

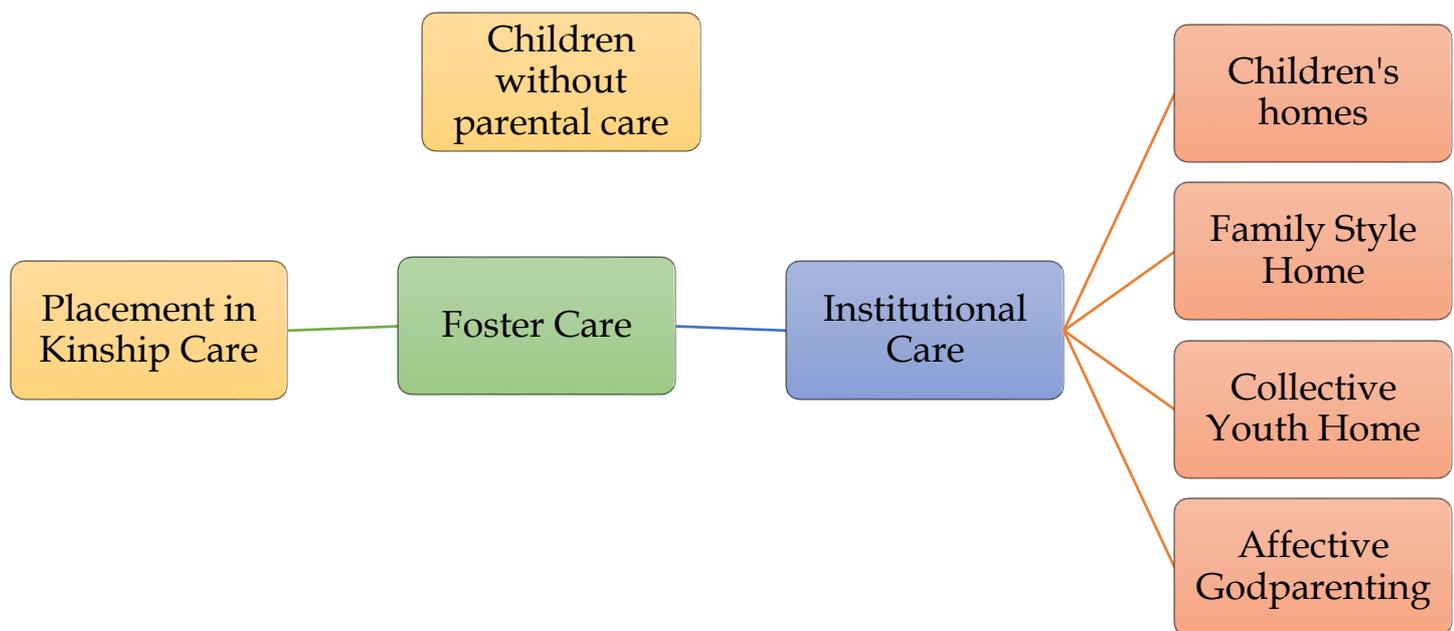
Kinship care and its primacy in the care for children and adolescents without parental care.

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The Family Guardian programme is an innovative public programme in the Brazilian scenario with the aim of providing extended and socio-affective families of children² who are victims of violence or rights violations and who are without parental care, with guidance, technical support and financial support.

In view of Brazilian laws and national and international conventions, it is necessary that children and adolescents removed from their parents by legal processes need a legal guardian who will be the reference for all issues pertaining to the guarantee of rights, developing and caring for that individual who needs of special attention since they have been victimized in past situations.

The UN alternative care guidelines for children without parental care³ state that every effort should be made to ensure that these individuals with violated rights or in situations of violence remain in their natural family⁴ first, as long as it reaches a new dynamic that allows protection and a healthy environment. However, when this possibility has been exhausted, work should be directed towards other alternative protection policies so that this child has their rights guaranteed, in a hierarchy of actions as shown in the table below:



Here it is seen that once the child cannot stay with the natural family, one needs to work on his reintegration into the extended family; once this possibility has been exhausted, foster care can be worked on and only as a last resort should the child be placed in institutional care.

¹ Kelly Lima and Jonathan Hannay have been working since 2009 at ACER Brasil (www.acerbrasil.org.br) on its formal kinship care programme called Family Guardian.

² When using the word child(ren) we are following the UM definition of those between birth and up to but not including 18 years old.

³ <https://digitallibrary.un.org/record/673583/?ln=en>

⁴ In Brazil, the natural Family is that composed of the parentes, or either one, and their children.

The work of reintegrating children and adolescents into their extended families is presented from two perspectives:

1. In order to avoid institutional care, when the impossibility of the child to stay with the parents is verified, where the work with the extended family is presented as the first investment in favour of the child to be reintegrated into his family and thus minimize possible trauma of separation.

2. As a possibility for children who are under a protective care order, whether in foster care or institutional care, to stay in this service for the shortest time, in order to be reintegrated into their extended or socio-affective family.

The importance of affective bonds and the right to live in a family.

The breaking of ties with the family and with the community represented here by school, religious temples, neighbours, relatives, playmates and even with pets, even if based on protective measures, has repercussions on the child as experiences and sensations of helplessness, betrayal and even abandonment, in addition to the loss of identity, the relationship with friends, affective references, and other aspects that arise with the trauma of separation. It is also necessary to highlight age specific effects, with regard to studies on institutional care for children in early childhood such as the Bucharest Early Intervention Project, where longitudinal research was carried out with individuals being cared for as babies and with these 18 years after the start of the intervention. In the assessment of the children at 16, who were the subjects of the intervention, three components were identified that are very important for success in the child's life: early intervention; a quality programme with well trained workers and stability in the child's life with a minimum of changes in their placement.

John Bowlby mentions in his studies the impact that the quality of the bond between two people fundamentally has on the cognitive, neuropsychological and social emotional development.

Soussumi points out in his studies that explain about the theory of basic registers and memory, the importance of looking carefully and with primacy to the issue of early childhood, within the sphere of neuronal development and limbic system. He points out that strategies are needed that offer new repertoires and experiences so that children can re-signify their stories and build new possibilities for elaboration, based on the care provided by a protective and stable reference figure.

In this universe, the work acts on family dynamics in order to guarantee the best care for children so that they can modify transgenerational patterns present in the families, build new protective and integrative dynamics and repertoires where decision making and conflict management are possible without the use of violence, and empowerment to develop autonomy for both the extended family and children.

When the family is referred by the social welfare agency, the first action must be to verify the presence of some aspects that favour a family to be guardians (the capacity for protection, care and attachment); and those that are negative (financial interest, ambiguity between care/bonds for the child and its parent; affective unavailability). Favourable points should also be identified for a child

to be placed in an extended or socio-affective family (bonding ability, children's participation in decisions, for example, the child chooses who he/she would like to stay with, siblings in the same family) and unfavourable (mainly repeated placements). Attention is paid to some parental behaviour that favour the return of custody of children to parents, (resilience, awareness of the process that culminated in the suspension of family rights by the parents, connection with guardians), or unfavourable (violence, lack of drug and alcohol rehabilitation, difficulty in bonding with the children). These points should be revisited throughout the work with the families. Once the intervention starts, the strategic actions described later are carried out according to specific instruments and obeying their temporality of application.

Work flow with extended families.

The development of a bond of trust between the project worker, the guardian, the children and other people who are part of the circle of relationships of the child without parental care. One of the premises that support the actions is that, by being able to count on the support of professionals, extended families can experience feelings of belonging, protection and security, essential for the promotion of mental health and human development, and through this experience they can expand their child care and protective repertoire. A second one is about the preservation of the affective bonds (family and community) of the child to ensure stability in his/her life, and thus reduce the damage caused by traumas of separation from the parents or of violence that has been experienced.

Within the work, there are well defined steps that show the path from the beginning through to graduation:

1. Programme: Establish and operate a programme that supports the vision and objectives and is replicable
2. Stage 0: Establish a system for the identification and facilitation of children directly into the programme, preferentially prior to a Child being placed into care (but not excluding those in care)
3. Stage 0: Provide effective diagnosis and transition of children and families into the programme
4. Stage 1 : Establish and earn the trust of the Child, Guardian and Family
5. Stage 1: Identify the cyclical issues that need changing for the Child, Guardian and Family
6. Stage 2: Jointly develop with the guardian, an ongoing agreed action plan for addressing the identified areas
7. Stage 3: Develop and build consciousness and ownership for the autonomous delivery of the ongoing action plan by the Guardian with Child participation
8. Stage 3: Successfully transition/exit the Child and Guardian from the programme
9. Post Prog.: Periodically monitor the Child/Family to ensure a safe, healthy environment

Methodological aspects necessary for effective work with the extended family.

The intervention offered to the families is carried out based on a tripod of specialized actions:

Home visiting.

Home visits are carried out to learn about the conditions and needs of the family as well as to work with them, within a space that they consider emotionally safe. At the first visit, the family diagnosis begins; the objective is to map the child's current situation within its new family context and the relationships present, as well as the relationship of this family with its community and the context of its relations with other institutions and services. Thus, family visitation comprises checking basic documents of family members to guarantee access to services; opening a folder to

store the records of the actions performed, doing a historical genogram to verify patterns of transgenerational violence and other patterns, doing a genogram of home relationships, doing a social network map to verify the services that the family accesses and what is the quality of the relationship between the family and the services and lastly, a survey of financial needs.

During the time of the project worker's intervention with the family, it is necessary to work on building trust and bonding. These are the basis for coping strategies with families in solving problems and creating new contexts of protection, support and care.

Every six months a plan is developed together with the family according to what it has to offer towards the needs of the children and at the same time it seeks to organize other priorities that the family group needs to develop according to its priorities.

For this type of work, the project worker performs a work strategy with the extended family that consists of three phases:

1. **Doing for:** consists of the work in which the project worker due to the immediate need for the action, performs this action for the family. For example requesting documents, or making an appointment for a doctor.
2. **Do with:** consists of actions that the family is already aware of what needs to be done, but still needs support to carry out the action, has the project worker as a support to assist in the action, for example: follow up to request social assistance benefits, or to accompany them in school meetings.
3. **Do it by yourself:** it consists of actions that the family performs independently without the support of the project worker, such as enrolling a child in school, schedule and go to medical appointments, guide children in their daily activities.

To implement this whole process, tools or forms are also used, which together with the participation of families, materialize these actions in time and quality. They are:

Social network map: where every six months the services that the family accesses are measured within four major blocks: socio-legal, health, community life and education. Each of these aspects is assessed with the guardian as to access and quality of the bond so that the more access and the higher the quality of bonding with the services, the more protected in terms of public services, community relations and access to the right to family life is identified.

Household genogram: it monitors the quality of family relationships, as well as the members that make up the family. In this context, every six months the family member and the project worker map who arrived at the house, who left, if someone was born, if someone died and what relationship are established between the members. The importance of this mapping is to verify the impact of relationships within family dynamics, as well as the influence of the turnover of members within the home. Since one of the perspectives of the work is to ensure the stability of family bonds.

Income form: together with those responsible for the children, income, financial gains and expenses are measured; it provides a six-month planning of where the priorities for the use of money are.

Action plan: this lists the actions by priority for working on over the next 6 months. Does this planning moment take into account what needs to be done? Why do things? For what result?

And how to do it? This line of reasoning, together with those responsible for the children, will provide the basis for future decision-making with security and autonomy. Once the situations are listed, the next steps are taken in order to put the action into practice taking into account the level of agency of the family and the concreteness of the situation.

Thus, this bi-annual planning and follow-up of the families qualify the specialised technical work that is delivered.

Socio-educational meetings.

The meetings can happen monthly or more frequently and aim to be a space to develop mutual support networks. It is the moment when traumas, exchanges of experience and orientations take place, but above all, people create connections based on life histories and experiences. The project worker is the moderator of the support group or when the subject requires specific moderation in a topic, he/she invites specialists in the subject to participate. The meeting takes place in community spaces, generally known by families and close to their homes. The intention is to give them the opportunity to develop social relationships with equals, promoting peer education and the formation of new bonds. Through the sharing of problems and solutions between peers, the support network is created acts to solve problems.

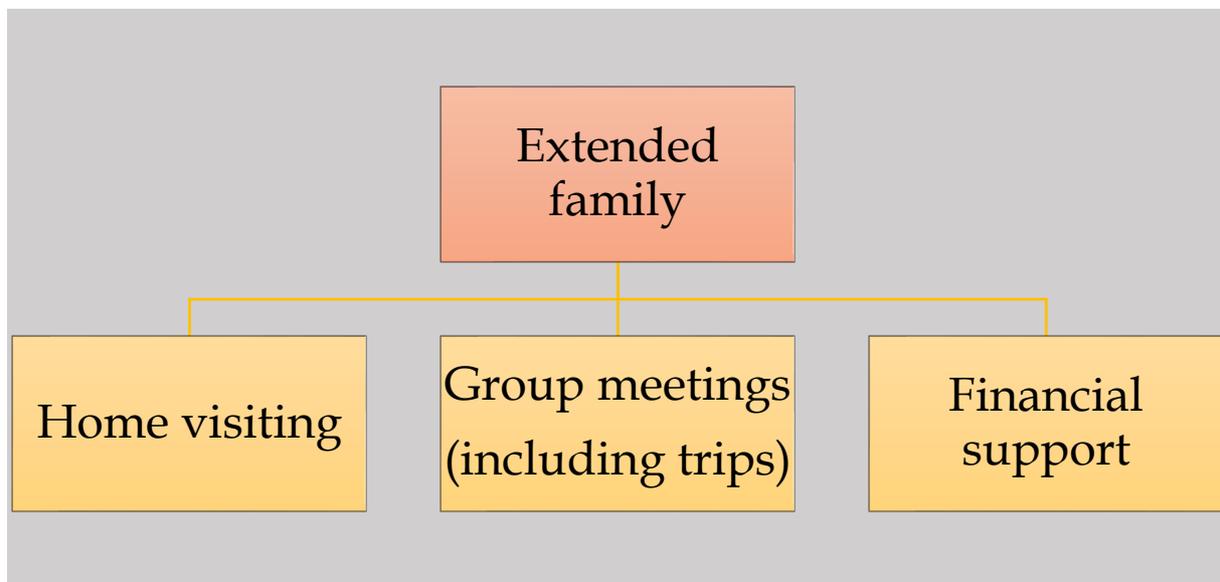
Trips are also an important group action; they are carried out with family members in public spaces which allows the appropriation of the places offered for community living, the exchange of experiences with other families, spending time with people of different ages, access to leisure and cultural spaces thus guaranteeing these fundamental rights as well.

Financial support.

For any family context, the arrival of a child to live in the home increases the family's expenses. In Latin American countries, which generally have per capita income close to the poverty line, not looking at the financial expense issues with a new member can create a situation where a situation of vulnerability is worsened. Analysing the financial context of a family as a weighting factor so that it may or may not be able to care for a child is a situation that can unfairly compromise the level of protection, care and development it can offer. In this respect, it is necessary that public programs provide financial support to these families in order to diminish the financial impact of the arrival of a child.

This value must be seen and calculated so that, at the same time that it meets the need for family support, it can be made sustainable at the level of public policy so that the continuity of support is viable and that it is not seen by the community as 'remuneration' of the family to take care of one of its members.

In the Brazilian experience, the amount granted to an extended family is the equivalent of a food basket, that is, a financial support that meets the basic needs for food and hygiene of children.



The primary objective of the work is to strengthen extended or socio-affective families, by repairing the damage caused by violence and reinforcing or restoring the feeling of belonging and identification among family members. At the same time, the project worker facilitates the exercise of care and protection by adults.

Graduation.

The period of intervention with a family through a program to support the extended family is, on average, 30 months. The length of time varies according to the protective capacity, development conditions and care that the extended family is able to offer to the child. Managing, planning and executing actions that offer a new repertoire for this public requires that the project worker develop skills and competences in the caregivers.

When the family demonstrates the ability to deal with stressful situations, manage conflicting situations, articulate the care and protection network for the child autonomously and offer a space for healthy development that meets the child's particular needs, they are invited to their graduation ceremony.

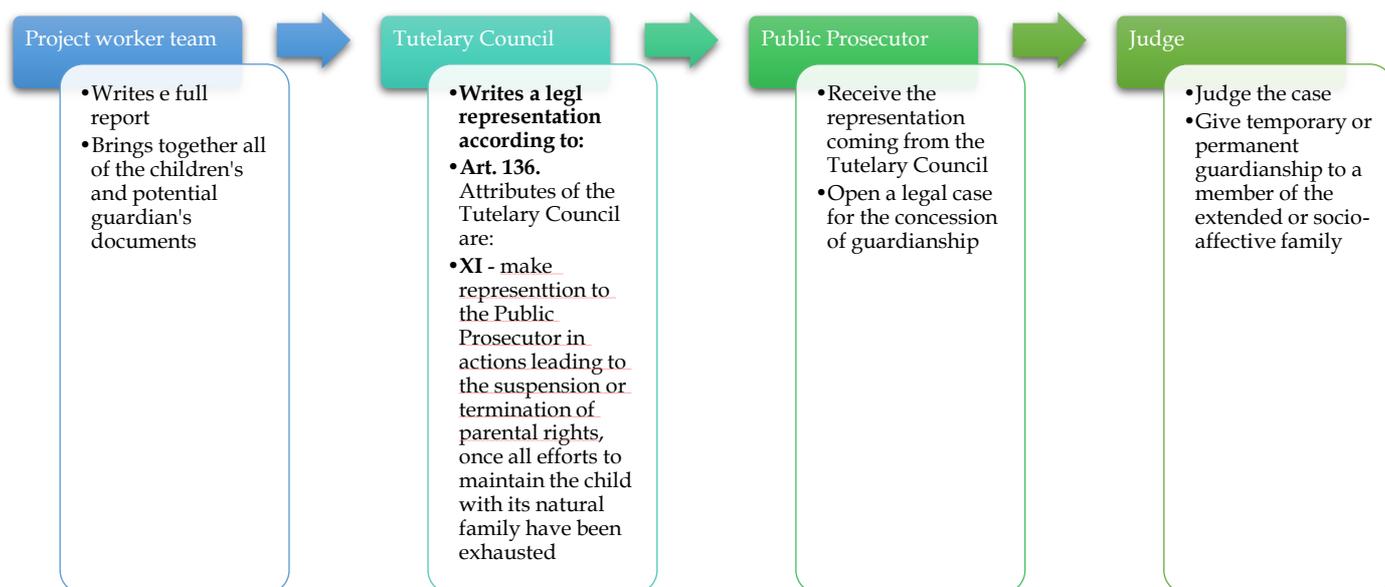
Legalisation of guardianship in the extended family.

In the Brazilian context, there are rules and legal actions that are protective measures and that need to be applied in the case of children without parental care so that their rights to education, health and civil identity are recognised and exercised.

The extended family member who is with the child will need to guarantee rights and access to services, such as school, health, leisure. The primary right for the child to have free movement and development as a citizen is that they have the right to a guardian legally conferred, since it is they who will be legally and civilly responsible for the care of the child.

If the adult does not have legal guardianship of the child, an action by the Social Welfare office (that is responsible for the family's situation) with the Tutelary Council (which ensures the rights of

children) is required, as indicated in the Statute of the Child and Adolescent:



Conclusion.

The experience of working with children who have suffered violence or serious violations of rights and who have been left without parental care deserves attention and clarity of referrals in order to prevent protection measures from being even more traumatic or perpetuating the violations.

Living as a family is the best alternative for a child to grow up healthy, with references to life and experiences that will strengthen his/her place as a citizen in the world. However, it is essential that this family is capable, prepared and also acquires a care repertoire, since the way of working and strategies to deal with aspects of trauma and violence are quite specific.

The extended family appears in this scenario as an alternative not only for the brevity of staying in institutional or foster care, but also as a resource to be used first following working with the parents when there are no positive responses from them, thus avoiding the child's placement in institutional or foster care.

Working with the extended family requires quality work, with professional support, that is ongoing and offers families support, strengthening and preparation strategies to deal especially with stressful situations. For children, the extended family presents itself as a space for continuity, for the expansion of bonds, including their permanence in community spaces such as school, neighbours and health services.

In 2020, ACER Brasil published a longitudinal research⁵ after ten years of its program (2009-2019), where it demonstrates its effectiveness in working with extended families:

"... the Family Guardian Program is effective as an alternative care program for children and adolescents without parental care. The offer of specialized, practical and emotional support to the guardians allowed the child and adolescent to remain in the same family, which gives them stability, security, care and a sense of belonging to the family and community, which are essential for their integral development. In addition to guaranteeing the right to family and community coexistence, it was possible to identify results related to other fundamental rights,

⁵http://www.acerbrasil.org.br/arquivos/publicacoes/AssistenciaSocial/avaliacoes/Evaluation_Family_Guardian_2020.pdf

such as: life, health, food, education, training. Added to these are the protection from abuse, neglect, exploitation and other forms of violence or serious violations of rights. "

Finally, working with the extended family in Latin America is to work within the socio-historical reality of the region, as well as offering an intervention capable of better serving the interests of children without parental care with a cost to the public coffers much lower than foster care or institutional care.

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