Kenya Careleavers Conference Report

“How I left care”

Kenya Society of Careleavers

&

Koinonia Old Beneficiaries Welfare Association

December 7th, 2013
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Executive Summary

The KESCA and KOBWA organized a conference for Careleavers on the 7th December 2013 at the Shalom House, Dagoretti Corner. The conference was designed to unite the Careleavers in order to explore and establish a platform for dialogue in relation to reintegration. KESCA and KOBWA took the initiative to bring together young people who have exited care to explore ways of enhancing the care and support of the youth who have exited the care centers. The conference organizers believed in the fact that care is an on-going process and starts from the moment an individual is enrolled into a care center. It is against this background that the focus of the conference was set on addressing the following key areas of concern:

1. Admission process to care centers
2. Preparation before exit from care centers
3. Placement to the family/ community
4. Challenges faced after placement in the family/ community.

The invited youth actively participated in the conference; they felt that the conference was beneficial to them as it provided an opportunity to:

• Voice their concerns regarding various issues affecting their lives after exiting the care centers.
• Develop a better understanding of the role that KESCA and KOBWA can play in the development of their common interests
• Explore options for further engagement with other likeminded stakeholders.

The conference concluded with key recommendations to both the Government and the care centers to enhance the process of reintegration and ensure that the positive outcomes are not only maintained but efforts are put in place to enhance the life of the youth exiting the centers of care.

Partners:

Kenya Society of Careleavers:

The Kenya Society of Careleavers formerly known as Kenya Network of Careleavers was started in 2009 and registered in March, 2010 as a society. The organization brings together
young people from different communities who have grown up or spent part of their lives in institutional care. Majority of these young people have faced or are facing myriad socio-emotional and economic challenges since leaving institutional care. The group is comprised of young men and women who are 18+ years. The organization strives to improve life skills among the young people to enhance their personal development through trainings, and advocates for better care and support for Careleavers as well as young people in institutional care through conferences, meetings and workshops.

**Koinonia Old beneficiaries Association:**

Koinonia Old Beneficiaries Welfare Association is an association of former beneficiaries of Koinonia Community rehabilitation homes in Kenya i.e. Kivuli Center, Anita Home, Tone la Maji and Ndugu Mdogo. The association was registered in May 2007 as a self-help group/project under the ministry of Gender, Children and Social Development with the main objective being to foster and promote social integration and transformation of the members in the community through economic empowerment, moral, and spiritual support.

Most of the members having undergone life in the streets and rehabilitation coupled with some basic formal education are unemployed or underemployed. It is for this reason that the association seeks to start projects to empower them both economically and socially and to nurture them as good people in the society. The association also develops human formation programs for members, promotes community development endeavors, and conducts counseling and life skills sessions to the members and the younger brothers and sisters within rehabilitation centers. KOBWA membership remains open to all beneficiaries who have undergone rehabilitation and re-integration to act as a stepping stone to integration with the rest of the general public in the society.

**Context of this conference:**

**Target Population**

The conference targeted 250 Careleavers initially, but due to funding constrains only 150 Careleavers who grew up from over 30 different care institutions attended the conference. The conference was only for Careleavers over the age of 18, both male and female from
Nairobi County, Kenya. In this context, a Careleaver was defined as any young person over the age of 18 who grew up or spent part of their life in a care institution.

**Why the Conference?**

Kenya has over 500 care institutions and hundreds of young people are exited each year from these care institutions in an unplanned manner. Although some of these Careleavers are supported, majority are not supported in their efforts to cope with life outside care institutions. In 2011, Kenya Society of Careleavers conducted a research on 122 Careleavers; the report was titled “A fair chance to life”. It was observed that, 67 percent of the Careleavers who participated were not supported after leaving care, Some of the challenges highlighted in the report included; missing their families while in care, not being involved in decision making during exit from care, socio-emotional and psychological struggles, financial/economic difficulties.

The Kenya Careleavers 2013 conference was meant to explore the re-integration gaps and strengths from admission to care centres all the way to placement back in the community and families. The conference understood that the best way to get this information right was by the Careleavers to exclusively organise, plan and execute the conference.

**Conference Methodology**

On December 7th, 2013 KESCA and KOBWA teamed up for Kenya Careleavers Conference. The conference was organized by the Careleavers themselves hence ensuring 100% organization and participation by the young people. This was meant to empower them to be their own voices as opposed to non Careleavers representing or talking about their issues.

A steering committee of 10 young Careleavers was selected; the team started meeting in July, 2013 to plan for the conference. The team agreed unanimously that re-integration was the topic to address. It was however understood that majority of the young people chosen as facilitators did not fully understand the concept of reintegration and hence a short training was conducted by Koinonia programs office. After the training, KOBWA and KESCA shared roles and responsibilities as coordinators, facilitators, rapporteurs and Master of Ceremony. To ensure enhanced participation the team developed 4 thematic areas of discussion;
• Admission process to Care Centers
• Preparation before exit from Care Centers
• Placement to the family/ community
• Challenges faced after placement in the family/ community.

The conference participants were allocated randomly to the four groups. Each group had a facilitator and a rapporteur. After the group discussions each group selected members to present a summary of their discussions during the main session.

**Funding**

KESCA and KOBWA shared the cost of the conference. KOBWA through Father Renato Kizito Sesana (Comboni priest and Koinonia Community founder) contributed the conference facilities, transport reimbursement for participants, stipends for facilitators and rapporteurs. KESCA covered the meals and stationery and convened prior conference planning meetings through ABCD funds; ABCD is a Dutch Organization. KESCA contributed towards the conference through the support of Dudley office of Foster Care Associates (Part of the Core Assets Group) who organized a sponsored walk with IFCO Vice President Jean Anne Kennedy, the team climbed Mount Snowdon (Wales, UK) in November 2013. KESCA is very grateful to Collin Chatten, Jean Anne Kennedy and Ian Thomas for their fundraising efforts abroad for the conference.

**Purpose of the Conference**

The purpose of the conference was to give a voice to Care leavers to articulate their life experiences/ perspectives and transform these invaluable experiences to a powerful force of change in interventions that target institutionalized children in Kenya”.

**Main objective**

To explore the entire process of reintegration from the initial admission to care centers; to preparation for exit; to placement back to the family or community; and the challenges faced after placement.
CONFERENCE DISCUSSIONS, HIGHLIGHTS AND OUTCOMES

Discussion on the process of admission to institutions

The participants agreed on a common definition of admission as a process of accepting a child into a care institution. The participants discussed various reasons why they were admitted to care centres, in an attempt to understand whether the right decision was made in the process. In addition, generally in Kenya it is understood and known that the process of gate keeping is inefficient and that most children in care centres are not orphans as assumed. Hence, the discussions were meant to understand how these young people ended up in care centres.

Some of the participants said that their parents and guardians decided to take them to care institutions because of poverty; they could not provide for their basic needs, food, clothing, education and medical care. It was also noted that some were in the care institutions as a result of death of their parent(s) and there was no one else around to take care of them. Some were taken to the institutions through church interventions after establishing that they were needy and that they could get better care in the institutions. Also, children whose parents were chronically sick ended up in care institutions because their parents could not support them at home. Children with disabilities were also admitted to care centres for rehabilitation because these services lacked in the community or because they were seen as a burden or bad omen in the community.
One Careleaver also pointed out that he was admitted to the care centre because he was malnourished. However some of the Careleavers could not give opinion on admission because they were abandoned when they were very young and ended up in care centres and hence believed it was the only best option. For some, they were admitted to care due to physical abuse by their caregivers. One group of participants noted that once the police picked them up they were taken to police stations and later referred to care institutions by the police for care and protection. Some of them were from the streets and ended up in care institutions.

Some of the Careleavers ended up in institutions as a result of being rounded up from the streets by social workers and were taken to the institutions with the promise of better care and support. A case was also reported by one of the participants where an individual went round the community gathering all children who were orphans or had a single parent to start a care institution. He locked them up and it was only after three months that they were allowed outside the institution to play soccer in the field. One of the parents noticed children and it was only then that the case was exposed.

From the discussions it was noted and reported by the majority of the Careleavers that they were not consulted or involved in decision making process prior to placement/admission to care centres. They also noted that they did not have or were not offered any other alternative care options.

During the session the participants were asked if they had an option of placement where they would have loved to be placed and majority said family was the best option for them. A few preferred institutional care because they had no family experience and the only place they knew was the institution since they had been abandoned when they were very young. Majority said family was important because of bonding and that it gave them a sense of belonging.

“*Institutions can be closed but a family can never be closed*”.

One of the participants added that, “*a family gives you the roots*”, while another echoed that, “*I was not born by an institution; I was born in a family*”. Another added, “*I do not belong to an institution because my third name is a family name and not that of the institution that I grew up in*”. Last but not least one of the Careleavers said, “*one can always go back to his
family after exit but not in an institution where after exit you are not allowed back”. He mentioned this because after exit he was not allowed back in the institution albeit for a simple visit.

**Discussion on challenges during admission**

During admission there was discrimination and reluctance by some care institutions to admit children who were from the streets; children from the streets were labelled as truants and with behavioural problems; they preferred children from families. There were also concerns that during the admission process some of the social workers brought in children to the centres whom they liked and favoured as opposed to children who needed care and protection and who fit the admission criteria to the care institutions.

Some of the participants also noted that some social workers were discriminative and involved in witch-hunting/ fault finding so that the children they disliked could be dismissed or ejected from the institutions; one Careleaver pointed out a case whereby a child who had a sponsor in the care institution had performed well in school and one day he was told that the sponsor had stopped providing support, and the support was re-directed to a child that she favoured.

![Image of a group of people in a meeting room](image1.png)

Some of the Careleavers who were taken from the streets reported that before admission they were beaten during admission as form of rehabilitation; they were locked up in rooms and severely beaten. It was also noted by one that they were made to drink litres and litres of water to dilute the drugs that they had taken when they were in the streets as a form of rehabilitation.

During the discussions it also came out that one of the Careleaver’s was denied national identity card and birth certificate on the basis that he had 3 Muslim names and the authorities
doubted that he was Kenyan; he had been given the 3 muslim names in the care institution as a child. One of the participants in the group also mentioned that one of the children in one institution he grew up in was given the name “Saddam Hussein” because he had behavioural issues and this affected him. The need to maintain social and cultural identity for those children whose identity is known or can be easily identified was emphasised throughout the session.

**Discussions on preparation before exit from Care Institutions**

The issue of preparation before exit remains a big challenge in Kenya for most young people and children in care centres. Although there is no national data to support the ineffective and inadequate and preparation the reality as seen from the exited Careleavers paints a sad picture of the general process. Majority of the young people are struggling to cope socially, emotionally and financially after exit. In this context the young people defined preparation as being equipped with socio-emotional, psychological and economic resources to cope and adjust with life after care.

From the discussions it was clear that there were no systems in place or standardised interventions of preparing young people about to exit care within care institutions. The interventions were varied, inconsistent and ad hoc.
The participants also noted that some care institutions were not monitored by the government and for few that were monitored some said the monitors spent more time asking the staff questions and not the children; the children also could not talk about some of the challenges for fear of being picked on or chased away from the care institutions.

**Negative experiences**

The participants noted that in majority of the care institutions, there are no monitoring mechanisms in place to ensure that young people and children were being prepared for life after leaving. It was reported that some care institutions got rid of the young people at their own whims; majority said this happened because the care institutions wanted to save money, or once they realized that they could not support them the only way left was to ensure they were out of the care institution.

"The social workers wanted to get rid of me and they saw me as a burden to the institution"

Some of the participants noted exploitation by the care institutions; they said that they were used by the care institutions to get money to maintain the care institutions. Some of the participants mentioned that they were hardly prepared for exit and they could do nothing about it because they were at the mercies of the care institutions.

"My relative was called to come immediately by the institution to come and pick me up from the care institution, and he was made to sign the papers"

The leaving care process according to some of the participants was fast, unplanned and abrupt and destabilized them psychologically, emotionally and socially.

Majority of the participants mentioned that the care institutions did not have people with skills and knowledge to assist the young people in preparation for exit. Some participants were not happy about the preparation process as they said that after completing primary education, they were regarded as mature and could depend on themselves and hence were taken back to their relatives; their relatives could not support them because they lacked the financial capability. These young people submitted that they ended up in the same situation
they had been brought out from in the first instance, and sometimes they ended up in worse environments.

“As a child I was sold to a well-off family where I was used as a house help, there was no opportunity for me to go to school, I only completed primary school and I never went to high school, and when I had opportunity to escape from the family, I jumped the gate and I settled with the first man I met since I had no one to turn to and nowhere to go”

During the discussions some of the young people said that the care institutions made them sign exit documents. The staff did not take time to even explain to them what was in the documents; they were informed later after signing that the documents were exit documents and once they had signed they were told to get ready to leave the care institutions. Another challenge noted by some of the participants was that having spent majority of their childhood in care centres they feared going back to the community.

“I did not know how to make friends with people outside the care institution. I was only used to friends in the care institution”

There was a section of the participants who said that the preparation process, as well as support for leaving care depended on academic performance and behaviour. If one did well in school they would be reintegrated well; they would be supported to get a sponsor to continue with their studies. But if they performed poorly the reintegration would be bad; for others, if they had behaviour problems i.e. rebelled against staff, were not compliant, were not friends with the staff, fought with other children or got involved in petty theft, they would be reintegrated poorly. They would be forced to go out and live with their relatives.

At one point, one Careleaver said that, despite performing well in primary school, he was forced to take vocational skills training by the care institution in an effort to avoid taking him to secondary school. He said that this was traumatising because he had hoped to continue with his studies.

“I left the care institution because of physical abuse; I used to be beaten often. I together with others ran away from the institutions even before reintegration, we never got prepared for life after the institution”.
Positive experiences

Despite some of the challenges mentioned in the previous section some of the participants said that they were prepared for exit. Some noted that prior to exit the social workers used to take them home during the school holidays to stay and connect with their relatives/parents. They added that there was constant contact, dialogue and communication with the parents/relatives. The parents were counselled to accept them back to the families and community.

The children were also counselled and prepared to accept the situation in their homes. Some participants applauded that after class 8 (Primary School) they were taken back to their relatives/parents and the institution continued providing education support.

Another Careleaver described the preparation process in the care centre she was in. She said that after 23 years, they leave care and live in groups of 4-6 where they are expected to learn independent living skills. The rent is paid by the care centre and they are supported for a period of 6 months before they start depending on themselves. She applauded the fact that during this period they are allowed to move on with their studies, but also noted that if one had behavioural problems, they were exited early and less effort was made to support you to change or become better. Another challenge noted by the lady was that it was still difficult to start living alone, and one is fraught with fear living independently after leaving the group care arrangement because you don’t know much about life in the society having been used to group care.

Some of the care institutions had qualified staff who assessed the family situations and the needs of the children; children with financially stable family members were taken back to live with the family and for those who had financially strained families; the families were given grants or loans to start businesses. Moreover, some of the young people continued to be supported through their education.

“My relative was loaned some money to start a business by the care institution”
Some of the young people continued to get food support, clothes, and house rent for some time before the support was terminated. In addition, some of the participants said they were prepared psychologically long before exit through forums and seminars on independent living and hence it was not devastating during exit.

One participant said that care institution he came from encouraged some of the young people who had been reintegrated earlier and those who were about to be reintegrated to interact and share during sessions on life after care and this was very encouraging. One of the Careleavers who had just finished class 8 said he was scared of life outside the institution while another mentioned that he was also scared of going back to the family because of poverty and hence it would mean struggling to make ends meet.

**Discussions on challenges faced after placement in the family/community**

Careleavers continue to face a myriad of social, emotional and economic challenges after exiting care centres. This could be attributed to poor or lack of preparation before exit and lack of or inadequate support after exit.

There were various challenges that the young people highlighted that they continued to face after leaving care institutions during the discussions. From the discussions it was clear that the support offered by care institutions was relative, ad hoc and inconsistent.
After leaving care it was difficult for some to adjust with life in the community/ family after having spent most of their childhood in care centres. One of the Careleavers said she never felt part of the family because she had spent most of her life in the institution and the bond with her relatives was severed.

“My aunt had 4 children and she felt I added to the number of children she was taking care of when I joined them, to them I was a burden, most of the time I would hear my uncle say, now this one has come to add more problems to the family”

Some of the Careleavers were not happy at how they were viewed in the community and schools; one said that the teachers knew he was from care institution and hence perceived him as a criminal. If something went wrong in school he was taken as a suspect. Another one said, “I guess I used to perform well at school because I was stigmatised and called “Chokora” which means street boy, as a result I developed friendship with my books but at the same time I was lonely and I ended up taking drugs”.

Lack of life skills was also mentioned as a big challenge for most young people after leaving care; low self-esteem, socio-emotional challenges, and inadequate interrelationship skills, lack of self-awareness and identity issues. Most of those who had left care said they were forced to learn how to make new connections in the society, something that was difficult with inadequate life-skills. In addition Adapting to family routines was also highlighted as a challenge having been used to routines in the care institutions.

“I wanted to be left alone most of the times because I never felt part of the family”.

Some of the Careleavers mentioned that some of the society members had a negative attitude towards them; some people viewed them as truants and dependant. Adapting to the new environment in the community and family was viewed as a common challenge. Lack of and inadequate financial support by the care institutions was highlighted; that despite promise of some support upon exiting care, most of the care institution did not heed to the promises.
Recommendations:

Introduction

The effectiveness of this conference is to a large extent dependent on the level of support from stakeholders. It requires a holistic approach, which enhances the aims and objectives of the conference and addresses the challenges raised by those who shared their experiences and stories of the care system in Kenya. Consequently, Government, KESCA, KOBWA, Charitable Children Institutions, donors and all other stakeholders should invest in the conference outcomes and take it forward as follows:

Recommendations to the Government

• Government and Non-Governmental Organisations to develop programs that can help young people to be prepared before exit. The Government has put in place the guidelines for the care centres; however most of them are not being enforced thus making a mockery of the whole process.

• There should be concerted efforts by both the Government and the care institutions to ensure enforcement of the already existing guidelines and policies.

• Government should ensure policies/guidelines in place are followed to the letter by enhancing monitoring and evaluation systems of care institutions.

• Creation of awareness on the importance of reintegration back to family or community and investment in the process.

• Provide support in acquiring legal documents for children and young people during entry and exit from care especially birth certificates and national identity cards (as well as death certificates of birth parents where applicable).

• Develop a data base of all Careleavers

• Ensure and support that Careleavers get secondary and tertiary education after exit.

• Create job opportunities for Careleavers

• De-congest care institutions
Recommendation to Care institutions

Recommendation during admission to care:
- Each child to have a regularly reviewed care plan and be involved in the development of the care plan after admission.
- During admission process a child whose cultural background is known should not be given a name that conflicts with their tribe/ ethnicity/ religion
- Care institution should avoid giving names to children that could affect the children’s socio-emotional well-being later in life

Recommendations during the care process:
- Develop mentorship programs for children in care.
- Provide continuous training for caregivers/ social workers on child protection, child care and development, and child rights.
- Enhance psychological/ emotional support to children
- Employ qualified social workers and counsellors who have adequate experience working with children and are aware of the rights of the children.
- To vet staff working with children to avoid employing people who have a history of abusing children.
- Besides offering basic education, care institutions should appreciate and nurture talents of young people within care.
- Provide and develop life-skills programs for children and young people in care.

Recommendations on preparation for exit
- Establish a database of all Careleavers
- Provide and enhance educational support to children and young people about to leave care
- Provide counselling support during the reintegration process
- Reintegration to be measured in terms of the Careleavers who have successfully been reintegrated and are morally self-dependent.
- Care institutions to make a mandatory involvement of the children and young people in decision making during the process of preparation for exit.
• Each care institution should develop a reintegration plan with the child or young person

**Recommendations to Donors, KESCA and ACCIK**

• Ensure that there is an agreed process of enrolment, referral and exit for all children
• Enhance networking and partnership through the Association of Charitable Children Institutions (ACCIK) and Careleavers Society
• Donor to insist on getting proper profiles of staff working in the care centres; complete with the background checks
• ACCIK to vet all staff with a system in place to blacklist staff who have had cases of abusing children in care centres
• KESCA should continue to offer support for the youth who have exited care centres
• Enhance and support research on issues pertaining to Careleavers and children in care

**Conclusion**

This was the second yearly conference initiative organized by Careleavers themselves in Kenya and perhaps Africa, aiming at highlighting the plight of children and young people living in care institutions as well as those who have left care. The objective of this annual initiative is to improve care and support for children in care as well as young people who have left care. These recommendations are vital for all stakeholders in strengthening alternative care and specifically in providing guidance on how to support children before, during and after reintegration. Some of these recommendations have fiscal implications at both the Government and stakeholder’s level. KESCA and KOBWA however, believe that these investments are cost-effective and will go a long way into bringing positive outcomes among children in care, and young people who have left care. The initial investment and support provided through childhood and early adult life creates a situation of less dependency on services later on or after exiting care. It was clear that Careleavers are scarcely supported psychologically, emotionally and financially in the society in their quest to become independent and successful adults. Hence, Government of Kenya and stakeholders must come together to address the aforementioned recommendations with proper policies, guidelines and interventions. In addition, implementation of the already existing policies and guidelines for children in care institutions remains wanting and requires a recommitment by all stakeholders to ensure the quality care and support is provided to children.
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