



HFHK RECOMMENDED READING

TOPIC 1 - MYTHS & MISCONCEPTIONS - JAN 2010

The following information comes from: **What You Can Do About Alternative Care in South Asia**

(Kris Kang 2007)

MYTHS AND MISCONCEPTIONS ABOUT INSTITUTIONAL CARE

MYTH: Institutions provide a quality substitute for families.

REALITY: Evidence clearly demonstrates that institutional environments fail to meet children's physical, emotional, and social needs. In general, institutions across South Asia are underfunded, understaffed, and overcrowded. Children living in institutions are more vulnerable to exploitation, abuse, and neglect.

MYTH: Family-based alternatives are more expensive than institutional placements.

REALITY: Research shows that institutionalization is much more expensive than family-based care. The high initial and recurring costs of building and running institutions makes them a far more expensive option than alternative forms of care.

MYTH: Efforts should focus on improving the conditions in institutions.

REALITY: The focus should be on families. Family support and family-based alternatives to institutional care are better solutions. For children already in institutional care, reunification and reintegration programmes can help get them out. Experience indicates that even in well-funded institutions, children are vulnerable to abuse and neglect, and their developmental needs are often left unmet. Furthermore, funding is an important pull factor for institutionalization, drawing children away from families who are struggling to provide care. Support for institutions should come in the form of standards, regulations, and guidelines.

MYTH: Poverty is sufficient cause for admission to institutional care.

REALITY: Poverty alone should never be a reason for admission to institutional care. Poverty indicates the need for support at the household level, and does not indicate the need for a child to be separated from his or her parents.