

## Alternative Forms of Care with a Special Focus on NGO BOSCO's Model of Foster Care

George PS<sup>1</sup>, G Anbu Selvi<sup>2</sup>

<sup>1</sup>Research Scholar, Sree Thyagaraja College, Pollachi, Tamil Nadu, India

<sup>2</sup>HOD, Social Work, Sree Thyagaraja College, Pollachi, Tamil Nadu, India

Cite this paper as: George PS, G Anbu Selvi, (2025) Alternative Forms of Care with a Special Focus on NGO BOSCO's Model of Foster Care. *Journal of Neonatal Surgery*, 14 (15s), 1359-1366.

### ABSTRACT

This article explores the landscape of alternative care for children in India, with a special focus on foster care as implemented by the NGO BOSCO. Grounded in the rights-based framework of child protection, the paper begins by categorizing various forms of care types – institutional, kinship, adoption and foster care. It highlights the global and national shift toward family-based alternatives, making institutional care a last resort. Drawing on both international frameworks and evolving Indian legal and policy mechanisms, such as the Juvenile Justice (Care and Protection of Children) Act, CARA guidelines, and the Mission Vatsalya scheme, the article examines how alternative care is being integrated into national child protection systems. Special attention is given to the cultural nuances of kinship care and the emerging relevance of foster care in India. The article then presents BOSCO's grassroots model of foster care, showcasing the organization's structured processes in identifying suitable children and foster families, conducting rigorous assessments and training, ensuring smooth transitions, and ongoing monitoring. Through BOSCO's experience, the article reflects on operational challenges, systemic gaps, and the potential of foster care as a viable alternative to institutionalization in the Indian context. The study underscores the need for strengthened community-based care models, enhanced support systems, and robust monitoring mechanisms to realize the vision of family-based care for every child in need.

**Keywords:** *Alternative Care, Foster Care, Child Protection, Institutional Care, BOSCO Model*

### 1. INTRODUCTION

India is home to one of the largest child populations in the world. With more than 436 million children (1), it presents unique challenges in safeguarding the well-being and development of its youngest citizens. According to the Census of India 2011, children comprise nearly 39% of the country's population (2). However, millions of these children face heightened vulnerability due to factors like poverty, child labour, trafficking, and abandonment (3). It is estimated that there are 30 million orphans and abandoned children in India (EPW). As per the National Crime Records Bureau (NCRB, 2022), there are more than 47,000 child missing cases. According to the National Family Health Survey (NFHS-5), these issues have led to a large number of children living in vulnerable conditions that compromise their physical and emotional well-being (MoHFW, 2021). The Ministry of Women and Child Development (WCD) has noted a worrying increase in the number of orphaned, abandoned, and surrendered children, with a 25% rise reported between 2020 and 2023 (Business Standard, 2023). This situation was further exacerbated by the COVID-19 pandemic, which left over 1.53 lakh children without one or both parents (MoWCD, 2022). Despite various governmental efforts aimed at safeguarding children's rights, a significant proportion of India's children remain at risk, highlighting the need for robust childcare mechanisms.

Alternative care comprises care models like, adoption, foster care, kinship care. Each model plays a critical role in ensuring that children grow up in a safe, nurturing, and stable environment. The significance of alternative care is further underscored by international frameworks, such as the UN Convention on the Rights of the Child (UNCRC) and the Guidelines for the Alternative Care of Children (2009), which emphasize the importance of family-based care. As a signatory to the UNCRC, India is committed to ensuring that children who lack parental care receive the support they need through appropriate care arrangements. This commitment is reflected in national legislation, including the Juvenile Justice (Care and Protection of Children) Act, 2015, which outlines provisions for foster care, adoption, and other forms of care. The Model Foster Care Guidelines, 2016—updated in 2024—further detail the implementation of these care options, highlighting the importance of non-institutional care. The guidelines elaborate on provisions for sponsorship, foster care, adoption, and aftercare, and introduce a monthly grant of Rs. 4000/- per child for sponsorship, foster care, and aftercare under the Vatsalya Mission, along with the procedures for accessing this support (D.O.No.30/18/2024-CW-II dated 26.04.2024).

Foster care, in particular, offers a compelling alternative to institutional care. By placing children in a family setting, foster care allows for a more personalized approach to caregiving, which can significantly enhance a child's well-being. However, the system faces several challenges, including social stigma, lack of awareness, lack of suitable parents, unwillingness of the children to go for foster placement, insufficient support for foster families, lack of legislation etc. Addressing these issues is critical to strengthening the foster care in India and ensuring that every child has the opportunity to live in a family.

This article provides an overview of alternative care mechanisms in India, with a specific focus on foster care. This article will touch upon some of the existing legal and policy frameworks, the role of Governmental and Non-Governmental Organizations (NGOs) in promoting foster care, the benefits and challenges of foster care, and recommendations for improving the system. Finally, the article will conclude with highlighting the importance of family-based care and the need for collaborative efforts to build a stronger, more inclusive care system for the at risk children in India.

## 2. UNDERSTANDING THE TYPES OF CARE INCLUDING ALTERNATIVE FORMS OF CARE

**Institutional Care:** This involves placing children in formal residential settings such as Child Care Institutions (CCIs), orphanages, shelter homes and group homes. While institutional care can provide immediate shelter, food, and basic education, it has limitations, such as lack of individualized attention, which can affect the emotional and social development of children (Browne, K. D. (2009)). Reports by the National Commission for Protection of Child Rights (NCPCR) have raised concerns about the quality of care in some Child Care Institutions (CCIs) in India, prompting the need for better regulatory oversight and support.

**Alternative Care** refers to a range of services available to children whose parents are unable to adequately care for them due to various reasons, such as economic hardship, health issues, or abandonment (Nigudkar, 2017). It aims to ensure that children who lack parental care are still able to grow up in safe, nurturing environments. Alternative care is essential because, without it, children are at risk of being exposed to neglect, exploitation, and poor developmental outcomes (United Nations General Assembly, 2010).

Alternative care is broadly categorized into family-based care options, including:

**Adoption:** Adoption is a legal process where the rights and responsibilities of the biological parents are permanently transferred to adoptive parents. The adopted child gains the same status as a biological child of the adoptive family, with full legal rights, including inheritance (JJ Act, 2015). Laws governing adoption in India include the Hindu Adoption and Maintenance Act (1956) and the Juvenile Justice (Care and Protection of Children) Act (2015). Adoption provides a permanent solution for children who are orphaned or surrendered. The Central Adoption Resource Authority (CARA), functioning under the Ministry of Women and Child Development, is the nodal body for regulating and monitoring adoptions in India. It ensures transparency, accountability, and adherence to the legal framework throughout the adoption process, both domestic and inter-country.

**Foster Care:** It is a child protection measure that provides temporary or long-term family based care to children when their biological families face crises that prevent them from providing care. This includes circumstances like illness, death, abandonment, or other conditions where a child's well-being is at risk (JJ Act, 2015). Unlike adoption, foster care places children with a substitute family that offers support and care until the child can be reunified with their biological family or another permanent living arrangement is established. This arrangement can be particularly beneficial for children needing immediate support without the intent of permanently severing ties with their biological parents. The Juvenile Justice Act (2015) and the Model Guidelines for Foster Care (2016 and 2024) govern the foster care system in India.

**Kinship Care:** Kinship care involves the care of a child by extended family members (relatives like an aunt, uncle or grandparents) or with close friends of the family known to the child, whether formal or informal in nature (UN Guidelines on Alternative Care). This form of care is common in many cultures as it allows children to stay within their family network, preserving familial ties and cultural identity. It is often informal and may not require legal intervention unless there are specific legal custody issues. According to UNICEF (2006), kinship care is the most prevalent form of alternative care worldwide.

## 3. WHY INSTITUTIONAL CARE IS A LAST RESORT

Institutional care is often considered a last resort option for children lacking family based support due to its significant limitations in meeting children's holistic needs. Research by Professor Kevin Brown highlights the vulnerabilities children face in institutional environments, emphasizing the heightened risks of abuse, neglect, and inadequate care (Kevin Brown). Numerous studies have documented structural challenges within institutional settings that can hinder children's physical, emotional, and social development. A prominent example is the work by Van Ijzendoorn et al. (2011), which identifies persistent issues such as unstable staffing, poor caregiver-child interaction, and inadequate physical resources that fail to create a supportive, nurturing environment necessary for children's development.

Media reports and studies frequently expose instances of abuse and violence within institutional care. High-profile cases in

India, such as those in Muzaffarnagar and Deoria, illustrate severe concerns, with children reportedly subjected to confinement, lack of recreational activities, and instances of sexual and physical abuse. A study conducted by the Tata Institute of Social Sciences (TISS) revealed that children in these institutions were denied essential services, vocational training, and open spaces, likening their experiences to those of prisoners.

Institutional care also falls short in preparing children for independent life. A significant challenge for care leavers is the difficulty of reintegrating into society without stable family support. Research by Keshri (2021) discusses the obstacles care leavers face, including limited educational and employment opportunities and difficulties forming stable relationships. The lack of personalized care further exacerbates these challenges, often leading to attachment issues, emotional difficulties, and behavioural delays (Kothari & Saikumar, 2014). These documented inadequacies highlight the necessity of prioritizing family-based alternatives, such as foster care and kinship care, over institutional care.

#### 4. EVOLVING CHILD CARE SYSTEMS IN INDIA

India's childcare systems have evolved significantly alongside transformations in family structure. Historically, India's joint family system, common in many regions, shared caregiving responsibilities among extended family members, ensuring children were well-supported in case of familial challenges (Vasundhra, 2021). In this collective framework, grandparents, aunts, uncles and other relatives actively contributed to a child's upbringing, especially when primary caregivers faced difficulties (Dr. M Rajashekarappa, 2023).

However, the shift toward nuclear family structures has reshaped caregiving norms, concentrating childcare responsibilities on immediate family members, typically the parents. As India modernizes and urbanizes, these smaller family units often lack extended support, especially when faced with parental conflicts or separation (IJCRT, 2018). The recent rise in divorce rates and familial disruptions has further strained the nuclear family's ability to provide stable care (IJCRT, 2024). Studies show that with the practice of both the parents working, rapid migration to metropolitan cities in search of jobs, mushrooming of unorganised settlement in the cities, modern lifestyle etc., there is a shifts in family dynamics contribute to vulnerabilities among children, with associated psychological, behavioural, and educational challenges (Douglas, V. I. (2020).

Despite shifts in family structures, kinship care remains the most prevalent form of alternative childcare in India. It is culturally rooted and mostly informal (Better Care Network, 2023).

#### 5. KINSHIP CARE COMPLEXITIES

Kinship care in India, while traditionally seen as a culturally fitting and family-oriented solution for children needing care, often presents complex dynamics. In many families, children placed in kinship care experience supportive and nurturing environments, as they are treated as integral members of the family. However, there are instances where kinship care arrangements lead to adverse outcomes, with some children viewed as burdens or even treated like labourers rather than cherished family members. This disparity is influenced by various factors, including economic stress, societal expectations, and lack of government support, particularly in informal kinship care settings. (Vasundhra, 2021)

Studies have shown that while kinship care generally allows children to maintain family ties and cultural identity, challenges such as economic strain on caregivers and lack of formal support can compromise the quality of care provided. Research by Naeun Lim and colleagues identifies kinship families as vulnerable, often facing financial hardship, health issues, and limited access to formal support systems. These conditions can create environments where children may not receive optimal care or, in severe cases, face neglect or abuse, underscoring the need for greater oversight and support within kinship care arrangements (Wu, Q, 2023)

Furthermore, the Better Care Network's India-specific case studies pointed out the chances of child maltreatment within some kinship care arrangements. These reports highlight how, in certain cases, informal kinship care has resulted in neglect or abuse due to economic challenges or personal biases held by caregivers, demonstrating that kinship care is not universally protective and can sometimes lead to exploitation or inadequate care (Better Care Network, 2023)

Above studies suggest that while kinship care can provide a valuable and culturally aligned solution, its effectiveness largely depends on the availability of external support and the willingness of caregivers to prioritize the child's well-being. Formalizing kinship care support through State programs could help ensure that these children receive the resources they need for healthy development and are shielded from any potential mistreatment.

#### 6. ALTERNATIVE CARE: INTERNATIONAL FRAMEWORKS AND GUIDELINES

Globally, UN Convention on the Rights of the Child (UNCRC) and Guidelines for the Alternative Care of Children (2009) emphasize the importance of family-based care over institutional care.

- UN Convention on the Rights of the Child (UNCRC): Adopted in 1989, the UNCRC highlights the right of every child to grow up in a family environment. Articles 20 and 21 of the convention specifically address the rights of children who are temporarily or permanently deprived of their family environment and emphasize the need for alternative care

arrangements.

- **Guidelines for the Alternative Care of Children (2009):** Developed by the United Nations, these guidelines provide a framework for the care of children who are separated from their parents. The guidelines emphasize family-based care and recommend that institutional care should be a measure of last resort, advocating for reintegration with biological families whenever possible.

India has ratified the UNCRC and, in doing so, has committed to upholding the rights of children, including the provision of suitable care arrangements for those who lack parental care. National policies and laws, such as the Juvenile Justice Act and the Integrated Child Protection Scheme (ICPS), Mission Vatsalya align with these global standards to ensure children's safety and well-being.

## 7. LEGAL AND POLICY FRAMEWORK IN INDIA

India has a comprehensive legal and policy framework for child protection. This framework includes key legislations, government initiatives, and guidelines aimed at providing children in need with safe, supportive environments. However, gaps in implementation, regional disparities, and challenges in enforcement hinder its efficacy. The Key Legislations include:

- **Juvenile Justice (Care and Protection of Children) Act, 2015:** The Juvenile Justice Act of 2015 (JJ Act) is the cornerstone of child protection legislation in India, covering the care, protection, and rehabilitation of children in conflict with the law and children in need of care and protection. It provides specific guidelines for alternative care arrangements, including foster care, adoption, and childcare institutions. Under this act, children in need of care are placed in a family-based environment as a preferred option over institutionalization, with foster care being promoted as a viable alternative (Ministry of Law and Justice, 2015). This act also established the Child Welfare Committees (CWCs) and Juvenile Justice Boards (JJBs) to oversee care decisions and provide regular monitoring of foster placements to ensure children's rights and welfare are prioritized.
- **Adoption Regulations, 2017:** The Adoption Regulations, introduced in 2017 under the JJ Act, provide specific guidelines for adoption processes to ensure transparency and prevent abuse. These regulations aim to streamline domestic and inter-country adoption in India by laying down standards and procedures that prioritize children's well-being (Central Adoption Resource Authority [CARA], 2017). CARA oversees the entire process, ensuring that adoption matches are made in compliance with Indian law and international guidelines such as the Hague Convention on Inter-Country Adoption, which India ratified in 2003. Through these regulations, CARA aims to prevent the exploitation of children in adoption practices and support ethical adoption processes that respect children's rights.

## 8. GOVERNMENT INITIATIVES

**Mission Vatsalya:** The Ministry of Women and Child Development introduced Mission Vatsalya, a child protection scheme designed to promote a nurturing family environment for every child. It focuses on family-based care as the first line of intervention and prioritizes preventive measures to strengthen families and communities. The initiative includes provisions for financial support, capacity building, and psychosocial support for families to prevent children from needing institutional care (Ministry of Women and Child Development, 2022).

**Model Guidelines for Foster Care, 2016 & 2024:** To support family-based alternatives to institutional care, the Model Guidelines for Foster Care, 2016 & 2024 outline the structure for implementing foster care programs in India. These guidelines emphasize training, monitoring, and financial support for foster parents to help children transition into a family environment effectively. They also advocate for community participation and public awareness about foster care to build acceptance and support for these programs (Ministry of Women and Child Development, 2016).

**Integrated Child Protection Scheme (ICPS):** Launched in 2009, ICPS aims to create a protective environment for children, integrating multiple services like health, education, and legal aid to prevent neglect, abuse, and exploitation. ICPS encompasses a range of services, from preventive to rehabilitative measures, focusing on the rights and welfare of children across India. The scheme's holistic approach seeks to create an integrated service network that collaborates with NGOs and state authorities to enhance child protection mechanisms (Ministry of Women and Child Development, 2019).

### Foster Care in Indian Context

According to United Nations Guidelines for the Alternative Care of Children, Foster care is defined as the situations where children are placed by a competent authority for the purpose of alternative care in the domestic environment of a family other than the children's own family that has been selected, qualified, approved and supervised for providing such care. This definition highlights the formal nature of the foster care setting.

### Forms of Foster care

- **Short-Term Foster Care:** A temporary arrangement, often lasting from a few weeks to a year, aiming to stabilize a child's life before they are reunited with their family or placed for adoption (JJ Act, 2015).



- **Long-Term Foster Care:** In cases where reunification or adoption is not possible, children may stay with foster families for extended periods, sometimes until they age out of care (JJ Act, 2015)
- **Group Foster Care:** An arrangement where a group of children without parental care are cared for in a family-like setting within a small home or facility. The number of children under the group foster care shall not exceed 8 children including biological children of the foster caregiver. The District Child Protection Unit (DCPU) shall arrange for escorting the child to the group foster care and all the assistance need to enroll the child in a school if required. (Model Foster Care Guidelines, 2024)

As fundamental principles, The Model Foster Care Guidelines emphasize the paramount importance of the child's best interests in placement decisions. Preference should be given to placing children within their own socio-cultural environment. Decisions regarding placements must be case-specific, focusing on necessity and appropriateness while prioritizing the child's safety and well-being. Additionally, the child's right to be consulted in decisions affecting them must be respected, taking into account their evolving capacities, and involving families and legal guardians whenever possible. Furthermore, siblings, including twins, should ideally be placed together; if separation is necessary, sibling consent and approval from the Child Welfare Committee (CWC) are required. Children in need of care and protection may be placed in family foster care or group foster care through the orders of CWC, ensuring that these placements occur in environments that do not include the child's biological or adoptive parents, whether for a short or extended duration (Model foster care guidelines, 2024).

## 9. NGO BOSCO'S MODEL

Bangalore Oniyavara Seva Coota (BOSCO) has been working with children/ youth from at-risk backgrounds since 1980. Every year, an average of 4000 children are home placed/home reunified. However, several children end up in BOSCO homes as they are without families or proper families to get back to. BOSCO initiated the foster care programme in 2012 to deinstitutionalise children in BOSCO homes.

The BOSCO Model offers a comprehensive approach to foster care, focusing not only on the children in need of care and protection but also on the families who provide foster care. By providing clear, structured steps for the identification, assessment, training, and placement processes, the BOSCO Model ensures that both children and foster parents are well-prepared for the responsibilities and challenges of the foster care journey.

## 10. IDENTIFYING AND PREPARING CHILDREN FOR FOSTER CARE

The implementation of foster care through the BOSCO Model begins with identifying children who are without parental care and who need a safe, supportive family environment. Social workers, child protection agencies, and local communities work together to identify these children, many of whom may be at risk due to neglect, abuse, or other factors. The importance of early identification cannot be overstated, as it is crucial to intervene before a child's situation worsens. Once identified, the focus shifts to preparing the child for foster care and ensuring that they understand the changes ahead. For older children, informed consent for foster care placement is obtained, and the concept of foster care is explained in clear terms. This step is vital, as it allows the child to have a voice in the process and ensures they are not only aware of but also involved in decisions affecting their future.

Once a child is confirmed as needing foster care, a social inquiry is conducted to gather comprehensive information about the child's background. This includes information from the biological family, school, healthcare providers, and other relevant sources. Social workers also engage in counselling sessions with the child to help them process their emotions and prepare them for the transition. Counselling is an essential aspect of this stage, as it helps children understand their circumstances and cope with any anxiety or trauma they may be experiencing. The child's needs, including emotional, educational, and medical requirements, are thoroughly assessed to ensure that the placement will meet their specific needs.

In the next phase, a permanency plan is developed. This plan is a roadmap for the child's future and outlines potential long-term outcomes, whether it be reunification with biological parents, adoption, or long-term foster care. A key component of this stage is identifying the most suitable foster family or group foster home. Finding the right family is a careful process that takes into consideration factors such as parenting experience, family dynamics, and the ability to provide the child with the care and support they need. Once a suitable foster family is identified, the process of matching the child with the family can begin.

## 11. PREPARING AND ASSESSING POTENTIAL FOSTER PARENTS

BOSCO follows a structured approach to selecting and preparing foster parents. This process starts with referrals to the agency, either through staff recommendations, community referrals, or self-referrals. Once a potential foster parent is identified, basic information is gathered, including background checks, family history, and other relevant criteria. It is crucial to ensure that foster parents are capable of providing a stable and supportive environment for children. An important part of this process is educating potential foster parents about the responsibilities and challenges of foster care. This overview helps them make an informed decision about whether they are ready for the commitment that foster care requires.

Once potential foster parents have expressed interest, they undergo a detailed assessment. This includes home visits, interviews, and assessments of their ability to care for a child in need. Social workers also gather reports from neighbours and community members to get a fuller picture of the family environment. This step ensures that the foster home is safe, stable, and ready to welcome a child. Additionally, foster parents receive training to equip them with the skills needed to address the emotional and psychological needs of children in care. Training topics may include trauma-informed care, child development, attachment issues, and strategies for managing behavioural challenges.

## 12. TRANSITIONING AND MONITORING THE PLACEMENT

Once a child and a foster family are identified and deemed compatible, a series of steps are taken to facilitate a smooth transition. A particularly crucial phase in this process is the "60-day weaning period" (sometimes referred to as the "transition" phase). During these 60 days, the child is gradually integrated into the foster family's home. This transition period is designed to help both the child and the foster parents build a relationship and ensure that the placement is suitable for everyone involved. Throughout these 60 days, social workers carefully monitor the progress of the placement, ensuring that any issues or challenges are addressed promptly.

The process begins with an initial meeting between the child and the foster family. This meeting allows both parties to get acquainted and helps set the stage for a positive relationship. Following this, an outing, such as going for coffee or lunch, is arranged to provide a more relaxed and informal setting for the child and foster family to bond. This gives the child and foster family an opportunity to interact in a less formal, more comfortable environment, which can help ease anxieties on both sides. In addition to these meetings, the child is encouraged to visit the foster family's home, which provides an opportunity to familiarize themselves with the living environment and begin adjusting to the routines and expectations of the household.

As the transition progresses, the child spends more time with the foster family. The process includes overnight and weekend stays with the foster family, which allows the child to experience life in the home for extended periods. These stays are crucial for fostering trust and assessing how well the child is adapting to the new environment. They also provide valuable insights into the compatibility between the child and the foster family.

The placement process is not rushed, and ongoing support is provided throughout. Social workers closely monitor the child's integration into the foster home and ensure that any concerns or issues are addressed in a timely manner. Compatibility between the child and the foster family is closely monitored, and adjustments are made as needed to ensure the child's well-being. Ultimately, the goal is for the child to feel secure and supported in their new home, and for the foster family to feel prepared and capable of providing the care the child needs.

The BOSCO Model emphasizes the importance of a holistic, child-centred approach to foster care. By carefully assessing both the needs of the child and the capabilities of the foster family, the model ensures that children in need of care and protection are placed in environments that support their emotional, physical, and psychological well-being. The model also recognizes the importance of preparing foster families for the realities of fostering, providing them with the tools and knowledge necessary to navigate the complexities of raising a child in need of care.

### Challenges

- Creating a positive attitude towards foster care in society. So that more families would open their doors to children without families.
- Matching parents with the child's language, religion and other expectations.
- Delays that happen in the legal procedures for the actual foster care placement to take place.
- Many good-willed parents find it difficult to accept all the legal procedures- follow-up of the child, medical checkups, police clearance, follow-up with CWC, etc..
- Disruptions that happen in the foster family between the child and parents, after the placement.
- Financial requirements for placing children in foster care.

### Way Forward

- Foster care needs larger visions and plans to take it forward to the whole state/ country
- Shift from institutionalization of children to a family-based alternative for care.
- Timely financial support for the foster care families.
- Approval of foster care guidelines and proper state structures for their effective implementation in the state.
- Explore the possibilities of extending the duration of aftercare for five years.

- The possibility of monitoring Foster Care under CARA.
- Need guidelines for ‘family strengthening’. ICP must address the strengthening of biological parents.
- Build support mechanisms like a counselling cell, legal support, economic support, foster parents association.
- Positive collaborative support systems between the state and NGOs to implement foster care in the state.
- Specific guidelines for short-term foster care eg: Vacation Foster Care/ Emergency Foster Care.
- Foster care is for personalized care in a family. Group foster care should not become a small child care institution.

## REFERENCES

- [1] 1. <https://data.unicef.org/how-many/how-many-children-under-18-are-there-in-india/>
- [2] 2. <https://www.india.gov.in/my-government/documents/census-report>
- [3] 3. <https://www.unicef.org/india/what-we-do/child-protection>
- [4] <https://theprint.in/india/more-than-47000-children-missing-in-india-71-are-girls-shows-ncrb-data/1880048/>
- [5] Nigudkar, M. (2017). *Alternative Care for Children: Policy and Practice*. India: SOS Children's Villages of India and Tata Institute of Social Sciences.
- [6] United Nations General Assembly. (2010). *Guidelines for the Alternative Care of Children*, UN document A/RES/64/142. Geneva: United Nations Retrieved from United Nations Guidelines for the Alternative Care of Children | Save the Children's Resource Centre
- [7] UNICEF. (2006). *Alternative care for children without primary caregivers in Tsumani-Affected Countries: Indonesia, Malaysia, Myanmar, and Thailand*. UNICEF.
- [8] UN Guidelines for the Alternative Care of Children, 2010 <https://docs.google.com/viewerng/viewer?url=https://dylbw5db8047o.cloudfront.net/uploads/5416.pdf>
- [9] Browne, K. D. (2009). "The Risk of Harm to Young Children in Institutional Care." *Save the Children UK*.
- [10] NCPCR report on CCIs in India: [https://ncpcr.gov.in/uploads/167145198563a05551c7b75\\_national-report-social-audit-of-ccis.pdf](https://ncpcr.gov.in/uploads/167145198563a05551c7b75_national-report-social-audit-of-ccis.pdf) Mapping of child care institutions.
- [11] Why institutional care is a last resort <https://www.unicef.org/protection/children-in-alternative-care>
- [12] Kevin Browne, Catherine Hamilton-Giachritsis, et.al, “Overuse of institutional care for children in Europe ” 332 *BMJ (Clinical Research ed.)* 485-487 (2006).
- [13] Piyus Tripathi, “Bihar Shelter Home Case: We used to cut ourselves to avoid sexual abuse, reveals survivor”, *The Times of India*, July 29, 2018.
- [14] India Today web desk “The girls returned crying: child reveals details of abuse at UP shelter home”, *India Today*, August 6, 2018.
- [15] Tata Institute of Social Sciences, “Report on Social Audit of Non-Government and Government Welfare Institutions (Field Action Project on Homelessness & Destitution)”, (2006).
- [16] Monographs of the Society for Research in Child Development, Volume 76, Issue 4 p. 8-30, CHILDREN IN INSTITUTIONAL CARE: DELAYED DEVELOPMENT AND RESILIENCE, Marinus H. van IJzendoorn, Jesús Palacios, Edmund J. S. Sonuga-Barke, Megan R. Gunnar, Panayiota Vorria, Robert B. McCall, Lucy Le Mare, Marian J. Bakermans-Kranenburg, Natasha A. Dobrova-Krol, Femmie Juffer, First published: 21 December 2011: <https://doi.org/10.1111/j.1540-5834.2011.00626.x>
- [17] Wu, Q.; Xu, Y.; Pei, F.; Lim, N. Strength and Resilience for Kinship Caregivers Raising Children: A Scoping Review. *Societies* **2023**, *13*, 249. <https://doi.org/10.3390/soc13120249>
- [18] Better care network
- [19] <https://bettercarenetwork.org/library/the-continuum-of-care/kinship-care/kinship-care-in-india-a-case-study-documentation>
- [20] IJCRT, 2024, Increasing divorce rate in India: A critical analysis from psychological perspective : <https://www.ijcrt.org/papers/IJCRT2406066.pdf>
- [21] Dr. M Rajashekarappa (2023), Recent Changes in the Hindu Joint Family an Evolution Towards Modernity, <https://www.ijfmr.com/papers/2023/4/5840.pdf>
- [22] IJCRT, 2018, Changing family structures and dynamics in Urban India: <https://ijcrt.org/papers/IJCRT1135373.pdf>

- [23] Vasundhra, 2021 Foster care In India and its future prospects a socio-legal analysis: <https://shodhganga.inflibnet.ac.in/handle/10603/373536>
- [24] Douglas, V. I. (2020). Review on the effects of divorce on children. *Journal of Current Issues in Arts and Humanities*, 6(1), 67–74
-