Group Care and Fostering of Sudanese Children in Pignudo and Kakuma Refugee Camps

The Experience of Save the Children Sweden from 1990 To 1997

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Chapter I: Background and Context

1.1 Background
This study describes and analyses the group care arrangements and the fostering programme in the refugee camps in Pignudo (Ethiopia) and Kakuma (Kenya) within the context of the cultural and traditional child support and protection practices in Southern Sudan. The fostering programme is referred to as "Attachment to Families"\(^\text{1}\) to distinguish it from more conventional fostering programmes for separated children. Although forming a single case study, both types of care arrangement are discussed. The main sources of information for this study comprise group discussions among those involved in the implementation of the programme, reports on the subject compiled over time and personal experiences of the writer. The study also incorporates information from the evaluation exercise of the Family Attachment programme conducted in Kakuma refugee camp. This evaluation assessed the effectiveness and weaknesses observed between 1993 and 1995.

1.2 Historical Context
Sudan is the largest country in Africa and has experienced a civil war between the Islamic Government of the north and the Sudanese People’s Liberation Movement (SPLM) in the mainly Christian south. The war has resulted in the displacement of approximately 400,000 people into neighbouring countries. In 1987 there was a large influx of Sudanese refugees into the Gambella region of Ethiopia, and among them was a group of about 14,000 separated children, nearly all boys aged between 9 and 14, who settled in the Pignudo camp. However, following political changes in Ethiopia, these refugees migrated back through Southern Sudan and eventually settled in Kakuma in Northern Kenya in 1992.

The causes of the separation of these unaccompanied children from their families have never been entirely clear: although some were orphaned, or were accidentally separated in the confusion of the fighting, the majority left their families in an organised manner, motivated, it seems, by the SPLM’s wish to secure an educated cadre of citizens and to provide a future source of manpower. The poverty, social disruption and specifically the lack of educational opportunities in Sudan all seem to have been factors in the flight of these young people.

Initially, the refugee leadership took responsibility for the care arrangements of this large group of separated children and it was only subsequently that international agencies were able to negotiate with the leaders and influence the arrangements for their care and protection. The high level of refugee involvement had many benefits in enabling the refugees to take responsibility for many aspects of their lives, but also created some tensions in terms of planning for these young people on the basis of their best interests and free of political agendas. In Pignudo there was strong resistance from the refugee leaders towards any move to place the children in foster care, reflecting the fact that most of the children appear to have been encouraged to leave their families. Only the youngest children (aged around 6 – 9) were placed in families, mainly girls: however, during the journey from Pignudo to Kakuma, many of the children spontaneously attached themselves to families, which opened up the possibility of a more formalised system of fostering, and this proved to be of great benefit to the children.

\(^{1}\) In this study, the terms “Attachment to Families” and “fostering” are used interchangeably.
1.3 The Kakuma Refugee Camp: People and Services

The Kakuma Refugee Camp is located in Turkana District of North Western Kenya, 95 km. south of the nearest border with Sudan. The camp was established in 1992 to cater for the large influx of refugees from Southern Sudan who were previously refugees in various parts of Ethiopia. Until 1996, when Save the Children Sweden (SC/S) withdrew from the camp in order to concentrate their work within Sudan, the camp had a population of 48,910 refugees (70% Sudanese from Southern Sudan, 30% from Ethiopia, Uganda, Zaire, Somalia, Rwanda, and Burundi). The Kakuma camp is run by the United Nations High Commission for Refugees (UNHCR) in partnership with Lutheran World Federation (LWF) and International Rescue Committee (IRC). LWF is in charge of construction and food distribution and social services while IRC is in charge of health and adult education (including economic skills and environmental programmes).

During its time in Kakuma (1992 –1997), SC/S provided psychosocial support to Sudanese separated children. The broad psychosocial support programme included alternative care arrangements for the unaccompanied children; family tracing/documentation of the history of the children; provision for those with special needs; and pre-primary, primary, and secondary school support programmes. The programme was designed to take an integrated approach to the mental, social and cognitive development of children in relation to their social and cultural environment.

The camp had a higher percentage of children, mainly boys aged between 8-20 years, than would normally be found among populations in developing countries. Of these about 5,000 were separated children aged between 14 and 20, out of whom 3,000 were living under the interim group care and the remaining 2,000 fostered by Sudanese families in the camp.

1.4 Traditional Care Arrangements for Separated Children

The Southern Sudanese are a pastoral society and some of their child-rearing practices reflect this. The traditional care system for children recognises the roles that are played by biological parents, the extended family and older siblings. In these communities, there are no legal instruments to guide or regulate marriages and fostering, but unwritten common customary laws underpinned by strong culture, norms and taboos help to perpetuate the cohesion of the Dinka\(^2\) as a single community.

When a child loses his/her father, in the case of polygamous marriages, the wives of the deceased come together and the youngest wife is usually charged with the responsibility to look after all children of widows. In monogamous marriages, the children remain under the responsibility of the biological mother.

In a situation where children lose both parents, extended families (close relatives) become responsible to bring up the orphans – either the children are placed in different extended families, or one family takes on the responsibility to look after all the children. In the latter case, all extended families mobilise resources and support is given to that family. Another alternative is that an initiated son could also take over one of his father’s wives.

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\(^2\) Dinka is one of the 65 ethnic groups of the Sudan mainly living in the south where the war is taking place. 90% of the unaccompanied children were Dinkas
When girls are orphaned, the extended family that takes responsibility is expected to facilitate their marriage at the appropriate time, in which case the dowry becomes the property of the orphan.

In the event that no member of the extended family is able to provide for the parentless child, it becomes the responsibility of the tribal leaders to arrive at the decision on which attachment arrangement would be best for the child. Although it is quite common for children to live with families who are not related to them, this is seen as the last resort and not the preferred option. As far as the treatment of these children by unrelated families is concerned, not much difference can be observed from fostering to related families. It is generally believed that the child will receive the same treatment and enjoy the same standard of care usually accorded to one’s own biological children, though there is no known empirical evidence about this. Besides material support, such a child is entitled to love and protection like any other child member of the family. It should also be noted that a significant gender difference emerges in the traditional form of fostering: girls are a source of wealth because of the dowry system, and this results in more guardians being interested in the fostering of girls than boys. In many situations, however, it is not possible for foster parents to pay for a dowry, and this is likely to be understood and accepted by the child.

The dowry system is closely linked with the Sudanese concept of adoption, which has not been clearly documented in the literature: unlike western forms of adoption, the South Sudanese seem to understand adoption to be the result of a fostering arrangement in which the foster carers exercise parental responsibility in two specific circumstances: first in the event that they pay for the foster child’s dowry, and second in a situation where they pay compensation which results from the child committing an offence. In these situations, the young person is deemed to be entitled to assume inheritance. In the unusual case that a young person in this situation is claimed back by the biological parent(s), there would be an expectation that the dowry or compensation payment is repaid and that the young person would no longer be entitled to inherit from the adoptive parents.

In summary, in normal circumstances, children are the responsibility of parents, extended family members, clan members/leaders and the community at large. Fostering within these social networks is a normal practice, though care within the extended family is always the preferred choice, and there is a moral obligation to provide care for children who lose one or both parents. Fostering is transformed into adoption when the issue of dowry, compensation payment and inheritance come into play.

One of the common myths of the Dinka is the belief that God provided them with cattle for their survival. Thus the cattle occupy very important positions in Dinka life and many practices - such as marriage, good feeding for young children and the aged, bartering (for cereals, home made oil etc.), prestige and fame - are based on the acquisition of cattle. Before the advent of the current armed conflict in Southern Sudan, it would have been unthinkable for an average Dinka family to bear a child without ensuring cow milk as basic food for him/her. Given the central role the cattle play in Dinka wealth, parents would adjudge the intelligence and courage of children on how best they can manage and protect the cattle.

Boys are initiated into defined age sets which provide a vital social focus for the rest of their lives. There are two very important initiations in Dinka culture. They are “gar nhom” or “rek” (depending on the Dinka dialect) and “tem”. However, “tem” is used across the dialect
boundaries and refers to the same thing. The importance of these two initiations is that they mark the transition from boyhood to manhood. Specifically, the last initiation, *tem*, marks ultimate manhood and it groups all the young men who have undergone the same *tem* as coming under one age group.

Traditionally initiation occurred during the late teenage years, but this has tended to drop to the age of around 12 to 14, though the idea of initiated boys being men has remained. Even before initiation, boys become highly mobile – sometimes from the age of 7 or 8: they will leave the women and elders in the villages to live in cattle camps, moving from place to place in search of pasture. They learn to survive with minimal adult supervision. In less traditional communities, it became common for boys to leave their families in order to attend school: because the secondary school system has never been extensive, secondary education has usually involved boarding, and even primary schooling has sometimes implied living away from home for periods of time. In both cattle camp and boarding school situations, boys live within age-sets on a primarily self-care basis. Unlike Sudanese boys, girls would tend to stay with their mothers and other women in the community.

Southern Sudanese boys, therefore, are used to being segregated into groups separated from their families, though traditionally this separation would normally be of relatively short duration, and seasonal. The traditions associated with the peer-group living in the cattle camps, and the custom of boarding schooling are of great importance in examining the forms of care which the refugee community defined as appropriate when they first sought refuge in Pignudo.
Chapter 2: Interim Group Care

When the refugees first arrived in Pignudo in Ethiopia, the refugee community organised the unaccompanied children into a form of group care. Apart from the cultural familiarity with the idea of group care, a number of other factors tended to predispose this form of care: first, the political agendas of the community leaders (which may have included the desire to train the boys for leadership roles) may have led them to want a situation in which they could be educated and influenced collectively. Second, the large concentration of separated boys and the relatively small number of families meant that fostering on a large scale was simply not possible. In the early phases of SC/S’s involvement, the approach taken was to support and improve this group care, and it was only after the flight to Kakuma that the possibility of foster care on a large scale proved possible.

In Pignudo, separated children were organised in groups based on what adults thought was appropriate. At first, boys were placed together in the same group if they were related to each other. In Kakuma the arrangement also considered age, relationship and community of origin. At the start of the Pignudo refugee camp, about 14,818 separated children lived in 12 different groups. The number of children staying in each group ranged between 1,000 and 1,350, the groups being divided into tukuls, or huts, each accommodating 3 – 5 children. The number of the groups however was raised to 18 when the numbers of children in a particular group was felt to be too big for effective care. Each group had an average of 12 adult caretakers, one being a head caretaker.

The role of caretakers was:

- To identify children with special needs such as those with disabilities, sickness, depression etc. and to assist such children or refer them for alternative support
- To assist the children in cooking
- To guide them on cultural norms and socially acceptable behaviours
- To consult and talk to children and generally act as surrogate parents

The caretakers were expected to be adult role models to be emulated by the children in order for them to grow into responsible adults. Both in Pignudo and Kakuma camps, SC/S invested heavily on the training of caretakers and other associated personnel involved in the care of the unaccompanied children.

The children were also encouraged to elect their own leaders who, together with caretakers, managed the groups.

2.1 The Role of Peer-leadership within the Groups

An important aspect of the social structure of group care was the role of young people in exercising leadership. There was a youth leader for every group; they also had a leader at sub-group level (in each group there were 4 to 6 sub-groups) and a leader at house level. The respective groups of young people elected the leaders at the different levels. The children’s Central Committee was a committee consisting of a representative from each group and convened meetings on an ad hoc basis to address concerns, express views and opinions, and to discuss roles and responsibilities on certain operations such as sports competitions, health matters etc.
The roles of children and youth leaders varied from one level to another.

The leader at a group level had the following responsibilities:

- To communicate with the group head caretaker
- To receive food and any material assistance and distribute to sub-group leaders
- To represent the respective group of children and participate in meetings
- To work as member of the children’s Central Committee where they can express their views and opinions and discuss the expected roles and responsibilities of children and youth in initiatives for community development, the behaviour of young people in the camp etc.
- To participate in needs assessment, develop plans, implement those plans and evaluate programmes

The leader at the sub-group level had the following responsibilities:

- To monitor the health situation of children and youth in his sub-group and report to the adult caretaker
- To promote tolerance, peace and understanding in his sub-group
- To organise and facilitate play and recreational activities for his sub-group
- To identify children and youth with special needs and report to the caretaker

The leaders in each house also played an important role in the life of the children and youth in the respective houses: they were expected to be role models and supportive to those they led besides being focal points for a particular group. Typically, each *tukul* (house or hut) contained about 3 – 5 young people, with the house leader playing a vital role in their day to day care.

Children in each *tukul* received support from their adult caretakers, youth leaders and from their peers. Sick children, young children and children with disabilities particularly benefited from supports availed by those mentioned previously. Room-mates assisted each other in identifying children with problems and reporting the cases to the caretakers who again referred the matter to the head caretaker if need be. Other cases handled at the level of the *tukul* included school performance, behavioural problems and personal problem solving.

Children in *tukuls* shared past experiences, both positive and unpleasant, and how they have overcome those unpleasant occurrences. By so doing, children with weak coping strategies adapted effective ones from others with similar experiences. Activities such as story telling, debate, drawing, poetry, dream groups and group discussion on significant events in the lives of the children were used to facilitate the sharing of experiences.\(^3\)

### 2.2 Links with Family Tracing

In both Pignudo and Kakuma refugee camps, the group care arrangement was perceived as being a form of interim care: it was not at all clear when peace in Sudan might prevail, allowing the children to return to their families. In Pignudo, however, within the camp and other refugee camps, some family tracing and reunification work was thought to be appropriate. This approach helped to reunify some of the children with their extended families. The documentation of the social history of the separated children was also intended

to facilitate the tracing and reunification of these children at some stage in the future. According to SC/S, the aim of setting up the group care was not a long term solution since it was hoping, either through intra-camp or inter-camp reunification or Family Attachment, that all separated children would be integrated into their families and communities.

Family tracing, however, met with only very limited success, for a variety of reasons:

- The movement of refugees from place to place
- The movement of peoples within Southern Sudan as a direct and indirect effect of the war
- The differences in stakeholders’ interest in the reunification of separated children.
  - The idea of reunification was strongly resisted by some of the refugee leaders, for the reasons already discussed
  - The children themselves were all too aware that the educational opportunities available in Sudan were extremely limited, prompting them to resist the idea of family reunification

It is also important to note that the methods and techniques of family tracing and reunification, which are now well-developed, were only in their infancy during the early stages of the Sudanese refugee situation. It is clear that SC/S lacked the means and the capacity for a more comprehensive and proactive family tracing programme.

Although careful documentation was undertaken, this generally did not result in family reunification. Group care drifted into a form of permanent care, and while some of the children did maintain contact with their families, in other cases contact was lost. As group care became a more long-term arrangement, a number of disadvantages became evident: first, however, some of the advantages of group care will be considered.

### 2.3 Some Positive Features of Group Care

The group care arrangement in Kakuma was arranged by the refugee leaders, and was reluctantly supported by SC/S despite a general policy of discouraging residential forms of care for separated children. It was accepted because of the strongly-expressed wishes of the refugee community and because of the cultural factors already discussed. Experience of working with this system did reveal some advantages as well as many drawbacks:

#### 2.3.1. It promoted peer-group solidarity

The group care arrangement allowed the young people a chance to develop collective consciousness and to look to each other as a source of support in times of crises. This type of care helped prepare them for the challenges of life without their parents. They drew strength from the Sudanese culture which promotes courage and longsuffering as tenets to adult resilience. Group care undoubtedly enabled the young people to exercise leadership skills, it fostered self-reliance and promoted self-esteem. Thus the group care helped them to meet the expectations set by the communities.

Separated children often talked to each other concerning their distressing experiences and how they cope with them thus acquiring new coping skills. The sharing of effective individual coping mechanisms is greater among children under group care than children in other forms of care arrangement. This is basically associated with group care that brought about closeness between children and owing to the ample time they spent together.
2.3.2 It provided opportunities for the children to learn new skills
The group care arrangement also provided a lot of opportunities for children to learn new skills e.g. cooking and fetching water, which were entirely strange to them. However, this was not without problems, which will be discussed below.

What is clear is that children and youth under group care had particular opportunities to play leadership roles in the day to day activities, resulting in the development of skills such as decision making and problem solving at a much higher level than children do in normal family circumstances.

2.3.3 Group care was reasonably well integrated with the wider community
Unlike the experience in many other refugee contexts where group care has been promoted, in both Pignudo and Kakuma, it was possible to achieve a higher integration into the wider community than is typical of residential care, despite the large concentration of young people in this form of care. This partly reflects the fact that group care was initially arranged by the refugee leaders themselves, and partly the fact that children were placed in small huts and not large institutional buildings.

Interaction between children with families and those in group care had been encouraged through common activities around residential areas and schools. The link between group care and educational provision was extremely strong: in some cases teachers were deployed as caretakers. Educational activities such as tutorial classes and sports and games were also undertaken within group care systems.

2.3.4 It encouraged a high level of child participation
Young people under group care were provided with opportunities to examine their own needs and problems and those of the community. The children/youth committee formed in each group was basically a structure that enhanced the participation of children and youth in matters affecting them. Often, the youth used this opportunity to express their concern and contribute to the solutions, to an extent rather greater than would normally be allowed within family settings. This has therefore helped the youth in the transition to adulthood where they have to manage their lives independently.

2.4 Some Negative Features of Group Care
The group care arrangement in Kakuma faced various challenges which were mainly due to the length of time the young people stayed in the refugee camp. As group care moved beyond an interim form of care and became more permanent, a range of problems emerged.

2.4.1 The lack of good adult role models
Generally, the shaping of children’s behaviour depends on many factors. The presence of role models in society is one vital and important factor for the behaviour development of children. Whereas children under family care enjoy the presence of quite a significant number of adults, children and youth in the group care arrangement were in close touch with a relatively small number of adults who were deployed as care givers and teachers in schools. In some cases they grew up lacking first hand experience of the roles of husband and wife, of parent and child, which are very important in terms of their own future roles as adults.

2.4.2 Disciplinary problems
The relative lack of adult role models may be one of the main reasons why there were more discipline problems among children and youth living under group care than foster homes.
Such problems included fighting and quarrelling, theft, disobedience, and unauthorised absence from school. Children under group care lacked the opportunity to benefit from the guidance and assistance of parents and extended family members - especially to understand and learn the social and cultural values which are important for the child to live in the society.

2.4.3 Problems in adapting to new roles
Although group care did facilitate the learning of new roles and skills, the other side of the coin is that many of the boys resented taking on roles which they saw as the traditional role of women within their culture. Many boys felt a sense of shame at having to cook for themselves, sometimes resorting to cooking under the cover of darkness so that they were less observable.

2.4.4 Protection issues
Children under group care were more exposed and vulnerable to child rights abuses owing to lack of parental protection. It seems that the large majority of the children who were persuaded by politicians to return to Sudan to fight in the war, but under the pretext of family reunification, were from group care.

2.4.5 Limited academic performance
Compared with children placed under Family Attachment, young people in group care in the Kakuma camp performed less well in school. There may be several factors to explain this: first, children under group care had more things to do than children living in a family set up and thus had less time for studying. Second, children in group care received less advice, support and guidance from adults, which may help to explain both absences from school and lower achievement.

2.4.6 Less opportunity for learning coping mechanisms
Although children living under group care had more opportunity to learn individual coping mechanisms from each other, they had less access to coping mechanisms that are found in a family. When it comes to coping, family structure plays a fundamental role in facilitating the expression of feelings and promotes an understanding of realities since the relationship is based on trust and confidence. Moreover, the use of cultural methods of helping children affected by war-related situations are greater in a family structure than in group care.

2.5 Concluding Thoughts on Group Care
The decision to place the majority of separated children in group care reflected a range of circumstances – it was the initiative of the refugees themselves, but also reflected their particular agendas (which were more to do with politics than the best interests of the children), the fact that large-scale fostering was not a realistic possibility and a number of cultural factors which tended to pre-dispose towards group care.

Group care was envisaged as a form of interim care, but as time passed it became a permanent form of care, the disadvantages of which became more and more obvious. The lack of more pro-active family tracing and reunification work, for the reasons which have already been outlined, also served to convey to the young people the idea that they were in a form of permanent care. Their consequent lack of experience of family roles, and their limited integration into the wider community were highly significant in creating a situation in which the transition to independent life in the community was a difficult one. Although the vocational training available in the camp did enable some of the young people to return to Sudan with marketable skills, the lack of work opportunities in the camp, coupled with the
lack of potential marriage partners because of the camp’s unbalanced demography, were major barriers to the young people moving on to independent life in the community. It is against this background that the subsequent moves to resettle some of them in the USA should be seen, resulting in an inevitable further alienation from their own culture.

With hindsight, it is all too easy to see that a more comprehensive assessment should have been carried out to explore, in more detail, the reasons and situations that led children to be separated, and to examine the traditional values and child-rearing practices so as to ascertain whether or not this type of care was suitable as either a short-term or longer-term arrangement. It would have been particularly important to understand the circumstances that led to the voluntary separation of children, the impact of poverty, the economic disruption of the war, the limited educational opportunities in Sudan and the political agendas at work. On the basis of such an assessment, the viability of a more systematic family tracing policy could then have been considered, and care arrangements and educational provision planned to complement it.

A number of problems did emerge with this form of group care: but it is remarkable that, considering the numbers of young people, the very difficult circumstances they had experienced, and the long duration of group care, these were much less severe than has been experienced in other examples of group care. It is particularly significant that despite the experiences of violence, separation and repeated displacement, the children’s psychosocial health and their ability to function were remarkably good. No doubt the most significant factor in explaining this is the cultural familiarity with group living in the cattle camps and the reliance of young people on peer-group leadership and support structures.
Chapter 3: Family Attachment

The other type of arrangement made for the support of the separated children was “Family Attachment”. Although this can be described as a form of fostering, the term used was preferred and refers to a care arrangement for vulnerable groups of children in the Sudanese community where a group of up to 7 children are attached to or placed under the responsibility of an adult or family for support and guidance. In this arrangement children identified families with whom they wished to live and either approached them or went through SC/S to approach families on their behalf. Where it was possible, Save the Children prepared both the family and the child for the living arrangement, and also provided regular support to the family in which the child was absorbed. Though many children formed close attachments to their foster carers, the arrangement was initiated as a provisional one, to continue while the child remained in the camp, but intended to lead ultimately to the child returning to his or her own family.

3.1 History of Family Attachment, Pignudo and Kakuma

The Sudanese refugee community started fostering as early as 1987 when the first fleeing group arrived with unaccompanied children of such tender ages as 6,7,8 and 9 years. En route to Ethiopia some families took in one or two children, mainly girls. This is due to the special needs that girls are perceived to have and the fact that girls are viewed as source of wealth. The other reason for choosing girls be under family care was that they were not expected to become soldiers.

On arrival in Pignudo, the vast majority of the separated children were still on their own. However, the desire on the part of international agencies to carry on and further develop what was started during the migration (i.e. the provision of family care) encountered some resistance from the refugee community leadership, who maintained a clear preference for group care. For this reason, the initiative of attaching children to families was limited only to a few children who were very young and mostly girls, and in any case further moves towards fostering were interrupted by the movement of the refugees back into Sudan and on to Kakuma. Thus, in 1989, only 34 children were known to have been placed in families in the community.

The Kakuma refugee Family Attachment programme was started in 1992. It was mainly started to cater for the needs of separated children who were too young to be placed under the group care arrangement. It also catered for the most vulnerable children i.e. the sick or those with recurrent traumatic experiences or had a history of mental disturbance, etc.. One factor which enabled this to proceed was the fact that during the flight from Ethiopia, many children – approximately 2000 - spontaneously attached themselves to families, rendering the idea of family placement more acceptable to the refugee leaders.

The programme took care of 1,862 children between the ages of 12 and 24 who were attached to 541 families. Certain families accepted some young people above the age of 15 because they already had a younger brother attached to that family. In some cases, e.g. where a child had a particular disability, it was necessary to consider an individual attachment because of the extra attention required.
3.2 The Concept of Family Attachment

Family Attachment is a rather more loose but flexible arrangement than fostering as it is generally understood. Once a family has agreed to take in a child or group of children, a tukul (or hut) is built next to the family home. In the culture of South Sudan it was common for older children to live in a separate hut alongside that of their parents. The family supervised the children, providing advice and guidance when required, monitoring health and educational issues, providing discipline where necessary: but very often the young people would prepare their own meals and not look to the family for physical care. In some cases, this rather separate existence continued, while in others the child or children became more or less fully integrated into the family. The great advantage of the system, especially for older youngsters, was that the actual nature of the relationship with the foster family could be negotiated, and allowed to evolve over time. So while some youngsters, especially older ones, may have preferred a large measure of independence, younger and perhaps more vulnerable children could receive a higher level of personal care and affection, and even become more or less fully integrated members of the foster family – to an extent greater than that which was originally envisaged.

Before examining the components of the programme, some background information on fostering and adoption in Sudan will be given.

3.3 Foster Care in Sudanese Society

Foster care exists traditionally in the Sudanese society as a practice of caring for unattached children, as discussed in 1.4 above. A child without kin may be allowed to stay with a family and will generally receive the same treatment usually accorded to the family’s own biological children. Besides material support, such a child is entitled to love and protection like any child member of the family.

The Family Attachment programme was originally envisaged as a form of provisional care, leading ultimately to the child returning to his or her own family. However, children who became well integrated into their foster family could experience a situation in which it became a form of adoption, in the Sudanese understanding of the term (as already explained in 1.4). If the young man wishes to marry and the foster family pays the dowry for the wife, this becomes the first step towards a form of de facto adoption. Later in life, should the young man want to leave the family to rejoin his clan or to break ties with the foster family, he will be free to do so on the condition that he leaves behind his wife, children and whatever substantial wealth he may have made when he was staying in the family. Neither appeal nor customary court would say otherwise.

Generally, however, it was expected that children in the Family Attachment programme would be reclaimed by their family prior to reaching adulthood. If this did not happen, and if the foster family did not (or was not able) to provide a dowry, the person was allowed to settle down on his own away from the foster family.

In the case of girls in the Family Attachment programme, if they married it was sometimes possible for the foster family to receive the dowry. This appears to be a significant reason why families often stated a preference for girls. It may also be the case that some families spontaneously took in girls without the knowledge of international agencies, and that these fostered children were therefore not able to benefit from family tracing services. If the girl’s own parents became involved again, they would be able to claim any dowry that the foster carers had received.
In practice, all three outcomes were observable in Kakuma – i.e. some of the young people in the Family Attachment programme returned to their families, some became adopted and others moved on to independence.

3.4 Family Attachment Policy and Practice
Since its inception in Ethiopia and until its re-launch in Kakuma, Family Attachment has always had consistent policies and practices drawn up by Save the Children Sweden. The following are some of the key policy elements in the foster care practice:

3.4.1 The appointment of refugee foster care supervisors
These are very important people in foster care. Their work includes, among other things, conducting initial surveys to identify children to be fostered, observing interaction between children and the foster parents after the children are fostered, serving as counsellors to the children and foster parents, and ensuring that the rights of the children are not violated.

The Supervisors also provided supervision and support to children who were known to have been spontaneously fostered prior to the Family Attachment being commenced. In general, these children were indistinguishable from those within the programme, and the supervision provided was as unobtrusive as possible in order to avoid disturbing the relationship that had resulted from these self-arranged placements.

3.4.2 The selection of children for family attachment
As pointed out earlier, children of tender ages and the most vulnerable were mainly considered for Family Attachment. However, in Kakuma, children aged 14 and 15 who requested to be placed with families were also included; and some younger children who were not willing to be fostered and had formed close relationship with the slightly older children still remained in group care.

3.4.3 Freedom of choice
Freedom for a child to choose a foster family and the family’s freedom to accept or refuse the child was also one of the key policies, reflecting Sudanese culture. No child was forced to accept Family Attachment nor was a family forced to accept a child for fostering against their will. The whole issue was left to the two parties, the social workers facilitating the process.

3.4.4 Psychosocial assistance
The Foster Care Supervisors recruited from amongst the refugees were always at hand in assisting foster parents to help children who showed symptoms of depression or excessive aggression or sickness. Such children were helped to express themselves in culturally permissible ways and to integrate effectively with others. Vulnerable children were also encouraged to join community support group activities e.g. sports and games, religious and cultural activities, Scouts, art and drama groups.

3.4.5 Material assistance
Material assistance was provided on the same basis for children in both foster families and group care: with regard to the former, it was intended for both the fostered child and the family members. It was also important to make it clear to the community and to the children that material assistance had nothing to do with fostering, in order to avoid the suggestion that foster parents received any kind of material incentive. The material support given was what children were entitled to, regardless of the fostering arrangement. This policy was designed to
discourage young people from expressing a preference for either fostering or group care on material grounds.

3.4.6 Follow up
This was done by Foster Care Supervisors to observe how fostered children were faring, to report abuse/neglect and to ensure that the rights of the children were not being violated. During the first six months after placement, Sudanese Foster Care Supervisors conducted weekly visits to each foster home and talked to children and foster families on areas of concern to both sides. However, as foster children stayed on longer, the frequency of the visit was reduced to once a month so as not to disturb the confidence built in the foster family.

Foster Care Supervisors conducted orientation for foster parents on what they may anticipate in children’s behaviour. This helped foster parents to respond appropriately to difficulties experienced with fostered children.

In the event of tensions in relationships, the Supervisors attempted to improve the relationships using traditional measures. Depending upon the seriousness of the problem, the primary interest was to deal with issues that were perceived to be causing the difficulties. If the matter was difficult to overcome an alternative arrangement was sought with the consensus of both parties. Some of these options were attaching the child to another family of his/her choice or returning the child to group care. In Kakuma, there were very rare cases of such incidences and very insignificant number of children reverting to group care.

3.5 The Evaluation of Family Attachment
In an effort to measure the degree of success of the implementation of the Family Attachment programme, an internal evaluation was conducted in 1996, the result of which is presented as follows.

The first objective was to find out how much children benefited from the foster care programme. To achieve this, some indicators were used, namely the interaction between those fostered and their foster parents in their everyday lives, and the schooling status.

3.5.1 Family interaction and behaviour
It was found that the general interaction between children and their foster parents was fairly normal. Results showed that the children believed that the acquisition of cultural education and values was the most important thing that happened in the whole fostering arrangement.

When asked to name the type of support received from the foster family to reinforce further the importance of the fostering arrangement, 49% of the children mentioned social support and cultural education while 38% mentioned material support (which will be discussed separately below).

The majority of the children were quite integrated into the families in which they were fostered. They related fairly well with everybody in the homes. They did not think differently from the rest of the family members. Only 20% indicate some kind of difficulties with at least one member of the household. 9% described their relationship with their foster families as bad, which would normally involve the intervention of the Foster Care Supervisors. Some children have held such feelings because carers did not provide clothes and shelters, some were said to be abusive or as they put it, “do not behave well with us,” while others were reported to be drunkards.
On the question of whether foster care had created any particular problems in their respective families, 89% of the carers said they had experienced none; 11% of the carers complained about cases of indiscipline such as refusal to help with household chores, rudeness and general disobedience.

### 3.5.2 Material assistance
That the whole arrangement was supported with material assistance by the organisation was seen to have played a role in the success of the programme. 98% of the children indicated having received gifts from their families. This showed that the families were always willing to share whatever they had with their fostered children despite the meager resources in the refugee camp.

### 3.5.3 Health
With regard to health, 60% of the children indicated that it was between “good” and “fair” (29% and 31% respectively). 38% of the children indicated their health as being “bad” and this was most probably due to inadequate nutrition, which had been a major problem in the camp in the two years prior to the evaluation, and especially in 1996.

### 3.5.4 Education
From the results of the evaluation, all the fostered children surveyed like going to school. Their performance, as measured by their class positions at the end of the last school term, showed an average performance. The school-leavers showed impressive results, with 80% in class seven and above. This showed that there was a steady improvement in their school progress since they came to the camp. At the time of their arrival, the majority of these children were about 10 years old and most had not begun their primary school education, but seven years on, they had almost completed their primary level of education. 16% of them had acquired extra skills in tailoring, carpentry, masonry, typing and metal work. Although there are no comparative survey data available, experiences suggested that children in Family Attachment generally displayed a better pattern of attendance and performance than those in group care, and this was ascribed to the support and regular follow-up made by foster families.

### 3.5.5 Ideas for improvement
Various ideas were raised to achieve an improvement in the interaction and good will in the foster families: perhaps not surprisingly there was an emphasis from the young people on the improvement in the provision of the much-needed material needs. In fact 72% of the respondents said that easing of some of their material needs would greatly improve life in the foster homes and hence improve relationships. Most of the fostered young people lacked the essentials. Some suggested moving back to group care, which was perceived as better, owing to the fact that those in the group care received more material help than those in the foster care arrangement. Although SC/S endeavoured to provide material assistance on the same basis to both groups, other organisations may have tended to favour those in group care in their distributions of non-food items, perhaps because of their greater “visibility” in the community.

### 3.5.6 Future outlooks
**Initiation**
On the questionnaires in the evaluation, children were asked to enumerate the types of initiations they had undergone. 22% indicated they had been initiated whereas 78% indicated
they had not. Out of those not initiated, 50% said they did not want to be initiated. This showed the outside influence on the culture; most of these young people probably thought that initiation was out-dated and would not like to practise it any more.

The circumstances in which the children lived in the refugee camp did not allow them to plan for marriage for reasons related to the capacity to pay a dowry and the limited number of girls in the camp. This limitation had been recognised by the elders and refugee leaders in the camp who allowed and advocated for the right of young people to marry provided that the man agreed to settle the dowry upon returning home. At the same time, leaders in the camp discouraged initiation as a condition for marriage. In fact, initiation in general in the camp as well as inside Southern Sudan started to become unpopular.

The rationale behind respondents who did not want initiation is believed to have stemmed from the influence of the new environment and the attitude of the community, which became indifferent towards initiation. The initiation done in the form of marking the forehead, removing teeth etc. that was once thought to be a sign of maturity, courage, manhood and beauty became to be seen as disfigurement.

Work Prospects
With regard to their work prospects, 94% of the young people in Family Attachment indicated that they hoped to take up a profession like teaching, medicine, and engineering. An overwhelming majority also thought they would succeed in achieving their wishes for the future. This showed that these children had been integrated well and their hopes for the future were like those of any normal children of their age. Children within the Family Attachment programme had access to vocational opportunities on the same basis as those in group care. The reality of life in the Kakuma camp was such that ambitions like those expressed in the Evaluation were extremely difficult to realise, and the whole question of the future prospects of these young people – whether in group care or fostering – was the cause of great concern.

Future Living Arrangements
In the study, about 39% of all those interviewed were 18 years and above (though at the time of fostering they were all under 16). The question on this issue in the Evaluation sought to find out what were the foster parents’ ideal choice for their foster children’s future living arrangements. 11% of the parents did not want to keep the young men any longer. 20% were willing to keep the young men even when they had attained the age of 17 and over. For the majority (70%), the deciding factors seemed to hang on whether they would receive material assistance or not. They were undecided on this issue of whether to still keep the young persons or not after they attain the age of maturity; but categorically stated that they would be willing to keep them on, with some assistance from SC/S.

Based on the findings expressed above, it was felt that communities in general, and foster parents in particular, have concerns in dealing with the issue of fostered youths as they become adults. The uncertainty expressed by respondents is believed to have been borne out of fear of the responsibility for providing a dowry in the event of the young person’s wish to get married. Another fear among families relates to the possibility of the fostered young man having a sexual relationship with their own daughters, or with other girls in the neighbourhood, in which case the foster parents were responsible for any compensation.
3.5.7 Conclusions from the Study

On the question of whether respondents of the survey would recommend foster care arrangement to somebody else, 77% said they would; 23% said they would not. This number is consistent with the result on what feelings they had for their foster families – the numbers who would not recommend fostering were similar to those foster parents who had said that they have had some strain in their relationship with fostered young people.

The survey looked at the usefulness of the foster care programme and from this several conclusions can be given on how much the programme has helped the beneficiaries. The results have clearly shown that the majority of the young people were well adjusted. All of them attended school, their family life was well integrated as shown by the fact that they shared most things in the homes, like cooking together, and they enjoyed normal conversation with their foster parents and siblings.

Culturally, the children have benefited by learning about their heritage through songs, riddles, and traditional folk tales and by taking part in cultural gatherings. These children show that by living with people well conversant with these Southern Sudanese cultural practices they benefited from being fostered. Undoubtedly their exposure to normal family life and the various values and norms associated with it has been valuable.

Anxieties about the future emerged very clearly. However, it is clear that the majority of the now-adult fostered young people would remain with their families, which seems to demonstrate an attachment to their families.

3.6 Concluding Thoughts on Family Attachment

Fostering in the form of Family Attachment and as an interim arrangement, with flexibility in its approach, was very much liked by the majority of the stakeholders. The fact that the whole process relied on the common understanding of the community as to why Family Attachment was necessary, as opposed to the group care arrangement, had given a strength to the smooth implementation of the programme. Using an approach which built on the voluntary attachment of separated children to families gave an entry point that prompted the community to believe that the exercise was desired by the children and not imposed on them. The resulting programme was a form of fostering which was initiated by the children themselves, but facilitated and supported by an international agency.

The involvement of children in the assessment of needs and problems experienced by separated children, finding or seeking solutions together and finally in the implementation of the proposed action was a remarkable achievement. At all levels of the fostering activity, children were given the opportunity to express their opinions and their views. For successful Family Attachment, the participation of the children from the beginning to the end was essential.

The use of locally recruited staff who knew the traditions and cultural values of the community was one of the strengths that enhanced the integration of children with foster families and the settlement of disagreements between the two parties. Although clearly the deployment of paid staff introduced a major financial cost, using locally recruited staff has kept this cost to a minimum.
An assessment of the traditional values and practices is an important step in designing the approach, forming modalities of carrying out fostering and in understanding elements that need to be taken into account when planning the programme. Part of this assessment involves understanding norms and practices which may have disappeared, or changed significantly, as a result of the war and the subsequent displacement of communities. Realising the potential for reviving and supporting the tradition of related and unrelated families taking care of parentless children is a prime example of this.

It was felt that the process of integration (i.e. the speed at which fostered children should be absorbed within the foster family) needed to be gradual, especially bearing in mind the young people’s experiences of separation, war and violence and repeated displacement. How fast the foster family or the fostered children perceived themselves as a “normal family” should be dictated by both sides’ willingness and mutual understanding, with guidance from the Foster Care Supervisors about the degree of integration which was felt to be desirable in the particular situation. The Family Attachment programme offered the flexibility which allowed the arrangement to evolve, where appropriate, from a fairly loose arrangement to one where the child was able to enjoy a full experience of integrated family life.

Material support was a very important factor, which if not handled carefully could affected adversely the genuine commitment and attitude of the foster family and the sustainability of the relationship with the child. The programme took care to avoid the danger of fostering being perceived as service-giving in return for benefit provided, which obviously could have undermined the strength built in the culture of communities.

The special needs of older children under the Family Attachment programme should have been taken into consideration during the planning phase. Proactive measures should be put in place so as to respond to the growing and changing needs of children as they moved away from childhood to adulthood. Cultural and legal issues needed to be defined in anticipation of changing needs of separated children. Marriage, initiation and inheritance are some of the concerns that deserved assessment from the onset of the programme. It is in this connection that the lack of an effective and pro-active family tracing and reunification strategy led to the situation where Family Attachment, for many children, drifted into a form of long-term substitute family care. Fortunately, in the large majority of cases, this met the needs of children extremely well. As with the young people in group care, the lack of marriageable females in the camp served to limit severely the marriage prospects of most of the fostered youngsters, bequeathing them a somewhat uncertain future.

The Family Attachment programme was developed in a way which both encouraged sibling groups to remain together, and enabled groups of children to be fostered together: this was important in a context in which there were large numbers of separated children in comparison with families available to take in fostered children.
Chapter 4: Concluding Observations

The case study has described a number of cultural factors which served to predispose the young refugees to a model of group care which built on, but also extended and in some respects changed, a form of group living with which they were familiar. As an interim measure, and in the light of the impracticability of fostering because of the large numbers of children and the small numbers of potential foster families, a model of group care evolved which, in many ways, was appropriate and effective. It encouraged a high level of child participation and peer-care, it was reasonably well integrated with the life of the camp as a whole and seemed effective in meeting the psycho-social needs of most of the young people. However, as it drifted into long-term care, some of the problems became clearer: unlike the experience in boarding schools, with which the refugees were very familiar, some children’s contact with their families tended to wither away and their loss of exposure to family values and of the experience of family life may lie behind some of the behavioural problems they experienced. The unbalanced demography of the Kakuma camp, with its lack of marriageable females, coupled with the lack of work prospects, conspired to create a very uncertain future for these young people.

The initial decision to place the large majority of separated children into group care reflected a tension between, on the one hand, the refugee leaders’ own planning and decision-making, and on the hand a more considered and professional judgment of the best interests of the young people by an international agency. The political agendas of the refugee leadership probably included their wish to secure an educated cadre of adults in the next generation, and these probably lay behind the deliberate separation of some of them from their families. This raised a very serious protection issue, namely the vulnerability of these young people to recruitment as child soldiers: it is clear that Family Attachment provided greater protection than group care. These political agendas probably also led to the leaders’ resistance to the idea of fostering, and it was largely the spontaneous actions of children in attaching themselves to families during the long journey from Pignudo to Kakuma that opened up the possibility of fostering on a larger scale. The Family Attachment model which emerged enabled groups of young people to select their own families, and allowed the pattern of the relationship between the children and the family to evolve organically, reflecting the particular needs and wishes of the children and the willingness and capacities of the foster family. This permitted some flexibility in the degree of integration of the children into the family, while at the same time allowing the close relationship between groups of siblings or friends to continue. The deployment of social workers from among the refugee community provided important sources of support and monitoring of the children’s well-being.

The evaluation of the Family Attachment programme does reveal a general satisfaction with the arrangement, but also some areas of difficulty. Almost one tenth of the children had unsatisfactory relationships with their foster parents which, presumably, had not always been picked up by this monitoring system. Fostered children obviously faced the same uncertain future as those who remained in group care, and it is unsurprising that foster parents expressed concern at the costs of continuing to allow them to remain with the family, and, in particular, the expenses associated with marriage.

With the benefits of hindsight it is clear that the lack of long-term planning for these separated children was a major weakness and this, coupled with the lack of a clear and proactive family tracing programme, led to the drifting of interim group care into permanence.
Child participation has been a major feature of both group care and Family Attachment. The idea of child participation readily took root in a culture in which children are seen as having the right to express themselves, and the system of allowing young people to choose families for themselves and the social structure of group care, both illustrate the way in which young people were encouraged to take an active part in creating and shaping their own care arrangements.
Appendix: List of Abbreviations Used

IRC       International Rescue Committee
LWF       Lutheran World Federation
SC/S      Save the Children Sweden
SPLM      Sudanese People’s Liberation Movement
UNHCR     United Nations High Commission for Refugees

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