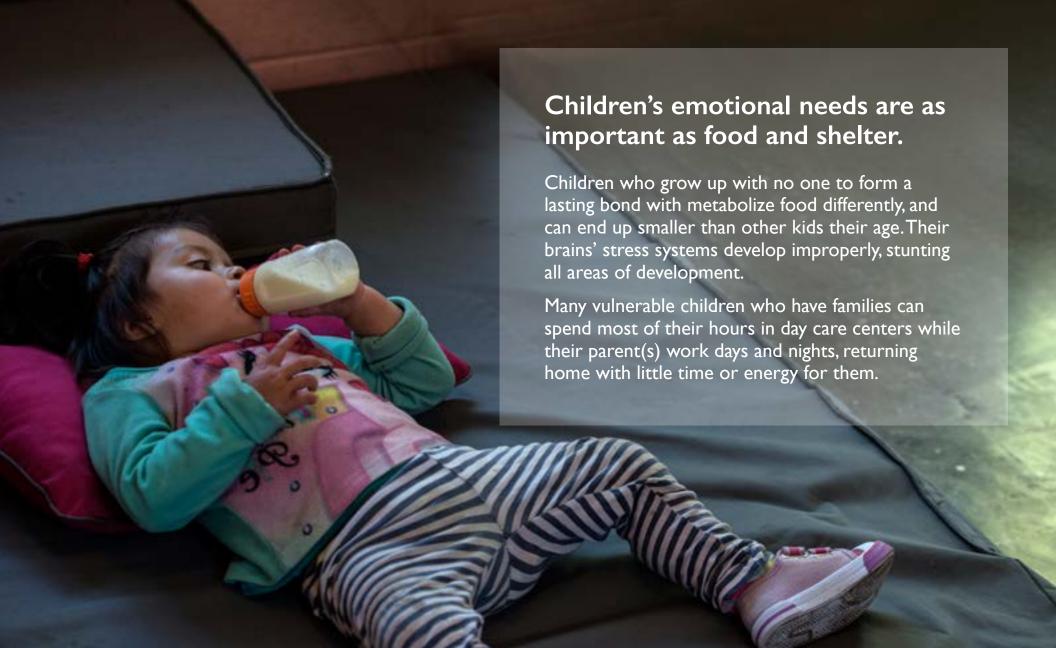


For most of us, a family is a given. For others, it's a right denied. Everyone deserves loving, supportive, and stable care — right from the start.

Without deep relationships and meaningful attachments, children are forever altered and may never recover.





Family isn't always blood.

Whole Child has developed a set of simple yet highly effective practices that transform the experience of a child growing up in care.

It's all rooted in helping caregivers make small shifts toward responsive interactions — and ensuring their supervisors and government decision-makers are educated about the importance of primary relationships and strive to create a system in which maintaining them is possible.



Our impact

We collaborate with local government and universities to build capacity across a nation's system of care, ensuring the training we provide can be sustained locally over the long term. Independent studies* of centers where our practices were implemented have found:

- The number of children scoring as intellectually disabled decreased from 82% to 26%.
- Children's height-for-age increased by 46% and weight-for-age went up by 34% with no change to nutrition.
- Negative behaviors such as aggression and self-stimulation were reduced by 43%.



* "A Social-Emotional Intervention in a Latin American Orphanage." McCall, R.B., Groark, C.J., et al. (2010). Infant Mental Health Journal, 31 (5), 521-542.



The context of our work

The problem:

Millions of vulnerable children around the world suffer from a lack of stable, nurturing relationships in low-quality care settings. This is particularly true for children in developing countries growing up in residential care and those from low-income families who spend the majority of their day in early childcare centers. These children's developmental needs are often not met, resulting in stunting, high levels of criminality, and other adverse outcomes — reinforcing cycles of poverty and child abandonment through generations.

Current systems tend to be over-reliant on residential care, but replacing residential care has many obstacles. In particular, residential care is generally funded by individual charities whose resources cannot simply be transferred to family-based systems. In addition, the existing social workforce is inadequate to respond to child protection needs and supervision of family-based care.

Our solution:

Our program in its entirety, and at all levels, focuses on building capacity within and building upon a country's existing government infrastructure, with decision-makers and supervisors being our main focus. In addition, we train and mentor local academia, center directors, and caregivers. Working in early-childhood centers, residential care centers, and foster care programs, we implement evidence-based best practices in relationship-centered care, establishing such care as a national standard.

Within residential care centers, in addition to the implementation of best practices, we work collaboratively to expand the breadth of their services to include family reunification and support, small-scale foster programs, and appropriate monitoring. This leverages existing resources within the existing residential-care community while safely reducing the number of children outside of family-based care.

How do we do it?

Our program is designed to be implemented in existing residential and childcare centers without requiring the centers to hire additional caregivers, making it a sustainable solution in limited-resource settings.

Before:

Children are kept in large groups by age and "graduate" to new caregivers and peers regularly.

Caregivers are overwhelmed and don't know how to connect in a meaningful way with children, considering the constraints of time and the large number of children for whom they are responsible.

Children have no personal space or record of the moments and developments that form their identity.

Countries overly rely on residential care (orphanages).

After:

- Children are placed in small, family-like groups where primary caregiver relationships are formed and maintained as long as they are in care.
- Caregivers are trained to use routine moments to connect with each child and feel confident in their ability to provide what the child needs.
- Caregivers keep records of developmental milestones; children have cubbies for their own things and a binder of progress and past history to help form an identity.
 - Residential care centers are supported in expanding their programs to include services in family reunificiation and support, running small-scale foster programs, and appropriate monitoring.

How do we do it?

Six steps for leveraging existing resources and building the capacity to create meaningful, sustainable change:



Local Academic Community

- University faculty and other academic leaders receive training and mentoring in order to update their academic knowledge.
- Updating this knowledge at the academic level ensures a pipeline of local professionals with the knowledge and skills they need, in perpetuity.



Government Cecision-Makers

- Key government decision-makers attend Whole Child's university course on best practices in childcare in limited-resource settings.
- They receive hands-on support and mentoring to implement the necessary changes across their system of care for children.



Childcare Center & Residential Care Directors

- Center directors attend university certificate program on childcare best practices in limited-resource settings.
- They receive support and mentoring to implement relationshipcentered, evidence-based best practices in their centers.



Government Supervisors of Childcare Centers

Government supervisors receive two years of training and hands-on support focused on creating capacity to be the leaders on implementation and monitoring of quality in residential care and earlychildhood care and development centers.



Children's Direct Caregivers

- Caregivers
 receive nine
 months of training
 to improve
 quality of care
 and strengthen
 relationships with
 children.
- They receive intensive handson support and mentoring to implement changes in childcare practices in their centers.



Residential Care Centers

 In addition to the implementation of best practices described in bullet 3, we work with residential care centers to broaden the scope of their work to include family reunification and support, running small-scale foster programs, and appropriate monitoring.

Outcomes

Immediate outcomes:

Quality care is implemented and the national child welfare system has the capacity to sustain it in the long term.

Caregivers provide highquality care, characterized by stable, nurturing relationships with the child.



Long-term outcomes:

Children are better prepared to participate in family life and society as healthy and well-adjusted individuals — benefiting them as well as their family, community, and society as a whole.

How we know it works:

Since its founding in 2004, Whole Child has worked with third-party evaluators to measure our impact and inform future program development. Until 2012 we worked with the University of Pittsburgh Office of Child Development, and since 2012 we have worked with Duke University's Global Health Institute.





When you make a gift to Whole Child International, you can help us to:

- directly train caregivers and all key players across the child protection system in practices that dramatically improve the lives of children.
- partner with national universities to teach our certificate program.
- continuously evaluate, improve, and scale our model to reach more children.
- effect lasting systemic change in government policy and practices.

