MHJ Philosophy on the Care of Children

ONE We believe that children belong in families and that all efforts should be made to ensure that children can be raised in their own family or, where that is not possible or safe, in another loving family.
Psalm 68:8 'God sets the lonely in families'

TWO We believe that the Bible instructs Christians to protect vulnerable children's rights as well as meet their needs, and therefore we should take a rights based approach to ensuring children's needs are met. Among other things, this means upholding children's right to be raised by their parents in a family.
Isaiah 1:17 'Defend the rights of the fatherless. Plead the cause of the widow'
Proverbs 31:9 'Defend the rights of the poor and needy'.

THREE We believe that the church has a critical role to play in ensuring that children everywhere are afforded an opportunity to grow up in a loving family. This role is fulfilled as the church mobilizes believers to give, support and volunteer with organisations that uphold children's right to a family, and open their homes to children in need of care in their own communities.
James 1:27 'Religion that God our father accepts as pure and faultless
is this: to look after orphans and widows in their distress'

FOUR We believe that vulnerable children and families deserve more than just our good intentions - they deserve our best efforts. We believe that our desire to help should be backed by a desire to learn. We must equip ourselves with skills and expertise first, and dedicate ourselves to ongoing learning. As such our development programs should be staffed and managed by people who are passionate and properly trained, so that our love does not result in unintended harm.
Matthew 7:12 ' Do unto others as you would have them do unto you'.
Romans 13:10 'Love does no harm to a neighbour'.

FIVE We believe that orphanages are the last resort for child care and are always to be understood as a temporary option.

What we know:
Most children in orphanages or other forms of residential care are not in fact orphans. At least four out of five children in residential care (orphanages) have one or both parents alive. Poverty and social exclusion are two of the main reasons why children are unable to live at home. Families often feel that placing their children into care is the only way to ensure that they get an education, enough food and other essentials. Therefore, the **appropriate first response to help such children is to support their family and**

community, providing relevant resources and services so that children can remain with their families.

A smaller percentage of children are placed in residential care due to abuse at home, severe neglect, or when they have no parents or extended family to care for them (due to death or abandonment). These children may not be able to live with their biological families, but other family-based care should be considered such as kinship care or foster care. A very small number of children may legitimately require residential care regardless of what other family-based options are available. Sometimes this is due to psychological issues that may mean that a child will not cope in a family for a period of time and requires center based care.

Due to the emotional, social and psychological impacts of institutionalization, residential care (orphanages) should always be the <u>very last resort and only a temporary option.</u>

Why orphanages are harmful: What the science tells us.
While residential care has a place and is necessary in some, rare circumstances, removing a child from their family and community is an extreme intervention, which can have profound detrimental effects on a child's development. Therefore, it should be used only as a last resort. Residential care can have a range of effects on a child and is somewhat dependent on the age of the child, the length of time they spend in residential care and the structure, standards and environment within the residential care facility. Having said that, no matter how well-run a home is, it is generally accepted that any form of residential care will have some adverse effects on a child. For this reason, family based options are a preference. Where residential care is legitimately in the best interests of a child, then care should be provided in a facility that has high standards, low child to staff ratios, and replicates a family-like environment in order to mitigate detrimental effects as much as possible. Some of the most common and concerning effects of residential care on children include:

DEVELOPMENTAL DELAYS

ATTACHMENT DISORDERS

A LACK OF LIFE SKILLS

INSTITUTIONALISED BEHAVIORS

A LACK OF LIFELONG RELATIONSHIPS AND NETWORKS

HIGH RISK OF ABUSE
Although an orphanage may meet a child's physical needs, there is overwhelming evidence that it consistently fails to meet a child's social and emotional needs. For the

past 60 years child development specialist and researchers have concluded that residential care cannot properly meet children's emotional or social needs. Despite this, residential care unfortunately remains the first, or often only, option given to children in adversity in many developing countries.

The MHJ Alternative to Institutionalization
The alternative care continuum outlines the different types of out-of-parental-care options for children who cannot stay with their biological families regardless of support offered. The continuum represents a preferential ordering of care options beginning with the least invasive and disruptive measures to the most extreme. MHJ commits itself to working toward the preservation of nuclear family units by assisting parent(s) so that they can keep their children, feed them, educate them, and nurture them. However, this is not always possible. In such situations we propose a continuum of care.

The continuum of care options is:
• Home - when parents are provided with the support needed to preserve the family unit
• Kinship care - when a child is cared for by their relatives or 'kin'
• Foster care - when a child is cared for by a family that is not part of their extended family. It is always the preference for a foster family to be from the child's own community and if not, as similar as possible.
• Emergency foster care - when a child needs to be urgently placed in care for reasons of safety they may be placed in emergency foster care while a social worker prepares a care plan
• Group Home - A typical house in the community which provides residential care for a small group of children (under 10) staffed by paid caregivers.
• Small residential care facility - residential care that provides a family-like environment with low staff-to-child ratios and high standards of care
• Institutional care - large residential care facilities

Some of the above options are generally considered temporary care. The exception is foster and kinship care which in some countries can be permanent where the expectation of the families and child is that it will be a lifelong relationship equal to legal adoption. The goal with any child who enters alternative care is to achieve a permanent solution for them as soon as possible with preference given to national solutions, to avoid disruption to the child's life and relationships. Permanent, national solutions would be local adoption or reunification with their biological family. While international adoption is a permanent, it is a non-national solution.

Thanks to ACCI (Australian Christian Churches) for much of the research, concepts and terms used above.
MHJ and Children Around the World
MHJ presently serves hundreds of children in multiple developing world nations. We care for children in Liberia, Kenya, Nigeria and Haiti. Every child we support receives

financial assistance and is afforded food, shelter and a quality education while remaining in a family. Many of these children would, in the institutional model, be placed in orphanages, not due to the loss of parents, but due to the extreme poverty of their parent(s). MHJ, however, is absolutely committed to the familial model of child care. All of our children throughout the world are living with their natural parents, or with extended family, or with foster parents.

In Nigeria, for example, we operate family based ministry to orphans. We place 'true orphans' with 'true widows'. In cases where a child's parents are deceased, and where no extended family is available, we provide a monthly stipend to a carefully screened and selected widow who in turn cares for an orphan. The stipend is sufficient to support the widow's needs as well as the child's. In cases where parents and extended family are present, we pay a stipend to the family so that the child can remain at home, with his or her family, and receive the necessities of life including food, shelter, clothing, medical care, recreation and ongoing education. In both cases, true orphans are given a loving family, and potential poverty orphans are not forced to leave the loving family they have.

In Haiti many our children are in a foster family setting. Every effort is made to assist the children reunite with their natural families, and where possible, that occurs. We provide stipends for the children's natural families so that the reunification can succeed. We provide homes for entire families, usually single parent homes. These very poor mothers would do anything to see that their children have adequate food and quality education, including surrendering them to an institution, which may or may not provide the desired help. The institution (orphanage) will most certainly not provide the love, the emotional and psychological, the social and moral nurture that children so require. The stipend assistance affords them the ability to keep their children and preserves family units. All of our children are provided with a home, monthly stipends, tuition for ongoing education, and medical care. Parents are given start up funds to establish small businesses.

In Liberia, a large number of children were truly orphaned by the ebola epidemic. Under the supervision of a priest in Liberia MHJ took responsibility for many of those orphans. Each and every orphan is living with extended family members or with families of the parish that Fr. Biah pastors. MHJ provides financial assistance for those families and for Fr. Biah as he continues to serve the children who have lost so much.

In Kenya, where we have our largest number of children, our Kenyan staff manages the distribution of funds, food and tuition to families from the slums of Nairobi to very remote areas and villages, including the isolated areas of the Massai. No child is in an institution. All 106 children are living at home with their parents and siblings or in homes with extended family.