

# Key Learnings from the Ishema Mu Muryango Program



The Ishema Mu Muryango program was implemented from April 2013 to June 2015 with funding from USAID's Displaced Children and Orphans Funds (DCOF). The goal of the program was to safely and sustainably reintegrate children living in institutions in two districts of Rwanda into their families or communities and prevent further institutionalization through developing family-based alternative care options that are suitable and sustainable. The program was implemented by Global Communities working in close partnership with Hope and Homes for Children and with additional support from UNICEF.

This document highlights some of the key learnings from the program which can be used by organizations, governments and other social and child welfare actors that are implementing deinstitutionalization programs. It also includes examples of successful reintegration stories\* from the Ishema Mu Muryango program (IMM).

## **The different areas of expertise of the main partners were a major reason behind the program's successful results.**

Global Communities is well known for its community-based development expertise, as well as its strong experience working in Rwanda. Home and Hope for Children is a recognized leader of deinstitutionalization programming worldwide and is the Rwandan government's main partner in developing a national family-based care system. The different areas of expertise and the distinct approaches provided by each organization are the reason behind the IMM program's successful outcomes.

Global Communities lent its expertise in mobilizing communities by conducting community sensitization meetings with local leaders at each decentralized structure. These meetings generated a shared understanding of the benefits of raising children in family-based settings and the negative effects of institutionalization on the physical, cognitive and emotional growth of children. These meetings also imparted a collective sense of responsibility to put in place a system to prevent children from unnecessary separation from their families. The Global Communities team worked with local authorities at the district, sector and cell level to establish Child Care Networks which are responsible for identifying all families in crisis.

Global Communities also relied on its past experience in the delivery of integrated, community-based services. These services, such as lending and saving groups, playgroups, positive deviance hearth groups, were provided to families with reintegrated children as well as the wider community at-large. These of integrated, community-based services are helping build household resiliency and keep vulnerable families connected to the larger community.

*\*NOTE: The names of the children and parents used in these case studies are not their real names.*



Integrated community-based services, such as savings and lending groups, help families build household resiliency as well as helping build social cohesion and natural support networks among group members.

The Hope and Home for Children teams were essential in providing their expertise in reintegration issues and professional social work support. They performed key functions such as assessing each institutionalized child, creating Individual Care and Development Plans (ICDP), preparing children and families for reintegration through individual and group trainings, linking families to assistance and services, conducting follow up visits with families post-reintegration and, in general, providing emotional and psychosocial support for children and families during their critical transition period.

### **Integrated, community-based services help build household resiliency and create social cohesion that make families stronger.**

Integrated, community-based services confer a number of benefits to participating households. They can build household resiliency by helping families increase their income and material assets, as well as helping them gain new knowledge, skills and coping strategies. During the course of the IMM program, integrated, community-based services were offered to families with reintegrated children as well as to the wider community. They were delivered by community-based volunteers in group settings. Using a community-based approach to deliver training and information has many advantages. Over time, it is less expensive and more sustainable to use community volunteers as trainers, rather than relying on professional case workers. At the same time, people better identify with people from their own communities with similar backgrounds. Most importantly for vulnerable families, however, is that using a group model helps create social cohesion and a sense of collective responsibility.

A prevailing trait of families in crisis is isolation. Being part of a group, however, helps ensure the family is no longer isolated. The group setting also provides opportunities for members to talk about their families, their issues and challenges in an informal, nonjudgmental setting. It create opportunities for peer-to-peer learning. This ability and time for sharing is especially valuable when it comes to promoting improved childcare practices. Being part of a group also creates a natural support network for the family. This is especially important in cases where relatives and other extended family are not supportive. If a member is absent too many times, other group members will inquire after them, which helps that member develop a sense of accountability to themselves and others.



Reintegration solutions need to be flexible to best meet the needs of those involved. Community-based living was developed as an option for disabled adults where placement with a family was not feasible.

**There is no one-fits-all solution. The options need to be varied to address the needs in each particular case in the most appropriate way.**

Reintegration with the immediate or extended family is not always possible or optimal. As a result a variety of options need to be available to best meet the individual needs of the children and youth being deinstitutionalized.

Under the IMM program, a range of alternatives for former residents of the Noel Orphanage were created, including:

- Reintegration with members of their immediate or extended family
- Reintegration with a foster family
- Independent living for young, capable adults
- Community-based living for adults with disabilities

In terms of reintegration with the immediate and extended family, training and support from case workers, has helped the children and families make successful transitions. Household resilience building activities have helped these impoverished households be better prepared to support a new family member. At the same time, early childhood development activities, such as playgroups, are helping vulnerable children develop their social, cognitive and motor skills, while teaching mothers and fathers about improved parenting practices.

Foster families can provide a viable alternative if a child cannot be reunited with their birth or extended family. A key factor in this process is finding foster parents who have the right motivation for taking a child into their home. Training and preparation play major role in readying foster families as deinstitutionalized children often display aggressive and difficult behaviors. Understanding the reasons behind their behavior and knowing how to respond accordingly, is important to ensuring a successful transition.

For young adults, reintegration with a family is not always a viable option. As a result, many young adults opt for independent living. These young adults also benefit from the training and support that case workers provide. Life skills training, as well as general moral support has proven very effective in helping them begin new lives within the community.



One of the main causes of child abandonment in Rwanda is the mistaken belief that fathers are unable to care for infants or young children. Educating fathers to take more active role in parenting is key to changing this mindset.

The case of deinstitutionalization becomes even more complex when finding suitable family-based living arrangements for disabled adults. Community-based living was not an alternative when the IMM program began, however, it evolved to address the needs of adults with disabilities in cases where foster families and independent living were not viable options. In the case of the community-based living, disabled adults are matched up with caregivers to live in a household setting together. Reports to date demonstrate that this arrangement has worked remarkably well with residents showing behavioral improvements and greater levels of happiness.

### **Fathers need to be educated on taking a more active role in parenting.**

Cultural perceptions of parenting roles are a major factor contributing to the abandonment of children. It is not uncommon for a child to be institutionalized after the mother's death. The death of the mother is the trigger which starts the process of the abandonment. The father's death is less relevant. If the father dies, the child usually remains with the mother, despite the economic challenges she will not face as female-headed household. But if the mother dies, especially if the child is an infant, there is a belief that the father cannot take of him/her.

As result of these widely held beliefs, fathers need to be encouraged to take a more active role in parenting. This needs to occur in families where child has been reintegrated, as well as with men in general to prevent future child abandonment. The IMM program is helping to change this mindset through the playgroups, training and with the support of case workers. Playgroups have been helping educate both mothers and fathers about their roles as parents. The goal is to change the existing perceptions among men and women about gender roles and engage fathers to be active participants in the development of their children. This is a new component of the early childhood development activities that was not planned for under the IMM program, but has been integrated because the staff saw a need to address it. Case workers also play a key role in educating and encouraging fathers to be active parents.



Professional case workers play a key role in preparing families for reintegration. They link families to services, information and networks, as well as providing emotional and psychosocial support.

### **Professional case workers play key roles in the reintegration process and in prevention activities.**

The importance of case workers was demonstrated time and time again in the course of the IMM program. They linked vulnerable families to services established under the IMM program, but also with government services and various types of community support. They helped educate and train families on good parenting practices, conflict resolution and other ways to improve household dynamics. On a more informal level they act as coaches encouraging families to stay strong and remain hopeful. This psychosocial component of their support is a huge factor in helping families cope and plan for the future. Post-reintegration, they continue to play a pivotal role in monitoring and following up with reintegrated families and in supporting prevention activities. As a result, investing in the training and support of professional case workers and helping them develop tools and gain access to resources to successfully manage their case work is essential to establishing a sustainable child protection system.

### **Establishing community-based structures are a critical component for creating an effective child protection system.**

Professional case workers play a key role; their outreach must be complemented with community-based structures that focus on child protection. Community-based structures, working together with the local Child Care Networks established under IMM program, are an important first channel when responding to families in crisis. In addition to Child Care Networks which were established at the district, sector and cell level, the IMM program relied on community psychosocial workers to support vulnerable families.

Community psychosocial workers proved instrumental in the close monitoring of children and families. They provided updates to case managers, advocated for families dealing with local authorities and linked families to available resources in the community. The collaboration between the social workers and community psychosocial workers directly contributed to the progress made in the placement process. This success is due to the efficient and effective division of labor between the case workers and community psychosocial workers, with case workers focusing their efforts on new placements and delicate cases, and community psychosocial workers assisting families to fully integrate into community life.



An active community-based structure, combined with the support of professional case workers, helped a young mother reunite with her abandoned baby and reconcile with her family.

The involvement of community psychosocial workers has additional advantages. Since they are locally-based, they can report issues of concern in the community immediately. They understand the local context of the community and are familiar with the circumstances of the particular households involved. For example, they are aware if the family is experiencing economic stress, physical or mental health issues, domestic violence, substance abuse or other factors which make them more vulnerable. Community-level referrals in collaboration with the Child Care Networks help strengthen the child protection system and prevent family separation.

Equally important is the cooperation and support of local authorities in this process. The IMM program experience in the districts of Rubavu and Nyarugenge proves what successes are possible when local authorities understand the implementation phases of the program and are actively engaged in the management of key child services institutions. In districts where local authorities were less engaged, the program experienced challenges. In other districts, the level of understanding of the importance of the Rwanda national strategy for childcare reform was limited. As a result local authorities were less engaged and had limited involvement in the identification of foster parents and post-placement follow up.

### **The issue is larger than just reintegrating children, it is about breaking the cycle of vulnerability that puts families at risk in the first place.**

While the deinstitutionalization of children is a critical step, there needs to be more emphasis on addressing the underlying causes that lead to child separation and family breakup.

Orphanages can seem like an easy solution to a complex problem – they do not address the underlying causes of child abandonment in Rwanda, namely cultural perceptions about gender roles, social stigma of unwed mothers, poverty, and mental and physical health issues. To address these issues, programs and structures need to be put in place to help strengthen families.

It is important to remember deinstitutionalization is not a one-time process that happens abruptly. It takes time, thought and careful planning to find the best solution for the individual children, families and communities involved. It requires commitment from governments, institutions and communities to grapple with challenges and obstacles as they arise. Most importantly, it requires the continuous support of families and communities so that they can be strengthened and develop their overall capacity so that future children will not be removed from their homes.

# Success Stories from the Ishema Mu Muryango Program

## Story 1: Mugabo, example of a child successfully reintegrated with his extended family

Mugabo was placed in the Noel Orphanage after his mother died in childbirth. He lived there for more than three years, until 2013 when case workers under the IMM program used family tracing to locate his mother's sister. The case workers invited her to come to the orphanage to meet him. Initially she was reluctant. She had already been taking care of Mugabo's older sister since her own sister's death and had two young children of her own.

With encouragement from the social workers she agreed to come and meet him and once she saw him, she decided to bring him home with her. The case workers worked on preparing her and Mugabo for his transition to his new home. They helped connect her to a playgroup, a savings and lending group and other community-based services.

Almost two years later Mugabo is thriving in his new home. Rebecca marvels at the differences she sees in him. "When he first came he would fall down while just standing, but in six months he could stand strong and started calling me 'Mama.'" The other mothers at the playgroup also now call her "Mama Mugabo." She credits the playgroup with helping Mugabo's development a lot. "What I can see is that he has really changed since he start coming here. He learns new things and then he is excited to come home and teach them to the other children...He used to be fearful of other children, but now he can play and communicate with them," she says.

She can see how the social interaction at the playgroup has really helped bring Mugabo out of his shell. She, too, has gained a lot from participating in the group. She explains her main goal now is to ensure all her children have good health and success in the future.



Rebecca Mbituyimana "Mama Mugabo" with Mugabo. He now lives with his aunt, older sister and cousins.

## Story 2: Garuka and Gasore, example of siblings reintegrated with their birth family

Twins Garuka and Gasore were placed in the Noel Orphanage when their mother died in childbirth. Their father had died years earlier due to an illness and their three older siblings (Emmy, Habimana and Elise) were sent to live with relatives.

When the Noel Orphanage began the process of reintegration under the IMM program, case workers located their oldest sibling Emmy using family tracing. At that time, Emmy was already taking care of her two younger siblings as well as her own daughter.

When the case worker approached Emmy, she felt torn about taking in her siblings. But the social worker continued to reach out to her and after six visits, she finally relented and agreed to at least come visit Garuka and Gasore in the orphanage. When she first met them, she explains how she saw their “mother’s face in them” and she was determined to bring them home with her.

When Gakura and Gasore came to live with Emmy, they were just five years old and it was a challenging transition. “In the beginning it was very tough. The twins were very isolated and would not communicate...They did not really understand the situation and even though they knew their mother had died, they kept asking, ‘Where is my mother?’” It is as if they were grieving for the mother they lost at birth,” she says.

But after a few months, Emmy saw changes. Now, “They go out and play with other children. They socialize and go to school,” she says. The family still receives regular visits from the psychologist who is helping the twins and the rest of family with the transition. Emmy also has support from a community volunteer, trained under the IMM program, who acts a mentor for her. Emmy explains, “She comes on her own. I don’t invite her, but she comes anyway to talk and give me encouragement.”

When asked about her decision to accept Garuka and Gasore into her household, she says. “I am very happy with my decision...I took time to think about it and I know it was the right decision.” She concludes by asserting, “Nothing but death will separate us now. I am determined we will stay together.”



Elise (13), Garuka (7), Mutesi (3), Gasore (7) and Emmy (23). Emmy is now taking care of her four youngest siblings, plus her own daughter.

“Nothing but death will separate us now. I am determined we will stay together.”

— Emmy Nkusi speaking of her decision to take in her two youngest siblings



### Story 3: Joseph, example of young adult successfully transitioned to independent living

Joseph began living in the Noel Orphanage when he was 13 years old. He and his younger sister had been living with their aunt after the death of their parents, but she felt she had to give them up when the financial burden became too great.

After almost seven years of living in an institution, Joseph is now living independently and sharing a small house with his sister. Joseph and his sister are just a few the more than 140 young adults who chose to live independently after leaving the Noel Orphanage.

For many young adults, the idea of being reintegrated with a family can be very stressful. Even if the family members are related, being institutionalized for so many years can make joining a family extremely challenging.

As Joseph grew older he realized that eventually one day that he would have to leave the orphanage. He explains, “It was hard at first to understand that I would need to be independent, in part because in the orphanage everything you need is provided. If you need food they give you food. If you need shoes, they give you shoes.”

Despite this security, Joseph knew that something was missing. “I didn’t know the outside life...I didn’t know how to live independent, how to be a man,” he says.

With the closure of Noel, Joseph and his sister knew they did not want to return to their extended family. They wanted to try living on their own. He explains how the social workers supported them. “We had many meetings with case workers and training to help prepare us.” They helped Joseph and his sister Josiane find two small rooms to rent within a larger housing compound. Despite their meager accommodations, Joseph is proud of his new home.

Before leaving Noel, he was able to take advantage of a vocational training program provided by the government. He studied photography and design. Right now, Joseph is earning money by performing small jobs, like hand painting signs for local businesses, but he has bigger plans. His goal is to someday open his own small photography studio. “For me, I have an American dream. I want to be the boss and I want to work very hard,” he says.

Although the transition to independent living has not been easy for Joseph, he says he his pleased with his progress. “I miss my friends at the orphanage. I miss school, but when I was there I was already thinking about life on the outside...In the orphanage you are always with the same people and you do not have the opportunity to learn new things. Now when I need something I have to work very hard, but I have no regrets.”



Joseph (22) now lives independently sharing a house with his younger sister who attends boarding school.

“ I didn’t know the outside life...I didn’t know how to live independent, how to be a man.”

— Joseph Ngabonziza explaining his motivation for wanting to live independently

## Story 4: Rosalie and Sonia, an example of successful child abandonment prevention

Rosalie was already a single mother with a one-year-old son when she became pregnant with Sonia. She had dropped out of school and was living with her parents. Fearing their reaction if she told them she was pregnant again, she hid the pregnancy from them.

When Rosalie realized she in labor, she went a friend's home and gave birth to Sonia there. In distress and not thinking clearly, she carefully wrapped Sonia in a blanket and left her on a neighbor's doorstep. According to social workers, this is not an uncommon practice in Rwanda where there is a tradition of stigmatizing unwed mothers.

The neighbor alerted members of the Child Care Network, set up under the IMM program, and the baby was brought to the local hospital. Tremendous guilt weighed on Rosalie, and when she heard that the baby was going to be placed in emergency foster care, she went to the police and turned herself in. She says she did not care what the consequences would be. "When they brought the baby to the hospital, I felt such sorrow and I went to the police and said I was the mother. I didn't care what happened to me," she explains.

After three days in custody, she was released due to the intervention of the members of the Child Care Network and IMM social workers who helped her be reunited with Sonia. After Sonia was released from the hospital, case workers continued to provide support to Rosalie and her family, even helping Rosalie reconcile with her parents, who, while disappointed, have pledged to continue to support Rosalie.

The role of the case workers is critical in helping link families to much-needed services as well as helping them overcome emotional barriers during times of crisis. The IMM program supported case workers by delivering training on topics like reintegration and child protection with funding from UNICEF.

Today, Rosalie mother says the family has no serious issues. "Life is normal," she says. Rosalie's father is more reticent. He expresses his disapproval in Rosalie's decisions, but in the end he concludes, "A parent will always remain a parent and you must take your responsibilities." He says he will continue to help support her and his grandchildren. "I feel disappointed. I expected a lot from her. Now I just have to make sure she can move forward."

Although Rosalie is living with her parents, she has hopes for the future. She wants to study cosmetology and she has even found a woman who is helping mentor her for free. Eventually, she hopes to complete the one-year vocational course that is required so she can get a steady job. "I only have one goal now, to see how me and my kids can survive," she says.



Rosalie (23) with one-year old daughter. Fearing the reaction of her parents, Rosalie abandoned Sonia at a neighbor's house when she was born.



I only have one goal now, to see how me and my kids can survive."

— Rosalie on her determination to build a better life for herself and her children

## Story 5: Patrick and his children Iragena and Nirere, example of siblings successfully reunited with their birth father

Four years ago, Patrick lost his wife shortly after she gave birth to twins Iragena and Nirere. He and his wife already had three children. The local authorities discouraged Patrick from trying to take care of the infants on his own since he already had three other children and no wife. They advised him to place them in the orphanage.

These well-meaning but misguided intentions were common before the IMM program. Once the mother dies, it is widely believed in Rwanda that the father will not be capable of taking care of the child, especially if it is an infant. So, if the mother dies and there is no female relative willing or able to take the child in, the easiest solution is placing the child in the orphanage. This cultural perception that fathers are not fit to take care of young children is one of the main reasons of child abandonment in Rwanda.

Once in the orphanage, Patrick visited Iragena and Nirere as regularly as he could. But he had never considered bringing them home, even after he remarried, until a social worker approached him. She carefully explained to him the benefits of raising them at home in a family setting. She connected him to training for parents and made regular visits to help prepare him and the rest of the family for their arrival. She also helped him apply for financial assistance available as part of the reintegration package under the IMM program.

Patrick credits the social worker with helping them during the transition and convincing him that he would be able to raise the children. He understands that his role as father is more than just earning an income and providing material things for the household. "I understand the meaning of parenting and, even without a wife, I would never let them be taken back." If he had to advise another father in a similar situation, he says, "I will give him any support, and encourage him to work with his wife so they know how to do it."



Patrick with five of his six children. Iragena and Nirere (4) were placed in the Noel Orphanage after his first wife's death.

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I understand the meaning of parenting and, even without a wife, I would never let them be taken back.”

— Patrick Rwakarema, father of Iragena and Nirere

## Story 6: Ruth, Habimana, Mutoni, Nshimiye and Yves, example of disabled adults successfully integrated into community-based living

Francine Rugema, like so many mothers, has her hands full. What makes her different is that her five “children,” who range in age from 20 to 30 years old, all have disabilities. Francine is one of three community-based caregivers living in a group home with five disabled adults who have been transitioned from the Noel Orphanage.

It has only been one and half months since they formed their group home, but already Francine can see positive changes in their behavior. Just the fact that they call her “Mama” she says is a sign of development. When they were in the orphanage, they just referred to everyone as “caretaker” or “umurezi” in Kinyarwanda. They did not even distinguish between men and women. Now they know her as “Mama,” which demonstrates that they are beginning to understand family roles.

Francine understands the dynamics of her new family members, because prior to living in the group house she was a caretaker for disabled adults at the Noel Orphanage. Before they were always confined in the orphanage, but now they can go to the market and walk around the neighborhood. They enjoy going to different church services and they have friends in the community.

Most importantly of all they receive individualized attention and care, which they never received in the orphanage. “Each person has their own story,” she says. “Like living with anyone, you need to know what they like and dislike...I ensure everyone is in their area of comfort.”

During the day, Ruth, Habimana, Mutoni, Nshimiye, Yves and the 21 other residents in community-based living go to the Ubumwe Community Center (UCC) located just down the road. The UCC, established in 2005, functions as a day facility for disabled adults and severely disabled children. All 26 disabled adults who were transitioned from the Noel Orphanage spend the day at the UCC.

Zacharie Dusingizimana has a vast amount of experience working with disabled populations. He runs the UCC and knows all the former residents of the Noel Orphanage intimately and can describe in detail the changes he sees in them since they have been deinstitutionalized. Ranging in age from 17 to 45, it was a challenge for some of them to transition to community-based living. Matching up members in each household was a struggle at first, he explains. Because of the different personalities, they had to move some people to different homes. “But now everyone is stable and enjoying their family,” he says. “Each family runs independently with its own head. Each family has its own problems, just like the regular community, and they know how to resolve them.”



Ruth, Francine and Mutoni at the Ubumwe Community Center. Francine helps take care of Ruth, Mutoni and three other disabled adults in a family-based setting.

“They are functioning better in community-based living. The family members chip in. They feel like a real family.”

— Zacharie Dusingizimana, Executive Director of the Ubumwe Community Center describing the benefits of community-based living

## Story 7: Munezero, example of a child successfully reintegrated with a foster family

One day Munezero's mother took him to church. Once inside she asked another woman to watch him while she stepped outside for a minute. She never came back. Munezero was placed in the Noel Orphanage when he was just one year old.

Today, Munezero has a loving home and is thriving under the care of his foster mother, Alphonsine. With three grown children of her own, Munezero calls her "Grandmother," which she loves.

There were definitely some challenges when Munezero first came to live with Alphonsine just over two years ago. Some of his behavior was merely frustrating and exasperating, and some of it was more troubling. He would go down to the nearby river and sit for hours by himself. He fought with the other kids in the village. Most disturbing of all was when he killed some small livestock – once a chicken, another time a rabbit.

Through it all, Alphonsine kept her patience. She credits the training she received for helping her through the transition. She understands that when he killed the animals that he was punishing her because she had gone to visit a neighbor and left him alone. Her patience and kindness has paid off. "Over time he has changed. Now he is good boy...It was a challenge at first. It took time to convince him that he was going to be fine here," she says.

Alphonsine also had the support of community leaders, the local school and her older children during this period of transition. When he first arrived Munezero got into a lot of fights with other children in the village. He was bullied by other kids. So the village leader called a meeting explaining to all the families there that they "need to support this child. He is a victim of the orphanage." After that things improved for Munezero. He began to make friends and play with other kids in the village.

When asked about her motivation for becoming a foster parent, Alphonsine recounts the tragedies she experienced during the genocide. Her husband was killed and she and her children fled over the border to the DRC. They found refuge in a village and even though they had no relatives there and did not know anyone, the community came together and helped them. "People of good will helped take care of my own biological children." Since then she has felt a strong need to help others. "So when I heard about the children in the orphanage, I said to myself, 'I need to care for one of those children.'"

Despite this difficult period in her life, she feels fortunate. When talking about her good fortune, she says, "I am very happy and my older children are very happy. We love each other and we have to give love to another child."



Alphonsine and Munezero, who was abandoned by his birth mother when he was just one year old.

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I am very happy and my older children are very happy. We love each other and we have to give love to another child.”

— Alphonsine Kanimba, Munezero's foster mother