

**Problems of Children in Urban Georgia: A Qualitative Assessment of
Centers and Orphanages**

Conducted for Save the Children
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by

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Background

In Georgia, chronic poverty, the transformation of government, and increasing family stresses and disintegration have contributed to the numbers of children who live on the street, spend large amounts of time on the street, or are raised in orphanages. Lacking adult supervision and support, and the experience of family life and education that nourishes the development of most children, these marginalized children are at risk of exploitation, health and development problems, psychosocial problems, drug use, crime, and prostitution. Their plight warrants attention as these children are the next generation. As a social and economic investment in the country's future it is vital that appropriate support is provided for Georgian children, who comprise nearly half the population.

Prior Research

There has been an increasingly strong commitment by some to learn about Georgian children who are at risk, as a basis for addressing their issues. For example, in 2005 a report on “Research on Childcare Institutions” was published, carried out with financial assistance from Eurasia Foundation, USAID and the non-governmental organization (NGO) Child and Environment. Between 1999 and 2000, the Ministry of Education and Science of Georgia and the NGO Child and Environment conducted research at 29 childcare institutions. The primary aims of this research was to develop a registration and monitoring system for orphans/children deprived of parental care under State law, to establish the real number of children and to analyze the current situation at institutions.

One finding was that institutions do not have accurate data on children. Most of the data found was simply numbers of children admitted or leaving, without explanations. This review also found that almost half of the children have been institutionalized against existing rules. Another finding was that most personnel employed at institutions did not meet contemporary standards of training. Some resulting recommendations made by this report include to re-evaluate children in institutions, study their family conditions, establish a strict control over admittance, and train staff on child care.

Current Project

In July 2005 Save the Children Georgia began a process to learn more about the problems of children at risk, in order to better inform their Rebuilding Lives Project (RLP), and to assess the impact of their interventions. The project is a collaboration with Child & Environment and Boston University and is supported by the USAID Displaced Children and Orphans Fund (DCOF), USAID/Georgia, and Save the Children-Georgia Field Office (SC-GFO).

Overview and Rationale of Approach

The approach being used by Save the Children Georgia is divided into 3-phases. The first phase is a qualitative assessment of how children at risk (and other persons affected by their situation) view this issue. Qualitative methods are used because these are best suited to exploring local perspectives, thus providing formal input into the project focus from people most affected and ensuring that the project addresses issues that are a priority to this group and in ways that makes sense to them. The assumption is that projects that do this are more likely both to address key issues, and to win cooperation of the affected groups, both of which are vital to achieving impact and sustainability.

The second phase is development of quantitative instruments from the qualitative data. An understanding of how the community views issues addressed by the project is also valuable in designing measures to assess impact. Typically projects use measures developed in other countries which are then translated into the local language. Usually there is little attempt to adapt or develop measures appropriate to the local culture or situation, or to achieve a translation that uses the vocabulary of the groups being assessed. Even more uncommon is testing to determine whether the assessment tools accurately measure what they are supposed to measure. This is particularly true of measures that attempt to assess improvements in functioning, which is one of the major desired effects of psychosocial programming and a prime focus in the current project. Instead the current project uses the qualitative data on how local people understand the issues affecting them (and the terminology they use) to create assessment instruments that are understandable to local people and reflect their priorities.

The third phase is the use of the quantitative instruments to assess both need and project impact. This is typically completed by using the instruments early in the assessment to assess the baseline levels of problems and of function. Using the instrument in this way also confirms that the problems are significant in terms of prevalence (i.e. that they are common). Impact assessment is then done by repeating the measurements at the end of the intervention and comparing the results. In some programs, measurements may be taken during the program in order to check progress.

Progress Prior to the Current Study

In July 2005 Save and collaborating partners conducted the first phase of the current project: a qualitative assessment among street children in urban Georgia. This assessment focused on the causes of children being in the street in order to inform RLP activities aimed at reducing the number of urban street children in Georgia. After this initial study (See Report: Causes of Children Living on the Street in Urban Georgia: A Qualitative Assessment by Boston and Columbia Universities. Available by request from Laura Murray at lmurray@bu.edu). Save, in collaboration with DCOF, and USAID – Georgia, decided that an additional qualitative study was needed. This decision was made for two reasons. The first was that the findings of the qualitative study suggest that the RLP program should focus on problems rather than causes of at-risk children. The proposal for next steps explained that the qualitative data on the causes of street children found that there were both negative family and economic factors that ‘pushed’ children to spend time on the streets, and also positive aspects of street life compared with home life that ‘pulled’ children onto the streets and kept them there. These results suggest that

focusing programs solely on the negative causes as a way of getting children off the streets may not always be in their best interests. Instead, a broader approach to assisting these children, regardless of where they choose to live, may be more appropriate. Such an approach would argue for identifying and addressing the problems that children who spend time in the streets face, rather than focusing only what causes them to be there.

The second reason is recent and significant changes in the Georgian government's program of Child Welfare and De-Institutionalization Reform, which is focusing on moving children out of institutions. The RLP program is working closely with the Ministry of Education to see that this process is smooth and there are programs in place to meet the needs of Georgian children.

A proposal was written not only to repeat the qualitative study with a focus on problems of street children, but also to investigate the problems of those who are currently institutionalized. (See Appendix B for the full Proposal for Next Steps.) The goal of this additional qualitative study is therefore to provide a solid foundation for planning assessments and interventions for both populations. Subsequent phases of the intervention planning and evaluation process should then be conducted as originally planned, and as laid out in the final recommendations of this report.

Introduction

In May/June 2006, SC-GFO in collaboration with local implementing partners and Boston University and with the support of the DCOF/USAID and USAID/Georgia, conducted a 2nd qualitative assessment to inform SC-GFO's 'Rebuilding Lives' project (RLP). This 2nd assessment had two overall aims: 1) To provide information on the problems of at-risk children - including those on the streets and those living in orphanages, in order to help SC-GFO to better address these problems through programming; and 2) To provide preliminary data to develop quantitative instruments to measure the extent of these problems and the impact of programs. This is in accord both with the interest of SC-GFO and the Ministry of Education to more accurately assess children living in institutions and those being moved out, and with a DCOF initiative to better measure the impact of DCOF-supported programs in Georgia and other countries.

The rest of this report describes the methodology used in this second qualitative assessment and the results. We also interpret the results and make suggestions for next steps for the RLP program, as well as general recommendations for other programs (such as government ministries) dealing with street children and those in institutions.

Methodology

Qualitative assessment refers to methods such as interviewing people using questions which are open-ended and non-leading, and where the interviewees' comments are recorded verbatim. The objective is to encourage interviewees to say what they really think about a topic and record this accurately. Beginning with this type of approach is particularly important with children who may be more susceptible to being lead by adults (such as from journalists or other persons with a particular agenda) and have learned to respond on the basis of what they think the person expects to hear.

A total of twelve interviewers were trained in qualitative methods of interviewing and data analysis. Six trainees had participated in the previous qualitative assessment and are employees of local partners to SC-GFO providing assistance to at-risk children. The other six trainees were employees of the Ministry of Education and were new to these methods. However, many of the interviewers have a social science background and have had experience working with at-risk children. The same two qualitative methods that were used in our visit in July, 2005 were used in this study: Free Listing and Key Informant Interviews.

Free Listing

Understanding Psychosocial problems:

An initial 2-day training in qualitative methods occurred in Tbilisi at which the 12 interviewers were trained in the free listing methods. They were trained to ask a primary question as part of this exercise to at-risk children:

“What are the problems of children who spend time on the street/live in orphanages?”

The interviewers were also trained to probe the informants for descriptions and explanations for each of the problems and for any problem that might be psychosocial in nature, to ask if there was someone in the community who was knowledgeable about that problem.

By design the questions are stated broadly to encourage a wide variety of responses, which were to be listed item by item according to the order in which they were mentioned. This primary question was designed to elicit all of the problems that at-risk children could identify in their community. Under careful supervision by the BU faculty, the interviewers conducted free list interviews with at-risk children who spent time in Centers or whom lived at an orphanage. Interviewers worked in teams of two. All interviews were completed in Georgian, and translated by professional translators into English at the end of each day when they returned to Tbilisi.

In the Free Listing interviews, participants included children aged 6-18 who participate in the Rebuilding Lives Project at Sparrows and Rainbow Centers for street children in Tbilisi and the Center in Rustavi or who lived at one of three different orphanages including Dighomi, Kojori, and Martkopi. Dighomi Orphanage is considered within Tbilisi center and both Kojori and Martkopi are in surrounding areas approximately 35 and 45 minutes away from Tbilisi, respectively.

Understanding Functionality:

For Rustavi only, additional Free Lists were conducted to explore local perceptions of good functioning and wellbeing.. This exercise had already been conducted in the 1st Qualitative study at Rainbow and Sparrow Centers and so it was felt unnecessary to repeat them at those sites. Function questions were not asked of children living in the orphanages with the understanding that programmatic interest was in assessing children who spent time on the streets, rather than how children function when living in an orphanage. Three questions were used to explore wellbeing and function at the levels of individual child, family, and community:

- 1) **What does a happy child look like?**
- 2) **What does a happy family look like?**
- 3) **What does a happy community look like?**

Those lists referring to wellbeing and function were set aside for future use in instrument development. The problem lists, however, were examined further by Save the Children/Georgia Field Office staff and those from BU to identify topics or issues that appear to be of most importance to the respondents as well as being relevant to the RLP program. These topics then formed the basis for the next data collection activity – the Key Informant Interviews.

Key Informant Interviews

Following the free listing exercise, the interviewers were provided with a 1-day training on key informant interviewing techniques, with time provided for practicing interviewing on the three or four problem categories selected from the free lists. The purpose of the key informant interviews was to provide additional detailed information about these problem categories. Questioning and probing was done to learn about how individuals who have experienced these problems think, feel and behave; causes and consequences of these problems; what people do to help themselves when they experience them; and what other problems might co-occur. Key informants were local people referenced by free list respondents and said to be knowledgeable about at least one of these problem categories, with many of the informants identified as being knowledgeable about more than one.

Results:

Function Free Lists (Rustavi only)

Review of the free listing results from the three function-related questions produced a description of a healthy child, family and community (See Table 2). Respondents indicated that a healthy child can study, has a parent and keeps good relations with them, is cheerful, plays, does not lack food, and looks to the future. A health family includes having food, jobs, money, love in the family, no arguing, no illness, and when parents are good and not divorced. Characteristics of a healthy community were described as helping each other, not quarreling, trusting each other, not gossiping, spending time together, respecting and having good relations, helping with studying, being kind, and not jealous or cruel.

As mentioned previously, the function-related questions were asked only of children in Rustavi since this was a new location added to this second qualitative study. The results are very similar to the responses obtained from Tbilisi and the nearby town of Gori in the first qualitative study, with many naming lack of fighting or quarreling, kindness to others, happiness, respectfulness, and loving and caring as important characteristics of a well-functioning child, family and community. It is clear that good family relations are important as well as the presence of good economic conditions (i.e. employment, food, toys). These data suggest that even in different locations children have similar ideas about what is healthy functioning across individuals, families and communities.

Problem Free Lists

Interviewers conducted 51 problem free list interviews among children across three different orphanages: Martkopi (17), Dighomi (16), and Kojori (18). Thirty-eight free list interviews were conducted among children across three different centers: Rainbow (11) and Sparrows (12) in Tbilisi, and Rustavi Center (15) (See Table 1. Appendix B also has Problem Free List data for each site).

Tables 3 and 4 in Appendix A show the Problem Free Lists consolidated across the 3 Orphanages and across the 3 Centers. Review and analysis of the ‘Problems’ free listing results yielded two types of responses within each of the six sites including (1) reasons why children come to be in an orphanage or spend time on the street and (2) current problems of these “at-risk” children. It should be noted that these are not mutually exclusive and show some overlap.

Problems causing children to be in orphanages or spend time on the streets.

The problems leading to a child being in an orphanage included financial situation, problems of relationship with parents, having no mother or father, divorce, parents not being able to leave children home alone, mother and father drinking alcohol, or mother neglecting the child. The issues listed by children at the centers included parents forcing them on the street, not having parents, family is in need (materially and financially), alcoholic parents, relationships with parents, running away from home, and unemployed parents. In summary, there is a significant overlap across orphanages and centers. There is a clear recognition of problems with parents including interpersonal, financial, material, drug-related, neglect, and/or the lack of parents.

Current Problems

The second response type was described as current problems of at-risk children. Across the three orphanages, problems included study problems, problems with teachers and/or directors at the center, being blamed for things or treated differently, fighting or aggression, and missing home/parents or wanting to go home. Across the three centers, the issues raised were begging, stealing, Toxicomania/drug use, lack of parental warmth, hunger, wanting to be free, no friends/ashamed, misbehavior, and health problems. One of the clearest distinctions was that the children at centers listed a number of problems that orphanage children most likely don’t have the freedom to engage in such as begging, stealing and Toxicomania/drug use. The orphanage children spoke more consistently about missing home and/or their parents and wanting to be with them. The center children were also more likely to talk about parents drinking alcohol or beating them, whereas orphanage children would not talk negatively about their parents and just said they would rather be at home and have a parent no matter what.

Key Informant Interviews

As noted in the Methodology section, the topics of the key informant interviews were selected from the problem free list results. Due to the similarities of free listing responses, many of the topics are similar across orphanages and centers. One difference included the way the children spoke of the issues, such as orphanage children talking about both “missing parents” and “lack of

parental warmth” whereas center children did not mention “missing parents” that frequently. Another difference was the extra topic of Toxicomania/Drug use for children in the centers. Toxicomania is the word used to talk primarily about glue sniffing but also may include other types of drug use such as cigarettes and alcohol. “Differentiation” was a topic that was discussed more directly at “being treated differently” (in a good or bad way), “being blamed for things”, and “stigma”.

The KI topics were:

Orphanages

- a) Missing Parents
- b) Relationships with parents
- c) Differentiation

Centers

- a) Lack of parental warmth
- b) Relationships with parents
- c) Differentiation
- d) Toxicomania/drug use

The key informants that were interviewed were identified both from the initial free lists and by asking the first set of key informants themselves to recommend other knowledgeable people in the community. A total of 21 key informants were interviewed across the three orphanages, 10 were interviewed twice. (See Table 1) Thirty-seven key informants were interviewed across the three centers, 22 were interviewed twice. Most key informants were identified as being knowledgeable about more than one of the problem categories so many provided information on more than one. The informants included children, siblings, mothers, teachers, center directors, and other staff. KIs discussed these issues in different ways including overall descriptions, specific situations, and how a child looks and behaves. Particularly the children who were interviewed would often give specific cases, and then talk about how the child was affected once probed. Normally qualitative methods are used to get the “community perspective” and thus “professionals” are rarely interviewed or examined separately. The “professionals” interviewed which included the directors at the three centers and some staff were very similar to the responses from the at-risk children, siblings and community family members.

Orphanage Results

Table 5 in Appendix contains the combined results for all three orphanages.¹ The KI interviews across the orphanages confirmed that missing parents is a significant issue for these children. There are clearly both positive and negative aspects to the relationships with parents, yet overwhelmingly these children are happy to see their parents. Children seem to long for parental warmth, want to see their parents, and want to go home with them. Some of the reasons why parents are not with their children include not being able to afford them, alcoholism, and/or beating. Results suggest that most of the children living in “orphanages” do have parents that are alive, and in many cases able to be contacted. It appears that children who miss their parents may respond with both internalizing symptoms (e.g., sadness/crying, being alone, worrying, withdrawn) and externalizing symptoms (e.g., aggression).

¹ See Appendix B for site-specific results.

As expected, there was great overlap between “missing parents” and “relationships with parents” with many of the same themes emerging. Namely, relationships with parents were described as both bad (e.g., fighting, scolding, alcoholic, forcing to beg) and good (e.g., warm) between parents and their children. Children who have difficulties in relationships with parents indicated many of the same signs and symptoms as listed above. There were also numerous responses indicating that no matter what their “relationships with parents” were like, they longed for parents to take them home – which led to happiness and smiling.

Finally, the issues of differentiation emerged as a significant problem for children in the orphanage with school children, teachers, and caretakers all described as treating them differently; mostly in a negative sense. Issues such as children not wanting to be friends with them, teachers grading them differently, and being blamed for things they did not do were repeatedly mentioned across sites. Being treated differently and blamed for things had similar effects on children across sites including internalizing symptoms (e.g., crying, feeling scared, downtrodden, hurt, closed, sad, looking miserable) and externalizing (e.g., justifying themselves, getting angry, aggressive).

There seemed to be a larger issue with the orphanage staff treating the children poorly at Martkopi, in comparison to the other 2 orphanages. Under the topic of differentiation, the 3 KIs gave specific examples of events when they were blamed for something or treated poorly rather than mentioning signs and symptoms of themselves. This issue was discussed while in Georgia and the understanding was that the Ministry of Education was aware of some of these problems and as such, there was a recent administrative shift that took place. Given this, the children did not seem to be in danger and no action was taken.

Center Results

Table 6 in Appendix A shows the combined results for all three Centers.² The KI interviews across the centers showed that toxicomania or glue-sniffing is a major problem for children who spend time on the streets. Children blamed this on their families, on the child not having anybody to show him the way, and on being surrounded by others who use. A typical addiction pattern was described where once a child sniffs glue they cannot stop and try to get money to buy more glue. Some of the signs and symptoms of this include difficulty with thought, aggressive behavior, hallucinations and forgetting, poor hygiene, and interpersonal isolation.

Across all centers, it was clear that children were stigmatized in various ways for spending time on the streets, including being blamed for things, ignored, made fun of, treated poorly or others thinking they are bad and not wanting anything to do with them. There was consistency in the descriptions of children’s response to this treatment, including crying, trying to justify themselves, getting angry, feeling oppressed, nervous, closed, sad, lonely, not playing with kids, and becoming aggressive (particularly to defend themselves when wronged or blamed). The primary cause listed for stigma was that the children don’t have parents.

² See Appendix B for site-specific results.

As in the orphanages, there was great similarity in the responses given when asked about “lack of parental warmth” and “relationships with parents”. Responses about parents were very similar across centers and included few positive responses, primarily statements that the children still love their parents. Children described parents as beating them, forcing them to beg, lack of warmth and attention, neglect, little love, and kicking them out of the house. The most common cause of these behaviors was alcohol. The effects of poor relationships or lack of warmth on children included descriptions such as sad, aggressive, closed to others, crying, oppressed, going to the street, craving affection, broken-heart, and feeling downtrodden.

General Conclusions and Recommendations

Conclusions

Similarities between orphanages and centers

There were numerous similarities among the problems of children who spend time on the streets and those who are in institutions. It is clear that family problems are a major concern for both groups, and lead to similar emotional and behavioral problems. It is also clear that most of these children sense that the community sees and treats them differently from children living at home, which most likely exacerbates many of the same behavioral and emotional problems.

Children who are in orphanages, centers and other knowledgeable people were consistent in describing significant issues for children. Across both centers and orphanages, there is a great deal of discussion of poor relationships with parents and lack of parental warmth and attention. There is also consistent discussion of how all of these at-risk children are treated differently and/or blamed for things. Both of these issues led to similar signs and symptoms for all at-risk children such as sadness, aggression, oppression, being downtrodden, difficulty in relations with others, and problems in thinking.

Differences between orphanages and centers

Among the major differences is that children at the centers seem to have many more problems with delinquent behaviors such as sniffing glue, stealing and begging. This is understandable in that they have much more access to the world than children at the orphanage. This type of behavior seems to lead to a slightly different range of problems that include committing crimes, addiction, hallucinations, poor hygiene, and looking bad.

Children in orphanages seem to “glorify” their parents more, talking about how happy they are to see them, how they long to talk with them, have them visit, or go home with them. In contrast, center children seem to talk more about how their parents drink, force them to beg, kick them out, and pay no attention to them, rarely saying that they “miss their parents”. Moreover, there seems to be a deeper emotional loss (or longing) among the children at the orphanage, whereas the center children appear to be more angry and realistic about the parental neglect.

Children who attend the centers seemed to enjoy their time at the center and their freedom. They talk more about problems with their families rather than current issues in their lives. Children

living in orphanages do seem to make more comments about wanting to leave, to go anywhere else (although preferably home with parents), and that staff and teachers do not always treat them well. In other words, children who spend time on the streets appear to be “ok” with their current situation, whereas orphanage children may be more unhappy.

Recommendations

1. Use Study Data to Inform Interventions for At Risk Children

With qualitative data collection and analysis completed, this would be an appropriate time for SC-GFO and other interested groups to reflect on the data and their implications for current programs. A valuable first step would be to share the results with the Centers, Orphanages and Ministry of Education, and any other interested persons in the communities as the basis for discussions among all these groups. The results could be discussed: 1) in light of current Center activities and the RLP program; and 2) informing interventions for institutionalized children.

2. Continue to Give Attention to Child Safety

Although limited in number, the information gained from Martkopi is of concern in terms of children’s safety. There were numerous statements about beatings, arguing, stealing and yelling from staff. Although there was a recent change in administration at Martkopi due to such concerns, it would be important to monitor the situation in Martkopi and similar institutions, keeping the safety of children in mind. The Ministry of Education has begun to do this and, as a result, has already replaced some directors.

3. Address the Needs of Children at Centers as Identified in the Two Qualitative Studies

The data suggest that children enjoy spending time in the centers and may even be finding a type of “family” there. This is positive in that children from difficult family situations have adapted to find another place to give them a community and an emotional connection. As such, these centers seem to be serving a real need within the community. However, many of these children also show significant behavior problems, particularly their involvement in glue sniffing which then perpetuates other delinquent behavior in order to feed their addiction. These issues are challenging and difficult to address. To help keep children from negative street influences, centers could consider developing programs that occupy children’s time more when the centers are not open to keep them from these activities, or consider keeping centers open during daytime hours also. Centers might also consider a positive peer-mentoring and/or reward system. Street children are resourceful, but since this includes relying on other similar children for support, engaging positive role models to come and speak to the children can be beneficial. In addition, education at the centers currently seems to focus on school work. For this group, it is important to educate on the negative effects of some of their current behavioral problems such as alcohol, glue-sniffing, and stealing.

4. Address the Needs of Children at Institutions as Expressed in this Study

Most of the children in institutions actually have parents who gave them up, yet these children clearly remain attached to their parents, continue to love them, and express strong desires to be back with them. It is therefore likely that they are conflicted and confused about why their parents placed them in the institution. At the same time the study data suggest that these children

are lacking in both attention and in any emotional connection to a caregiver. Educating these children about relationships with parents and why kids are in institutions may be helpful in dealing with these problems. Normalizing and validating such conflicting emotions can help children bond with each other and look at situations in a different way – hopefully decreasing some of the emotional and behavioral problems they are demonstrating. Increasing the attention paid to children’s emotional needs should be discussed among staff and integrated into the care of these children. Staff need to understand the importance to a child’s development of an emotional connection. Creative solutions such as inviting older school children to be a “big brother/sister” to these children may also help them feel more cared for.

5. Promote Greater Family Participation

It may be the case that many families are overwhelmed by their current circumstances and do not know how to handle their children. Frequent meetings among parents of at risk children, as well as meetings between parents and staff of orphanages and centers (and/or other service organizations) would enhance parents’ sense of responsibility and involvement. Already parents have provided some useful feedback and suggestions through this study. Parent associations could be a valuable resource to draw upon. Outreach may be done through these meetings to help engage parents. Centers, institutions or other organizations could consider educational opportunities for parents to learn how to better manage their children.

During the de-institutionalization process, it will be critical to also assess the families who take in the children once released. Some families find it difficult to cope while others may take children simply to get the money being offered, yet not use the money to care for the child. Assessing the families’ capacity to care for their child and situations that may hinder this (e.g., alcohol, domestic violence) can prevent poor placement and also help develop an appropriate plan for care and follow-up.

6. Increase Community Involvement

In view of the strong stigmatization of at-risk children, it is vital to educate and engage community members on issues of at-risk children. The focus should be to overcome negative stereotypes and encourage communities to provide support and resources to assist at risk children. Activities would best be conducted through existing community organizations, such as churches and service groups.

7. Continue Current Work to Improve Understanding of the Needs of Children in Institutions

The recent evaluation of institutions in Georgia by the Ministry of Education was a very positive step. It will be important for all parties to move forward with the recommendations made from that report such as re-evaluating children in institutions, studying their family conditions, establishing a strict control over admittance, and training staff on child care. Beginning to understand who these children are and what their family situation is will help with the de-institutionalization process and preparation of services these children might need after leaving.

The Ministry of Education is already taking an important first step in planning future programs for deinstitutionalized children by learning more about how these children come to an institution and what their family situation is. As the process of de-institutionalization moves ahead, it will be critical to understand more about children who have spent years away from their families.

Assessments designed to look at their functioning, emotional status, interpersonal development, and behavior patterns will help guide programs both within institutions, and also programs to help families to receive their children after years apart. In other words, understanding children in orphanages is essential to assure a future smooth transition back to their homes.

In addition, and despite the best efforts of interested parties, it is likely that a significant number of deinstitutionalized children will end up on the streets, most likely due to ongoing family problems. Understanding and addressing the problems of street children is therefore likely to be an important aspect of the deinstitutionalization process, and The Ministry should support the efforts of interested organizations such as SC-GFO in this regard.

8. Continue with the Next Steps in the RLP Needs Assessment and Program Evaluation.

The data from both qualitative studies – that of street children in July 2005 (See Report: Causes of Children Living on the Street in Urban Georgia: A Qualitative Assessment by Boston and Columbia Universities. Available by request from Laura Murray at lmurray@bu.edu) and the current study will be used in the next step in the program assessment and evaluation process: the development of locally appropriate quantitative instruments. These instruments will accurately assess the frequency and severity of the issues that emerged in the qualitative assessment as well as assessing changes in child, family and community functioning. For SC-GFO and the RLP, these instruments would be used to assess project impact of at-risk children spending time at the Centers.

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Appendix A: Data Tables

Table 1: Numbers of responders across sites.

	Rainbow (Center)	Sparrows (Center)	Rustavi (Center)	Kojori (Orphanage)	Dighomi (Orphanage)	Martkopi (Orphanage)
Free Listing: N	11	12	15	18	16	17
Gender	7 F, 4 M	8 F, 4 M	7F, 8M	12F, 6 M	7F, 9M	5F, 12 M
Mean age	11.82 (8-16)	12.17 (6-16)	14.47 (10-18)	12.89 (8-17)	12.5 (9-18)	13.06 (9-16)
Key Informants	11 (7 twice)	12 (6 twice)	14 (9 twice)	9 (4 twice)	9 (5 twice)	3 (1 twice)

N represents the number of informants.

Table 2: Rustavi Function Free Lists (N = 15)

What is a happy child like?

When they can study and get education	5
Have a parent beside you	4
Cheerful	3
Go in for sport (play, activities)	3
When parents have good relationships (don't quarrel with each other)	3
When they don't lack food	2
When they take him/her somewhere	2
Of good temper	2
Is looking forward to do something (think about future)	2

What is a happy family like?

Have food, house	6
All family members work	5
Have money (are not poor)	5
all the family goes into the zoo, for a walk, or various activities	5
Have love in family	5
When they don't argue in the family	4
When the family are together	4
When parents are good (mother is warm, father brings food)	3
Parents are not divorced	2
When they are not ill	2

What is a happy community like?

Help each other	10
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Don't quarrel	8
Trust each other	5
Will not chat and gossip	4
Spend time together (visit, parties, tell funny stories)	4
Respect each other	3
Have good relations with each other	3
Are not cruel and wicked	3
Help with studying	2
Are kind	2
Love each other	2
Are not jealous	2

Table 3: Orphanages: Problem Free Lists

	Total
End up in the orphanage because of the financial situation/are poor	31
Want home/Miss home	19
Need warmth from the mother/Lack warmth/Neglect	18
Some have no mother, some have no father, some have no parents at all/orphan	15
Study problems	15
Some does not like to be here/can't get along with regime in orphanage	13
Having problems with school teachers and the director at school	11
Some teachers are kind, some are strict	10
Problems between parents/divorce	9
They put blame on children for everything/Differentiation	9
Children fight with each other, treat bad, oppress	7
I am sorry for the children in the streets	7
Have no clothes	6
When someone dies, I cry	6
Children's letters do not reach the President	6
Children are aggressive	5
Flipped hand at life (don't expect anything good from life and doesn't try to change anything)	4
Wishes can't be fulfilled in an orphanage	4
Director was stealing everything	4
Problem of the relationship with parents	4
Want a video and TV set with remote control	3
Children are not well-dressed	3
Some have ache of something	3
They sniff glue	3
They work, they are occupied with some activities	3
Often get sick	3

Can't have fun	3
Some parents can't leave children home alone	3
Mother and father are drunkards	3
There is no electricity and gas (food and heating)	3
Want my mother	2
Need toys	2
Can't buy books (textbooks)	2

Table 4: Centers: Free Listing Problems

	Total
Begging	26
Are needy/poor	25
Don't have parents, or relatives/Orphan	22
Sniff glue/Toxicomania	21
Don't have a house	19
Have a desire to steal to satisfy their wishes	17
Kid wants to be free	14
Hunger	14
Parents force them to be in the street	11
Misbehave	9
Lack the warmth/attention of parents	9
Beating	8
Cannot get along with parents/Relationship problems	8
Don't have friends/Laughed at	7
Study problems	6
Problems of clothes	6
Smoking cigarettes	6
Alcoholic parent	5
When parents are far away	5
Are ashamed of begging	4
Leave home stealthily (run away without permission)	4
Health problems	4
Parents make them beg	4
No entertainment	3
Unemployment of parents	2
Some siblings don't love each other	2
Problem of having no money	2
Drug abuse	2

Oppression, forcing by older kids	2
Violence to adopted kids	2
Missing of parents	2

Table 5: Key Informant Interviews (Signs, Symptoms and Causes): Orphanages

A. Missing Parents	Kojori	Dighomi	Martkopi	Total KIs
Sign/Symptom				
Cry	7	7		14
Sad faces	9	2		11
Always misses parents	3	4	2	9
Aggressive	2	2	1	5
Worried	2	3		5
Always expecting	2	2		4
Teary eyes	2	2		4
Want to be at their homes/misses home	2	2		4
Nervous	2	1		3
Less communicative		3		3
Downtrodden		3		3
Doesn't study	1	2		3
Leave school for even a small reprimand		2		2
Want to have relationships with parents		2		2
Waiting for time when they'll be taken away		2		2
Irritated		2		2
Think about mother	2			2
Hide that they miss their mother	2			2
Eat little/don't eat		1	1	2
Causes – sign/symptom				
Mother comes – kid jumps			3	3
Other parents come to visit, other kids see it	3			3
Affection – they open			2	2
If mother doesn't see for a long time – becomes attached to teacher			2	2
When mom comes – they run around			2	2
Doesn't have motherly warmth	2			2
What they do to help				
Go to teacher	3			3
Go to friend	2			2

B. Relationships with Parents	Kojori	Dighomi	Martkopi	Total
Causes – Signs/symptoms			N*	
Mother says taking them home – happy		2	2	4
Meet parents – joy		1	3	4
Parents can't take them - sad			2	2
Mother beating me - escaping			2	2
Playing with parents – feel good			2	2
When sees mother, forgets how hurt		2		2

Descriptions				
Mother is still a mother no matter what she does	3		1	4
Parents visit/ come every week	2		1	3
Father is drunkard	3			3
Parents are divorced	3			3
Parent is bad	2			2
Have warm relationships	2			2
Mothers can't afford having child at home	2			2
Parents of Orphanage kids never come to school	2	1		3
Parent fights with child	1	1		2
Parent beats child	1	1		2

C. Differentiation	Kojori	Dighomi	Martkopi	Total
Causes – Signs/symptoms				
Because from orphanage	1	3		4
Descriptions				
Kids blamed and labeled	3	3	1	7
Teachers and guards steal things and blame it on us/Blamed for stealing	3		1	4
Different grading	2	2		4
They treat us well	1		3	4
Villagers/school children beat the orphanage kids	1	1	1	3
School director/everyone calls the children “orphanage kids”	2		1	3
Don't understand each other, argue		1	1	2
School kids give notebooks and pens to orphanage kids		2		2
They have good attitude towards others			2	2
Teachers yell/punish, they don't beat us	1		1	2
School kids don't sit or get close to orphanage kids	1	1		2
Sign/Symptom				
Cry	4	2		6
Justifies him/herself		4		4
Get angry	2	2		4
Aggressive	2	1		3
Keep to themselves	2	1		3
Scared	1	2		3
Nervous	2			2
Orphanage kids stick together	2			2
Sad	2			2
Verbally offend their family members	2			2
Look miserable	2			2
Blushes	2			2

Table 6: Key Informant Interviews (Signs, Symptoms and Causes): Centers

A. Toxicomania	Rainbow	Sparrows	Rustavi	Total
Sign/Symptom				
Have hallucinations	1	6	3	10
Aggressive	2	4	4	10
Forget their problems	4	3	2	9
Wear dirty clothes	3	1	5	9
Cannot think/ mentally, their mind is not working	1	5	2	8
Imitate		4	4	8
Sick/sick lungs/fall ill	6	2		8
Steal	1	3	3	7
Can't give it up/addicted	4	3		7
Smell glue strongly			7	7
Inadequate behavior		2	4	6
May violate others physically/Beat others	1		5	6
Killed someone accidentally/might kill someone	2	1	2	5
Begging	2	1	2	5
Have red eyes, eyes are wet, messed up, widened		3	2	5
Sniff/get high	2	1	2	5
Cannot stay still			4	4
Don't think/care of anything else	2	1	1	4
Create another world for themselves		2	2	4
Like drunk people		1	3	4
Burst into laughter			4	4
Terrible to look at	1	2		3
Insult others			3	3
Have no homes	2		1	3
Feel bad	3			3
Live in the streets	3			3
Have to explain things many times to have them remember		1	2	3
Fall into affective condition	1		2	3
Do not know how to behave			2	2
Running			2	2
Physical development doesn't correspond to age			2	2
Only values getting money and buying glue			2	2
Cannot control behavior			2	2
Dazed			2	2
Sniff glue from age 7-8 till 18			2	2
Shuts brain down			2	2
Like mad people			2	2
Embarrassed			2	2
When sleep outside, they are not cold			2	2
Curious		2		2

Kill themselves		2		2
Slim		2		2
Without ego		2		2
Have fears (during sleep)		2		2
Disturbs relationships with friends		2		2
Closed		2		2
Don't trust everybody		2		2
Die	2			2
May not spare even the closest person	2			2
Misbehave	2			2
Forget everything for a second	2			2
Lose everybody	2			2
Fight	2			2
Take money away from others (for buying glue)	2			2
Conflict-prone	2			2
Irritated	2			2
Think they'll get strong or stronger	1	1		2
Might go insane	1	1		2
Effects				
Bad for health	2	2	1	5
Others don't want to have relations with such kids	1	2	1	4
Risk of involving others	1	1	2	4
Pierces lungs`			3	3
Could be followed by death		2	1	3
Causes mental retardation			3	3
Causes destruction of nervous system			2	2
If doesn't bring 10 GEL a day, father will beat			2	2
Don't sniff glue at center – do it elsewhere			2	2
Policemen bring kids who are dazed b/c of glue sniffing		2		2
Cause				
Its because of the families that these kids are in the street	1	1	2	4
Doesn't have somebody who will give him directions and show him the way	1	2		3
Gets into it due to surrounding conditions		2		2

B. Differentiation	Rainbow	Sparrows	Rustavi	Total
Description of issue				
Others have no close relations with them	5	3	1	9
Others make fun of them/talk about them	5	2	1	8
Not made friends with	1	3	1	5
Others who have experienced hardship feel pity for them	2		2	4
Others treat them badly	3			3
Teacher/others pays less attention to them	2		1	3
Stigma in reference to these kids/Labeling		2	1	3
Others think kids might steal something	2			2
Others don't express affection to them	2			2
People give money to them			2	2
Sign/Symptom				
Cry	2	3	6	11
Try to justify themselves	2	1	3	6
Get angry	2	3	1	6
Oppressed	3		2	5
Heart aches/heart broken	3		1	4
Nervous	2	1	1	4
Closed and won't open/don't trust	1	2	1	4
Sad		3	1	4
Don't enjoy talking/playing with kids	1	2	1	4
Alone/Lonely	2	1	1	4
Express aggression	2	1		3
Think others don't love them	2	1		3
Fight/argue	1	2		3
Think they are blamed	1	2		3
Feels bad when blamed	1		2	3
Blame street kids		2		2
Worrying about his/her situation		2		2
Keep anger in their heart	2			2
Thinks: What meaning life has	2			2
Feels offended when blamed			2	2
Cause				
Suffer that they don't have parents		2		2

C. Lack of parental warmth	Rainbow	Sparrows	Rustavi	Total
Sign/Symptom				
Sad	6	1	2	9
Aggressive	3	1	4	8
Closed		1	5	6
Cry	1	3	2	6
Sorrowful			5	5
Rude	1		4	5
Oppressed	1	3	1	5
Go away from home/ to streets	2		3	5
Does not communicate with anyone	3	1	1	5
Do not make friends with others	1	2	1	4
Eyes are sad			4	4
In bad mood/Not happy	1	1	2	4
Are beggars	1	1	2	4
Needs caressing		4		4
Downtrodden		3	1	4
Don't want to play	3	1		4
Want parent to treat them warmly	2	1		3
Irritated	2		1	3
All senses are intensified (joy, pain)		3		3
Not interested in anything	1	1	1	3
Lag behind in thinking/mentally	1	1	1	3
Steals stuff			3	3
Sits alone		1	2	3
Muddy and dirty	1		2	3
Thinks: Why mother (anyone) doesn't love him/her	2		1	3
Inadequate behavior		2		2
Tell everything about the family		2		2
Always awaiting for something		2		2
Nervous	2			2
Satisfied with minor warmth		2		2
Timid		2		2
Envy others who have parental warmth		2		2
If small, cries			2	2
Suffers from being alone			2	2
Low self-esteem			2	2
Don't cry			2	2
Don't know rules of behaving			2	2
Drinks/sniffs glue		1	1	2
Worries	1	1		2
Description				
Lack attention		2	1	3
Lack all kinds of warmth		2		2
Cause				
Mother /parent is alcoholic		1	2	3
Kids of bad things			2	2

D. Relationship between parents and kids	Rainbow	Sparrows	Rustavi	Total
Description of relationships				
Parent forces the kid to beg	8	5		13
Parent beats the kid	8	3	1	12
Parent doesn't love her kid	6			6
Some have bad/tense relationships	1	2	1	4
Some have good relationships		3	1	4
Parent wants to let the kid in	4			4
Parent fights with kid	2	1		3
Child fights with his/her mother	2	1		3
Parents didn't want to have this kid	2	1		3
Some love each other (parents and kids)		2		2
They understand each other		2		2
Parent does not show affection	2			2
Parent spends the money from begging him/herself	2			2
Kids are kicked out of home b/c of doing something wrong		2		2
Parents often fight		2		2
Kids escape from home		2		2
Beaten for doing something wrong		2		2
Sign/Symptom				
Kid is strict (if parent is strict)	3	1		4
Cry	2	2		4
Child revenges against family		4		4
Aggressive	3		1	4
Children feel bad	1	2		3
Smoke cigarettes		2	1	3
Sad	2	1		3
Have expectation of parents		2		2
Downtrodden		2		2
Confused		2		2
Not trust anyone	2			2
Tired of homes	2			2
Cause			N*	
Parents drunk and walk in street		1	2	3

Appendix B: Site-Specific Data Tables

- Table 1: Problem Free Listing – Martkopi, Dighomi, Kojori
- Table 2: Problem Free Listing – Rainbow, Sparrows, Rustavi
- Table 3: Frequency table and analysis of KI interviews: Martkopi
- Table 4: Frequency table and analysis of KI interviews: Dighomi
- Table 5: Frequency table and analysis of KI interviews: Kojori
- Table 6: Frequency table and analysis of KI interviews: Rainbow
- Table 7: Frequency table and analysis of KI interviews: Sparrowsi
- Table 8: Frequency table and analysis of KI interviews: Rustavi

Free List Results: Site-specific

Table 1: Orphanages:

	<u>Kojori</u>	<u>Dighomi</u>	<u>Martkopi</u>
End up in the orphanage because of the financial situation/are poor	11	16	4
Want home/Miss home	7	12	
Need warmth from the mother/Lack warmth/Neglect	2	11	5
Some have no mother, some have no father, some have no parents at all/orphan	8	4	3
Study problems	1	6	8
Some does not like to be here/can't get along with regime in orphanage		11	2
Having problems with school teachers and the director at school			11
Some teachers are kind, some are strict	10		
Problems between parents/divorce	5	1	3
They put blame on children for everything/Differentiation		5	4
Children fight with each other, treat bad, oppress		4	3
I am sorry for the children in the streets			7
Have no clothes	6		
When someone dies, I cry			6
Children's letters do not reach the President			6
Children are aggressive	5		
Flipped hand at life (don't expect anything good from life and doesn't try to change anything)	4		
Wishes can't be fulfilled in an orphanage	4		
Director was stealing everything			4
Problem of the relationship with parents			4
Want a video and TV set with remote control			3
Children are not well-dressed			3
Some have ache of something			3
They sniff glue		1	2
They work, they are occupied with some activities		3	
Often get sick	3		
Can't have fun	3		
Some parents can't leave children home alone	3		
Mother and father are drunkards	3		
There is no electricity and gas (food and heating)	3		
Want my mother	2		
Need toys			2

Can't buy books (textbooks)	2		
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Table 2: Centers: Free Listing Problems

	<u>Rustavi</u>	<u>Sparrows</u>	<u>Rainbow</u>
Begging	7	12	7
Are needy/poor	2	12	11
Don't have parents, or relatives/Orphan	4	10	8
Sniff glue/Toxicomania	14	4	3
Don't have a house	9		10
Have a desire to steal to satisfy their wishes	6	2	9
Kid wants to be free	9	5	
Hunger	4	10	
Parents force them to be in the street			11
Misbehave	9		
Lack the warmth/attention of parents	6		3
Beating		8	
Cannot get along with parents/Relationship problems	6	2	
Don't have friends/Laughed at	1	1	5
Study problems	6		
Problems of clothes	6		
Smoking cigarettes	4	2	
Alcoholic parent	3	2	
When parents are far away		5	
Are ashamed of begging			4
Leave home stealthily (run away without permission)	2		2
Health problems	3	1	
Parents make them beg	4		
No entertainment	3		
Unemployment of parents	2		
Some siblings don't love each other			2
Problem of having no money	2		
Drug abuse		2	
Oppression, forcing by older kids		2	
Violence to adopted kids		2	
Missing of parents	2		

Key Informant Site-Specific Data

Martkopi: (Table 3) Only 3 KIs were interviewed at this site due to limited numbers of identified KIs, refusal to respond, and/or difficulty in locating the identified KIs. As such, we included items that even only 1 KI stated. When asked about missing parents, the signs discussed were always missing parents, shifting thoughts, aggression, arguing with peers, not obeying caretakers, asking or wondering about parents, not eating and being close-hearted. These responses suggest that missing parents is common with these children and may lead to a variety of signs/symptoms. Under this category, the KIs mentioned that children help themselves by playing games or going to the yard.

When asked about relationships with parents, these KIs talked about specific characteristics of the relationship and how they affected the children. For example, all three mentioned that when the kids met the parents, they were joyful. Others included parents not being able to take them leading to sadness, mother beating them leading to escaping, mother saying they will take them home leading to happiness, and parents playing with them leading to feeling good. KIs also gave general descriptions of the relationships such as parents not having the ability to take their children home, parents and kids not getting along, and parents visiting and/or bringing things. Responses suggest that children are looking for interaction with their parents and hope to return home. Data also suggests that some relationships with parents are poor (e.g., beating), and some issues between parents and children have to do with economic strain (e.g., can't take child home).

On the topic of differentiation, KIs described both good (e.g., treat us well) and bad (e.g., yell at us, beat us) treatment by others. There were descriptions of children being blamed for things they didn't do and caretakers and teachers arguing and beating children. These KIs also described some specific situations and a child's response such as feeling sorry when someone is being beaten, asking why they are beating me when being beaten, and helping each other out when caregivers are beating the children. Specific to this orphanage, there were numerous mentions of poor treatment by caretakers including blaming from the staff, beating, yelling, arguing, and stealing. There was also mention of "keeping secrets", which was supported by the difficulty in getting identified KIs to talk with the interviewers.

Table 3: Martkopi –

A. Missing Parents	Total KIs = 3
Sign/Symptom	N*
Always misses parents	2
Shifting thoughts	1
Aggressive	1
Argue with peers	1
Don't obey their caretakers	1
Take reprimands wrongly	1
Body temperature surges	1
Ask to make phone calls	1
Wonder whether mom has called	1
Close-hearted	1
Don't eat	1

Hug their mothers	1
What they do to help	
Play games	1
Going out to yard	1
Going to see Godfather	1
Helping Godfather	1
Play computer games	1

B. Relationships with Parents	Total KIs = 3
Causes – Signs/symptoms	N*
Meet parents – joy	3
Parents can't take them - sad	2
Mother beating me - escaping	2
Mother says taking them home – happy	2
Playing with parents – feel good	2
Mom beating – jumped out of window	1
Mom leaves – jump for joy	1
Child goes with parents – other kids miss him	1
Mother promises to come and doesn't – kid doesn't eat	1
Even if mother hasn't come, kid can't bear a single bad word about her	1
Child sees mom with man – sense of alienation, then gets used to it	1
Return from family – children hug each other	1
Descriptions	
Mom wouldn't let me go out of home	1
Mom telling me to read books	1
Not getting along with parents	1
Stayed on street	1
Parents bring things	1
Parents don't have ability to take children home	1
Some parents stay and talk to their kids	1
Parents come every week	1
Parent comes after teacher calls	1
Mother is still a mother	1

C. Differentiation	Total KIs = 3
Causes – Signs/symptoms	N*
Village kid hit me – I hit him back	1
When someone is being beaten – feel sorry	1
Want to take responsibility for someone else's blame – I can bear it	1
Teachers get nervous – talk back to teachers	1
When beat me – say “why are they beating me?”	1
Kid doesn't have mom or dad, wants to be at home – kid cries	1
Caregiver treated child differently, beat him – we helped each other	1
In boarding school – kids don't like getting advice and not being allowed to do things	1
Something happens, teacher isn't told about it	1

Village kid took orphanage kid’s shoes off – orphanage kid scared	1
Descriptions	
They treat us well	3
They have good attitude towards others	2
Teachers yell, they don’t beat us	1
Sometimes kids make us mad	1
Villagers beat the orphanage kids	1
Treat us good, get along with me	1
Teachers argue with us	1
Caretakers beat us with sticks, mostly small kids	1
We keep things secret	1
Caregivers tell on children that they behave badly	1
Teachers and guards steal things and blame it on us	1
If something bad happens in the village, they blame it on us	1
Teachers beat us because of blaming	1
They bring police and beat us because of blaming	1
School director calls the children “orphanage kids”	1
Class masters and mates give presents on birthdays	1
Our kids bother the locals, steal fruit	1
Kids blamed and labeled	1
System goes towards the direction of integration	1
Don’t understand each other, argue	1

Dighomi (Table 4): This orphanage had a total of 9 KIs interviewed. On the topic of missing parents, the KIs clearly identified signs and symptoms of such children including crying, missing their parents, downtrodden, worried, less communicative, and the desire to be at home and have a relationship with their parents. They also mentioned children were irritated, had teary eyes, don’t study, always expecting, aggressive, and show sad faces. They also talked about situations where the mother comes and the child will jump and run around.

When asked about relationship with parents, these KIs talked primarily about situations when the parent was around and talking about caressing each other, the child being happy, running and laughing. They explained that when the child sees the mother, he/she forgets the hurt they felt. Additional responses from single KIs included descriptions of relationships such as good, bad, parents fighting, arguing, shouting, leaving the child, or never coming to visit.

On the topic of Differentiation, these KIs described this as orphanage children being blamed for everything, being graded differently, and that they sometimes receive things from school kids. Some additional descriptions of “differentiation” from single KIs include school and orphanage children not getting close and not walking or sitting side-by-side, others looking down on orphanage children. KIs described the signs in orphanage children as justifying themselves, getting angry, crying, and feeling scared. Additional signs/symptoms reported from single KIs include mistrust to everyone, lonely, lacking love, envious, aggressive, low grades, downtrodden, crying, hurt, closed, having difficulty with relationships, helpless, widened eyes, hands down, and irritated.

Table 4: Dighomi – Responses >1

A. Missing Parents	Total KIs = 9
Sign/Symptom	N*
Cry	7
Miss	4
Downtrodden	3
Worried	3
Less communicative	3
Want to be at their homes	2
Want to have relationships with parents	2
Waiting for time when they'll be taken away	2
Irritated	2
Teary eyes	2
Doesn't study	2
Always expecting	2
Leave school for even a small reprimand	2
Aggressive	2
Sad faces	2
Causes – sign/symptom	
Mother comes – kid jumps	3
Affection – they open	2
If mother doesn't see for a long time – becomes attached to teacher	2
When mom comes – they run around	2

B. Relationships with Parents	Total KIs = 9
Sign/Symptom	N*
Caress each other	3
Happy	2
Laughs, runs	2
Causes – sign/symptom	
When sees mother, forgets how hurt	2
C. Differentiation	Total KIs = 9
Sign/Symptom	N*
Justifies him/herself	4
Get angry	2
Cry	2
Scared	2
Description	
Blamed for everything	3
Because from orphanage	3
School kids give notebooks and pens to orphanage kids	2
Different grading	2

Kojori (Table 5): This orphanage had 9 KIs interviewed. When asked about “missing parents, KIs described this situation as children lacking motherly warmth and parents not being able to afford coming to the orphanage. KIs reported signs such as sadness, crying, missing mothers, teary eyes, always expecting, worrying, nervous, aggression, and thinking about mother. Other signs/symptoms reported by single KIs include oppressed, doesn’t play, looking miserable, slamming doors, smoking cigarettes, talking about missing, can’t study, and ask/wonder about mother. KIs reported that children may go to a teacher or friend for help with this.

KIs at this site described both bad relationships with parents (e.g., drunk father, divorced parents, bad parents, mothers can’t afford having child at home, parents never coming to school) and good relationships (e.g., warm relationships, parents visit children). Additional descriptions from single KIs included parents fighting/arguing with children, making them beg, kicking them out of the house, father beating, and meeting children coldly. The signs/symptoms of this included children loving their mothers anyway, saying “I’m not important to my parents”, having complexes, sitting shyly, looking with miserable eyes, lacking parental warmth, aggressive to father, feeling sorry for parent, and hating or hiding from father.

Differentiation was described as being blamed for things such as stealing, school teachers treating them differently, and everybody calling them “orphanage kids”. Additional negative descriptions by single KIs were school children not getting close, not walking or sitting by them, looking mean, being made fun of, school kids looking for causes to fight, teachers punishing, being locked in a room, and not being given medicines. Single KIs also reported some positive interactions such as orphanage children studying together and some school children asking them to be their friends. Signs/symptoms of differentiation include crying, being nervous, angry, sad, aggressive, looking miserable, blushing, and orphanage children sticking together and keeping to themselves.

Table 5: Kojori: Responses >1

A. Missing Parents	Total KIs = 9
Sign/Symptom	N*
Sad/sorrowful/sadness on faces	9
Crying	7
Miss mother	3
Eyes get teary	2
Always expect	2
Worry	2
Nervous	2
Aggressive	2
Think about mother	2
Miss home	2
Hide that they miss their mother	2
Causes – sign/symptom	
Other parents come to visit, other kids see it	3
Doesn’t have motherly warmth	2
What they do to help	
Go to teacher	3

Go to friend	2
B. Relationships with parents	Total KIs = 9
Sign/Symptom	N*
Love mothers anyway	3
Description	
Father is drunkard	3
Parents are divorced	3
Parent is bad	2
Have warm relationships	2
Mothers can't afford having child at home	2
Parents visit children	2
Parents of Orphanage kids never come to school	2
C. Differentiation	Total KIs = 9
Sign/Symptom	N*
Crying	4
Nervous	2
Angry	2
Orphanage kids stick together	2
Keep to themselves	2
Sad	2
Aggressive	2
Verbally offend their family members	2
Look miserable	2
Blushes	2
Description	
Blamed of things	3
Blamed of stealing	3
School teachers treat orphanage kids with understanding and give them better grades	2
Everybody around calls them "orphanage kids"	2

Rainbow (Table 6): Eleven KIs were interviewed at this site, consisting of mainly children who spent a significant amount of time on the street. When asked about Toxicomania, KIs described signs and symptoms such as getting sick, forgetting problems, not able to give up sniffing, feeling bad, living in the street, being dirty, dying, not thinking of anything else, misbehaving/aggression, forgetting everything, losing everybody, getting high, begging, and having no homes.

When asked about Differentiation, KIs described this as others having no close relations with them, making fun of them, treating them badly, not expressing affection towards them, teachers paying less attention and others thinking they will steal. The signs and symptoms talked about included oppression, heart-aches, thinking about the meaning of life, nervous, alone, crying, getting angry, expressing aggression, justifying themselves, and thinking others don't love them.

Key Informants described the signs/symptoms of lack of parental warmth as sad, not wanting to play, aggressive, not communicating with anyone, wanting the parent to treat them warmly, irritated, nervous, thinking why mother doesn't love them, and being out on the streets.

Relationships between children and parents were described as parents beating the kid, forcing them to bed, not loving her child, fighting, not showing affection, spending money on him/herself, and not wanting to have the child. The signs/symptoms described in relation to this included aggression, not trusting anyone, tired of homes, sadness, and crying.

Table 6: Rainbow, Responses >1

A. Toxicomania	Total KIs = 11
Sign/Symptom	N*
Get sick/fall ill/get disease	6
Forget the problems	4
May not be able to give up sniffing	4
Feel bad	3
Live in the streets	3
Dirty	3
Die	2
Don't think of anything else	2
May not spare even the closest person	2
Misbehave	2
Forget everything for a second	2
Lose everybody	2
Get high	2
Beg	2
Have no homes	2
Fight	2
Take money away from others (for buying glue)	2
Conflict-prone	2
Aggressive/Masochistic	2
Might kill someone	2
Irritated	2
Description	
Glue sniffing is unsafe	2

B. Differentiation	Total KIs = 11
Description	N*
Others have no close relations with them	5
Others make fun of them	5
Others treat them badly	3
Others who have experienced hardship feel pity for them	2
Others don't express affection to them	2
Teacher pays less attention to them	2
Others think kids might steal something	2
Sign/Symptom	
Oppressed	3

Heart aches	3
Thinks: What meaning life has	2
Nervous	2
Alone	2
Cry	2
Get angry	2
Express aggression	2
Try to justify themselves	2
Keep anger in their heart	2
Think others don't love them	2

C. Lack of parental warmth	Total KIs = 11
Sign/Symptom	N*
Sad	6
Don't want to play	3
Aggressive	3
Does not communicate with anyone	3
Want parent to treat them warmly	2
Irritated	2
Nervous	2
Thinks: Why mother doesn't love him/her	2
They are out to the street	2

D. Relationship between parents and kids	Total KIs = 11
Description	N*
Parent beats the kid	8
Parent forces the kid to beg	8
Parent doesn't love her kid	6
Parent wants to let the kid in	4
Parent fights with kid	2
Parent does not show affection	2
Parent spends the money from begging him/herself	2
Child fights with his/her mother	2
Parents didn't want to have this kid	2
Sign/Symptom	
Kid is strict if parent is strict	3
Aggressive	3
Not trust anyone	2
Tired of homes	2
Sad	2
Cry	2

Sparrows (Table 7): Twelve KIs were interviewed at Sparrows center, consisting of children, teachers, and the director. When asked about Toxicomania, some KI descriptions included children having hallucinations, showing problems of the mind, imitating, being aggressive, forgetting, being addicted, having wet, reddened, or messed up eyes, stealing,

looking terrible, not belonging to this world, being curious, killing themselves, being sick, slim or without ego. The primary causes of children getting into Toxicomania were their surrounding conditions or not having somebody to give them direction.

On the topic of Differentiation, KIs described this as children not having friends and having to deal with stigma due to not having parents. Children who are differentiated reportedly cry, are sad, angry, fight and argue, are closed, don't enjoy playing with others, worry about their situation and think they are blamed.

A child experiencing lack of parental warmth was described as needing caressing, having intensified senses, crying, downtrodden, oppressed, showing inadequate behavior, telling everything about the family, always waiting for something, lacking all kinds of warmth and attention, being timid and not making friends with others.

KIs explained relationships with parents as some being good (e.g., love each other, understand) and others being bad. The bad descriptions included parents making their children beg, beating, kids kicked out of the home, and parents fighting. Children who experience these poor relationships with parents have revenge against the family, have expectations, are downtrodden, confused, feel bad, and start crying or smoking cigarettes.

Table 7: Sparrows, Responses >1

A. Toxicomania	Total KIs = 12
Sign/Symptom	N*
Might have hallucinations	6
Has problems with mind	5
Some imitate	4
Aggressive (beat you, insult, swear at you, fight)	4
Forget about problems (pain, past)	3
Can't give it up/addicted	3
Eyes are wet, messed up, reddened, widened	3
Steal	3
Terrible to look at	2
Doesn't belong to this world	2
Curious	2
Kill themselves	2
Sick/sick lungs	2
Slim	2
Without ego	2
Have fears (during sleep)	2
Inadequate behavior	2
Disturbs relationships with friends	2
Closed	2
Don't trust everybody	2
Cause	
Doesn't have somebody who will give him directions and show him the way	2
Gets into it due to surrounding conditions	2
Description	
Bad for health	2
Could be followed by death	2

Others don't want to have relations with such kids	2
Policemen bring kids who are dazed b/c of glue sniffing	2

B. Differentiation	Total KIs = 12
Sign/Symptom	N*
Cry	3
Sad	3
Angry	3
Don't have relationships with friends	3
Fight/argue	2
Closed and won't open	2
Don't enjoy talking/playing with kids	2
Blame street kids	2
Worrying about his/her situation	2
Think they are blamed	2
Cause	
Suffer that they don't have parents	2
Description	
Not made friends with	3
Stigma in reference to these kids	2
If others don't need the kid, they chat about him/her	2

C. Lack of parental warmth	Total KIs = 12
Sign/Symptom	N*
Needs caressing	4
All senses are intensified (joy, pain)	3
Cry	3
Downtrodden	3
Oppressed	3
Inadequate behavior	2
Tell everything about the family	2
Always awaiting for something	2
Satisfied with minor warmth	2
Timid	2
Do not make friends with others	2
Envy others who have parental warmth	2
Description	
Lack all kinds of warmth	2
Lack attention	2

D. Relationship b/t parents and kids	Total KIs = 12
Description	N*
Parent makes the kid beg	5
Some have good relationships	3
Children are beaten	3
Some love each other (parents and kids)	2

Some have bad relationships	2
They understand each other	2
Kids are kicked out of home b/c of doing something wrong	2
Parents often fight	2
Kids escape from home	2
Beaten for doing something wrong	2
Sign/Symptom	
Child revenges against family	4
Have expectation of parents	2
Downtrodden	2
Confused	2
Starts crying	2
Children feel bad	2
Smoke cigarettes	2

Rustavi (Table 8): Fourteen KIs were interviewed at this Center, consisting of teachers, mothers, children, and the director. Some descriptions of children who experience Toxicomania include smelling glue, wearing dirty clothes, violating others physically, imitating, being aggressive, not being able to sit still, bursting into laughter, showing inadequate behavior, stealing, insulting others, having hallucinations, being dazed, falling into affective conditions, creating another world for themselves, forgetting, not being able to control their behavior, having red eyes, and not being able to think.

Differentiation was described as society feeling sorry for children, people giving money to them, and thinking they can make them stop bad habits by beating them. A child who experiences differentiation is described as crying when blamed, trying to prove that he is innocent, feeling bad and offended when blamed, and being oppressed.

Children who lack parental warmth showed signs such as being sorrowful, closed, having sad eyes, aggressive, rude, stealing, going away from home, sitting alone, crying, being muddy and dirty, sad, suffering, and having low self-esteem.

In talking about relationships with parents, the KIs at this site talked about parents drinking and children being angry. Although this is the only response indicated by 2 KIs, there were numerous responses mentioned by just one KI including some good relationships where the child wants the parent to be well. Bad relationships and their negative effects on the child were explained as lack of communication, being beaten, child who is aggressive, cold-hearted, wants to be left alone, doesn't go to school and smokes cigarettes.

Table 8: Rustavi, Responses >1

A. Toxicomania	Total KIs = 14
Sign/Symptom	N*
Smell glue strongly	7
Wear dirty clothes	5
May violate others physically	5
Imitate	4
Aggressive	4
Cannot stay still	4
Burst into laughter	4

Inadequate behavior	4
Steal	3
Insult others	3
Have hallucinations	3
Like drunk people	3
Sniff/get high	2
Dazed	2
Sniff glue from age 7-8 till 18	2
Fall into affective condition	2
Create another world for themselves	2
Do not know how to behave	2
Have to explain things many times to have them remember	2
Running	2
Forget their problems	2
Physical development doesn't correspond to age	2
Only values getting money and buying glue	2
Cannot control behavior	2
Have red eyes	2
Cannot think/ mentally, their mind is not working	2
Shuts brain down	2
Like made people	2
Embarrassed	2
Killed someone accidentally	2
Begging	2
When sleep outside, they are not cold	2
Description	
Pierces lungs`	3
Causes mental retardation	3
Causes destruction of nervous system	2
If doesn't bring 10 GEL a day, father will beat	2
Don't sniff glue at center – do it elsewhere	2
Risk of involving others	2
Cause	
Its because of the families that these kids are in the street	2

B. Differentiation	Total KIs = 14
Sign/Symptom	N*
Cry when blamed	6
Kid tries to prove he's innocent	3
Feels bad when blamed	2
Feels offended when blamed	2
Oppressed	2
Description	
Society feels sorry for him	2
People give money to them	2
Society thinks they will make them quit sniffing by beating	2

C. Lack of parental warmth	Total KIs = 14
Sign/Symptom	N*
Sorrowful	5
Closed	5
Eyes are sad	4
Aggressive	4
Rude	4
Steals stuff	3
Go away from home	3
Sits alone	2
Cry	2
Muddy and dirty	2
Sad	2
If small, cries	2
Suffers from being alone	2
Low self-esteem	2
Don't cry	2
Don't know rules of behaving	2
In bad mood	2
Are beggars	2
Description	
Mother is alcoholic	2
Kids of bad things	2

D. Relationships b/t parents and kids	Total KIs = 14
Description	N*
Parents drunk and walk in street, kids get angry	2