDIX 2

### QUESTIONNAIRE ON POST-INSTITUTIONAL IMPACT OF RESIDENTIAL CARE ON SOCIAL REINTEGRATION OF ORHPANED CHILDREN: CHILD CARE WORKERS

1. Please indicate as appropriate

a) Age

Below 15 years

15 – 25 years

25 - 50 years

50 years and above

b) Sex

Male

Female

2. How long have you worked with institutionalized children

0-2 years

2-4 years

Above 4 years

3. What arrangements does your institution have for releasing children back into the society?

4. What particular concerns and issues do your child reintegration programme (s) address?

5. What procedures does your institution apply in determining which cases to discharge and reintegrate into society?
6. (i) How does your institution monitor the children who have been reintegrated into the society?  
(ii) What is the institution duration for monitoring individual cases of reintegrated children?
- 7 (a) (i) What cases of success in securing employment among the reintegrated children are you familiar with?  
(ii) What cases of success in acquiring education and training among the reintegrated children are you familiar with?  
(iii) What cases of success in obtaining support to start business among the reintegrated children are you familiar with?  
(iv) What cases of success in establishing relationships (marriage) are you familiar with?  
(b) (i) What cases of failure in securing employment among the reintegrated children are you familiar with?  
(ii) What cases of failure in acquiring education and training among the reintegrated children are you familiar with?  
(iii) What cases of failure in obtaining support to start business among the reintegrated children are you familiar with?  
(iv) What cases of failure in establishing relationships (marriage) are you familiar with?
8. What kinds of socio-economic activities are reintegrated individuals from your institution mainly engaged in?
9. (i) To what would you attribute the cases of success above?  
(ii) To what would you attribute the cases of failure above?
10. What activities are individuals reintegrated from your institution mainly engaged in?

- 11 (a) Are there any reports that you receive on the well-being of the children who passed through your institution and are now back into the society?
- (b) If yes, what challenges to their well being if any do you get reports on?
12. What orientation does your institution offer to children to prepare them for life after reintegration?
13. What measures would you recommend institutions take in order to make reintegration of children after institutional care easy?

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## APPENDIX 3

### QUESTIONNAIRE ON POST-INSTITUTIONAL IMPACT OF RESIDENTIAL CARE ON SOCIAL REINTEGRATION OF ORHPANED CHILDREN: CHILDREN OFFICERS

1. Would you like to share with me on the following?

i. Your Age

Below 20 years

20-30 years

Above 30 years

ii. Number of years you have worked in children service

2. Please share with me briefly on the practice of residential care for children in your division?

3. How many residential care institutions for children are there in your division?

4. How many children are contained in the institutions above?

5. What role does a Children's Officer play in the life of individuals discharged from child-care institutions?

6. What mechanisms do you have to get information on the welfare of individuals discharged from child-care institutions and living within your areas of jurisdiction?

7. (a) What challenges to the welfare of discharged individuals are you able to address effectively?

(b) What challenges to the welfare of discharged children are you not able to address effectively?

(c) Why are you not able to address them?

8. (a) Do you have any opportunities to listen to or discuss the views of discharged individuals on their well being and interests?

i. Yes

ii. No

(b) If yes, what do you discuss?

- (c) What are the things they like or appreciate about their post institutional life?
- (d) What are their concerns and dislikes about their post-institutional life?
9. (a) Does the community give any opportunities to the reintegrated children to pursue formal education or training or to participate in the social activities?
- Yes
- No
- (b) If yes, what kind of opportunities?
- © If No, why (please explain)
10. (a) Do you have any reports of children who have remarkably succeeded in their economic and social life after leaving institutional care?
- Yes
- No
- (b) If yes,
- i) In what specific areas did they succeed in?
- ii) What led to the success?
- (c) If no, what do you think hindered their success?
11. How do you think the institutional life affects the character and experiences of individual children once they re-enter the society?
12. From your practice and experience of residential care, what would you recommend to improve reintegration of children after institutional care?

## APPENDIX 4

### INTERVIEW SCHEDULE ON POST-INSTITUTIONAL IMPACT OF RESIDENTIAL CARE ON SOCIAL REINTEGRATION OF CHILDREN: PARENTS/GUARDIANS

1. How long have you stayed with the individual since reintegration?
2. In what ways did the institution prepare the individual for reintegration?
3. How did the immediate family and the community react towards the individual after discharge?
4. Did the institutional life influence the personality and character of the reintegrated individual in any way? If yes, how? Please give details.
5. After reintegration, are there any opportunities that the immediate family or the community gave to the individual? If yes, please give details for;
  - i. Economic empowerment
  - ii. Education and training
  - iii. Social interaction
  - iv. Others
6. What is the current engagement for the reintegrated individual?
7. How would you describe the behaviour of the reintegrated individual towards;
  - i. Economic engagement
  - ii. Education and training
  - iii. Social relationships
8. Are there any challenges you have faced while living with the individual since reintegration? If yes, please give details.