This report identifies critical issues with the alternative childcare system in Chile (Servicio Nacional de Menores- SENAME) and the protection homes (residencias) in particular to propose targeted and appropriate changes for VE Global’s currently existing programs. The report focuses on VE Global, the technical and residential teams/social workers in the protection homes, and the children residing in the protection homes.
General Overview

The violation of children’s rights and violence against children is a persistent problem in Chile that has been called to attention by various international human rights organizations including UNICEF, the Citizen’s Peace Foundation, and the World Organization Against Torture. According to the 2016 UNICEF report on violence against children in Latin America, 71% of all children in Chile have reported having received some kind of violence (psychological or physical) from his or her mother or father, with up to 77% of all children having suffered some sort of physical violence from his or her parents (UNICEF, 2016). Children under repeated incidents of abuse are reported to the Chilean National Service for Minors (SENAME) where the Family Court takes measures to sanction the parent(s) and assign the child victim(s) to an establishment under the responsibility of SENAME.

Approximately 19,000 children are in alternative care throughout Chile as of 2015 (Hogar de Cristo, 2015). 68.3% of these children reside in protection homes or adoption centers and the majority of them are between the ages 7 to 19. Specific reasons for their assignment into the protection homes/ separation from their families is unclear though the majority of the cases can be sorted into: abandonment by parent or the inability of parent to provide adequate care (23.6%), protective measures taken by the court (19.7%), negligence (18.3%), preventative measures (16.3%), sexual abuse (5.2%), physical or psychological ill-treatment (4.9%).

While the alternative care system is meant to serve as a protective measure by the state to ensure no further violations of the children’s Rights of a Child, various international human rights organizations such as UNICEF, International Committee on the Rights of the Child, and the Inter-American Commission on Human Rights have called an ongoing crisis within the Chilean system due to alarming reports uncovering widespread abuse within the many institutions.

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1 Defined as anyone under the age of 18 as defined by the UN Convention on the Rights of a Child
2 Servicio Nacional de los Menores (SENAME) founded in 1979
3 Tribunal de la Familia
4 Código Civil de la República de Chile, Ley de los Menores 1967
5 UN Convention on the Rights of a Child
**SENAME Crisis**

The most recent SENAME crisis came to light after an incident in April 2016 in which an eleven year old girl in the care of a SENAME protection home was suffocated to death by two custodians. The incident, now coined the Lisette Villa case, exposed the lack of training provided to custodians (educators- educadores⁶) and residential teams (equipo tecnico⁷), as well as the lack of protocol to prevent, manage, and/or report such incidences of abuse in the protection homes. A joint investigation between the Jaldres Commission and UNICEF in 2012 further reveals cases of organized sexual exploitation networks by custodians, unauthorized medication of children by custodians, and widespread sexual abuse among/between children within protection homes.

From 2005 to 2016, there have been 1313 deaths within SENAME establishments—including juvenile detention centers, foster homes, and residential protection homes—indicating approximately eleven deaths per month over the past decade under the government protection system. According to the 2016 National Institute on Human Rights’ (INDH⁸) report on the condition of 401 children living in 171 protection homes throughout Chile, 52.4% of the children reported having been abused one or more times within the SENAME establishments and 69.1% of these children continue to live with their abuser within the same establishment, leaving them vulnerable to repeated victimization. In addition, 67.9% of all interviewed children stated they have no way of reporting the abuses to the Family Court or their respective lawyers. The lack of protocol governing the physical and/or psychological abuse, negligence, and sexual abuse in the institutions as well as methods for children to access help constitute the current crisis unfolding with SENAME.

In response to the crisis, the Chilean government attempted on numerous occasions to pass a bill to reform SENAME by separating the organization into two. SENAME is currently under the jurisdiction of the Ministry of Justice and is responsible for overseeing adoption, juvenile delinquents, and children at social risk. Often, the two latter groups have been placed together within the protection homes causing intra-residential violence, assault, and bullying. Therefore, in 2012, the Chilean government proposed to separate the organization in two by creating an Adolescent Criminal Responsibility service for juvenile delinquents under the Ministry of Justice, and a Protection of Children service for children at social risk and domestic vulnerability under the Ministry of Social Development. As of early 2018, the reform bills are still being lobbied for debate and no actions have been taken considering the proposed reform.

**Problems within the Protection Homes**

The main problems with the alternative childcare system in Chile can be categorized into two categories: (1) mental health conditions and flawed treatment procedures within the protection homes and (2) the abuse of the children by the caretakers.

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⁶ Educators (educadores) are the caretakers that reside with the children in the residential homes
⁷ The technical team (equipo tecnico) refers to the social workers, psychologist/psychiatrist, and director
⁸ Instituto Nacional de los Derechos Humanos
A study conducted by the Psychiatric Clinic of the University of Chile found that 100% of the 108 surveyed children demonstrated symptoms of mental health disorders of various kinds. Many of the children demonstrated symptoms for multiple disorders: 41.6% of the children had behavioral disorders, 26.8% had attention deficit disorder, 21.3% were suicidal, 20.4% had severe depression, etc (Ministerio de Salud de Chile, 2007). While this study is not representative of the condition of mental health among all children residing in SENAME protection homes as its sample was restricted to 108 children reported to demonstrate severe behavioral changes, it provides insights into the type of disorders affecting the children in the protection homes. In 2015, 50% of the children in protection homes part of the Hogar de Cristo network (private partner of SENAME) required psychological and/or psychiatric attention every day (Hogar De Cristo, 2015). According to the study conducted by INDH in 2016, the most prevalent mental disorders are disruptive disorders 21.8%, anxiety disorders 18.5%, affective disorders 6.1%, and disorders associated with the consumption of alcohol or drugs 4.8% (Instituto Nacional de Derechos Humanos, 2017). As seen in the table above, of the entire SENAME network, one out of every five children demonstrated severe mental health conditions including but not limited to disruptive disorders, anxiety disorders, and affective disorders, and approximately 68.6% of the children ages 14 and older within the protection homes presented symptoms of depression in 2016 (INDH, 2017). Such disorders can cause severe weight loss/gain, aggressive behavior, angry outbursts, self harm, suicidal behavior, panic attacks, and such which thus affect the children’s ability to maintain relationships, participate in school, etc.

I worked as a full time VE volunteer at a protection home with twenty seven girls aged six through seventeen for four months. Of the twelve girls aged 13 and below, five girls took medication daily for attention deficit disorder and disruptive disorder/difficulties with anger management. Of the fifteen girls aged fourteen and above, four girls took medication for severe depression and anger management. This greatly influenced the type of relationship I developed with the children, as well as the type of work expected of my role as a volunteer. Most of my time was divided between organizing and carrying out workshops involving arts and crafts and talking with the children individually about whatever might be occupying them at the moment, including things going on at home, within the protection home, and at school.
On a near-daily basis, I was faced with girls experiencing a nervous breakdown or an anger fit. At the larger VE events (Liga de Deportes, Festival de Arte), some of the girls experienced anxiety attacks from being around large groups of people. Given the lack of space to work with older girls and younger girls separately, I had to work with girls from six to seventeen years old in the same confined room (container) causing additional complications; many of the younger children replicated the aggressive behavior of the older girls and imitated causing self-harm (cutting). The girls would often make cutting gestures with pencil sharpeners, scissors, broken rulers, and sharp pencils, and threaten to commit suicide. On multiple occasions, the girls threw objects including pencils, bags, and chairs and screamed/cursed at the top of their lungs. The psychologists and residential caretakers (educators and administrative team) were not present for most of these incidents and when present, resorted to threatening the children and punishing them for their breakdowns.

"F had already locked the door and when she heard my stuff were all inside the container, she began trying to close all the windows. I tried to climb in one window and she threatened to pull the window down on me and she tried to. I said, "no me toca porfa, no me toca" because she was extremely close to me while shouting out the window at me and the psychologist and at one point she almost elbowed me in my throat. The psychologist said she’ll call the police if F doesn’t open the door and F started crying and shouting that the psychologist was trying to incriminate her and was threatening her."

- Incident Report: October 19th, 2017

About 54.7% of all children who reported to feeling depressed for the INDH national study in 2016 stated they had some sort of access to informal help while the other 45.3% stated negative or difficult to assess. Of the children that claimed affirmative, approximately 52% had spoken to the residential psychologist or psychiatrist, about 30% with the caretaker (educators within the respective houses), and 23% with another person in the protection home. It is important to note that while nearly 68% of female children responded that they have access to some sort of informal help, only about 29% of male children responded the same. As for access to formal help, about half the children responded they have no access to the psychiatrist or psychologist in the protection home (INDH, 2017). The ongoing SENAME crisis and the lack of qualified personnel is just one of the reasons the children have difficulties accessing formal help within the protection homes. Most of the SENAME institutions severely lack funding, making it not only difficult to pay for professionals to work in the protection homes, but also to take children to appropriate medical facilities. The state-provided public healthcare is frequently in delay with extensive waiting periods, and more psychological and psychiatric services are becoming privatized, reducing the amount of affordable care accessible to children in alternative care (Albert, 2017). Within the protection homes that do have psychologists and/or psychiatrists, the 2016 study in the various Hogar de Cristo establishments note the lack of connection between the psychosocial intervention work and the daily routine of the children. The absent or minimal communication between the educators/caregivers and the technical/psychological team

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9 refer to appendix for specifics: incident reports October 19th, 2017 - December 22nd, 2017
10 speaking with someone about one’s condition but without receiving any medical, psychiatric, or psychological help from a professional
11 involving medical, psychiatric, and/or psychological help from a professional
At the protection home where I worked, the psychologist organized sessions with children on Wednesdays and Thursdays for about 15 to 30 minutes per child. From what I was able to observe, most children met with the psychologist once or twice a month and not all children met with the psychologist, despite the delicate dynamics and influences impacted within the compact group-home lifestyle. I worked every day in the afternoons when the children began returning from school, and rarely saw the psychologist outside of the main office. She occasionally stopped by the volunteer working space to see how things were going and would remind me that I was in charge of maintaining discipline and to point out to me which girls were “problematic and in need of attention”. I had one passing conversation with the psychologist throughout my whole four month commitment while presenting the video/poem I had edited with one of the girls to submit to VE’s Festival de Arte program. She saw the drawings that I had been collecting from the girls on the subject of “Mis Sueños” (my dreams) as well as the poems the girls wrote- most of which was written to their parents or family member- and asked why I hadn’t shown any of these “valuable therapy materials” to her before, and if I had any more of the girls’ work to share with her. I let her know that the children worked on the “therapy materials” as an art project for the upcoming VE program and that as I was not sure the children wanted the technical/residential team and caretakers to see their projects that I cannot share or give any of the projects to her. I did, however, invite her to join my partner volunteer and I in our workshops if she would like to see the type of work the children did with us every day, throughout the week. Regardless, the psychologist did not join us in any of our activities nor participate outside her office with the children. The caretakers in the houses also did not take part in any of our activities with the children and were most times oblivious to what we did with the children.

Considering the severity of mental health conditions within the protection homes and its effects on the children, this paucity of measures to provide appropriate support and professional help to the children, as well as the lack of proper training and education for those working with the children within the homes (educators, technical team, etc.) are incredibly problematic. The faulty management of delicate psychological conditions lead to further issues including escalation of tensions between the children and their caretakers, unjustified and/or ineffective punishments, and abuse.

2. Abuse within the Protection Homes

While protection homes and other alternative care systems are meant to protect children and their rights of a child from [further] violation, the lack of training for the caretakers and social workers and fragile/flawed response protocols are spawning a widespread practice of abuse within protection homes throughout Chile. As uncovered in the recent investigations on the SENAME crisis, 52.4% of children living through 171 protection homes in Chile have reported having been abused one or more times in a SENAME establishment (INDH, 2017). These abuses can be classified into one of three categories: psychological/verbal abuse, physical abuse (light, severe), and sexual abuse.
Adolescents ages fourteen and older were more likely to experience abuse within the residencia, with a significant difference in the percentages of children in the two age groups that experienced psychological abuse. As for physical abuse and sexual abuse, both were reported to be less common within the residencias, with note on the latter being prevalent between/among the children rather than acted by a caretaker (INDH, 2017).

As seen in the graph above, nearly half of all children residing in protection homes throughout Chile have experienced some form of psychological in the past year. Psychological abuse as defined by the study includes shouting, punishing without beating, insulting and swearing, not speaking to the child for an extended period, name calling, and locking up the child in a separate room. There exist some significant differences in the perceptions of each of these forms of psychological abuse by the children and by the caretakers; 62% of the children reported punishing without beating as a frequent form of psychological abuse compared to just 26.6% by the caretakers. Shouting and ignoring the child for an extended period were also reported by the children to be frequent forms of abuse within the protection homes. Punishments can be classified into five main categories: deprivations of rights (family visits, playing outside, etc.), exclusion/segregation, physical containment, execution of domestic chores, and other (put to bed early, group punishment, etc.).
etc.) (INDH, 2017). Not only are these punishments ineffective, they often don’t take into consideration the delicate conditions of the children and the difficult behavior caused by psychological/behavioral disorders.

The most frequent form of abuse I encountered in the protection home was psychological/verbal abuse and the deprivation of rights. The educators would speak poorly of the children in their presence, by calling them dumb-witted, ignorant, poor, naïve, etc. and the technical team would often threaten to call the cops on the children or increase their due stay in the protection home. On one instance, the technical team (director and psychologist) called me in to the office to teach me “how to properly treat these kids” because I was being “too lenient” and I “didn’t know the real side of the children” that I’m working with. The director laughed at one of the girls for her “futile attempt” to run away to see her girlfriend/ former protection home resident. The girl attempted to tell the director and the psychologist that she feels “caged” within the protection home and the regulations on every one of her actions is not helping her feel any better in the protection home and that she is not happy in the home. The director then resorted to reminding the girl of how she has no other family member to go to and how she herself chose to stay in a protection home at the court. The psychologist then told the girl that her friend’s family asked to adopt her but that the team declined the offer and how the team will add six more mandatory months of stay to the girl’s commitment in the protection home because of her “poor behavior”. The director and psychologist then forced the girl to wipe her face so she can save “whatever dignity she has left”. Such abusive behavior from the very authorities in charge of providing psychological and physical support for the children undermines the very purpose of these institutions and further harms the children they allegedly support.

“The policy at NSDP (protection home) is for the first three months after a girl arrives, they are not allowed to use the computer room, leave the residencia (también por las actividades o los eventos- also for activities and events), or use cell phones. She said there’s nothing to do at the residencia but sit around all day doing nothing and that she was tired of the residencia and that she doesn’t want to be here anymore because they deny her of everything. The psychologist responded that S doesn’t have access to any of the privileges because of her behavior and the director added that S pretends to be a different person in front of other people, for example, when her tia (aunt) came for visita (family visit), and that she’s going to call S’s tia and tell her about the real S, how she cuts herself, is a negative influence on all the other girls, shouts at the tias when she has her breakdown, etc. The director also added that it was S who didn’t say this at the tribunal (family court) and asked multiple times, “y tu le dijiste a la tribunal? no po. (and did you tell the court? Obviously not.)” to which Sofia responded by saying she had no other option, that she has absolutely no other family to go to. The director and the psychologist responded, “entonces, tu sabes bien que tu no tienes otra opciones (so you know you have no other options)” and that for them Sofia is also just another girl that they have to take care of at the residencia.”

- Incident Report: November 23rd, 2017

The abusive behavior by the team and educators stems from a poor understanding of treating psychological disorders and poor training on proper protocol. Most anger fits and nervous breakdowns within the residencia where I worked were punished by not allowing

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12 Refer to incident report November 23, 2017
the child in concern to work with me and my partner during the day or not allowing them to participate in a weekend VE activity. Multiple children were not able to participate in Liga de Deportes or Festival because of their routine breakdowns and aggressive behavior. Children were also often threatened of being denied access and actually denied access to family visits. The majority of the children were allowed visitors once a week, once every two weeks, or once a month depending on their behavior and the family’s availability during the visiting hours (3:00-6:00 pm on weekdays; excused leaves on weekends). As they majority don’t have access to phones or web communication, the family visits were the only way of keeping in touch with their families. The technical team and educators used this as a leverage in punishing the children; once a house educator did not allow an older sibling to leave the protection home with her younger sister for their weekly leave to their uncle’s house because she fought with another girl on Thursday. I also witnessed the psychologists threatening the girls on multiple occasions to “call their families and let them know how horrible they are doing in the protection home and tell them the truth about how their children actually have severe mental illnesses,” for crying late at night and inflicting self harm.

From 2014 to 2017, SENAMIE reduced its budget allocated to training and education of its personnel by 399% (Albert, 2017). At the moment, only 51.7% of the educators have completed secondary education, and nearly none have any professional experience and/or education in psychology or behavioral sciences (INDH, 2017). The psychologists and psychiatrists within the protection homes and the family courts also severely lack expertise as the requirements to enter the registry (for the Family Court) include only a title certification and five years of experience as a psychologist, with no reference to any specific area of training. According to the lawyers defending the children in the Family Court, “the diagnoses made by professionals have worsened” (Jara, 2016). This is detrimental to the proper functioning of the alternative care system as a growing part of the educators’ and technical teams’ responsibilities include intervention in crises, prevention of risks, respect and protection for vulnerable groups, and psychological management (INDH, 2017).

| Tabla 3.1 Personal encuestado que reporta haber recibido capacitación durante los últimos 12 meses, por área de capacitación y tipo de cargo* |
|----------------------------------|------------------|------------------|------------------|
|                                   | Educadores de trato directo | Equipo técnico | Administrativos y otros cargos |
| Manejo psicológico                | 4,6%              | 10,0%            | 4,5%             |
| Intervención en crisis            | 22,8%             | 13,3%            | 8,0%             |
| Sexualidad y prevención de abuso sexual | 7,4%              | 6,8%            | 3,5%             |
| Respeto y protección de grupos vulnerables | 12,3%        | 15,4%           | 3,1%             |
| Prevención de riesgos            | 36,6%            | 17,5%            | 31,0%            |
| Habilidades parentales           | 6,4%              | 19,9%            | 0,7%             |
| Adopción                         | 0,0%              | 3,3%             | 0,3%             |
| Apoyo y estimulación temprana    | 4,6%              | 6,0%             | 1,0%             |
| Protocolo SENAMIE                | 1,5%              | 2,4%             | 2,4%             |
| Salud e higiene                  | 5,0%              | 5,1%             | 4,5%             |
| Administración de medicamentos   | 4,3%              | 4,2%             | 1,0%             |
| Consumo de drogas: administración y manejo | 0,3%        | 0,9%             | 0,7%             |
| Maltrato                         | 1,3%              | 0,9%             | 0,7%             |
| Buen trato y relaciones entre pares | 6,6%              | 1,5%             | 0,7%             |
| Otra                             | 5,6%              | 9,4%             | 6,6%             |
Particularly, due to the lack of trained personnel and adequate measures to handle crises and psychological breakdowns within the protection homes, unqualified educators and team workers are having to focus on managing situations beyond their capacity. Conne Fritz, the caretaker charged with unlawful coercion and torture resulting in death of Lisette Villa acknowledged that she was not aware of the proper protocol for handling anger fits nor had experience in first aid, and that those lack of experiences led her to suffocate a child in the hands of the protection system. She however, added that “protection homes are never going to have anyone that is adequately qualified, and if that’s the case, they might as well have someone that loves the children.” (TELE 13, 2016). Many such educators and workers report that due to their preoccupation with such cases, they do not have the time to carry out the most important aspects of the protection home system: social intervention, evaluation of programs, and creation of activities for the children (Hogar de Cristo, 2015). In addition, the frequent rotation of personnel between the SENAME network makes it even difficult to implement consistent intervention programs and teamwork within the protection homes.

In summary, the lack of funding for adequate training and education of the caretakers by SENAME and the consequent lack of personnel are behind the poor and abusive management of the children within the alternative childcare system. As a result, children are denied access to necessary and rightful treatment and support, and the residential workers and teams are unable to focus on improving and implementing programs targeted at healthy development and preparation for interdependent living. The difficulties in reporting such problems allow for the continuation of this phenomenon that is at the center of the SENAME crisis.

VE Global : Evaluation and Recommendations

VE Global (VE) is a nonprofit NGO based in Santiago that recruits, trains, and organizes international volunteers to achieve its mission of fostering the positive development of children at social risk in Chile. Its programs serve the very children who have been separated from their families by the Chilean Family Court and assigned to the care of the SENAME network as a protective measure to ensure no further violations of their Rights of a Child. VE volunteers engage in the residencias every day to build and maintain a reliable and supportive presence for the children. Its volunteers provide critical support to the positive and resilient development of the children by serving as role models whom contribute to nurturing a broader worldview and widening future possibilities. As of 2018, VE has successfully integrated nearly 450 full-time volunteers from more than 35 countries into its network of local partner organizations which include children’s homes, community centers, schools and preschools in some of the most vulnerable areas of Santiago.

Each VE volunteer is placed in one of its partner institutions where s/he works a minimum of 30 hours each week. Volunteers run various workshops ranging from cooking, painting, and reading, to creative writing, science experiments, etc. catered to help the children find their interests and talents. VE volunteers also aim to build strong relationships with the children for whom they provide support, friendship, and the opportunity to be themselves. In addition, VE volunteers help implement and improve VE’s four educational programs:
¡Vamos a Leer!, Festival de Arte, Liga de Deportes and English in Motion. These four programs focus on developing mature reading skills and enjoyment for reading, providing an opportunity to express oneself through art, encouraging healthy lifestyles, and learning English outside the classroom.

While VE Global’s volunteer program has served in various types of establishments in the past, it is currently undergoing a transitory period in which it is looking for new partner organizations mainly consisting of protection homes. This proposes fresh challenges considering the ongoing SENAME crisis and the alarming increase in the number of children that have died or reported abuse within the government issued protection homes. In addition, the aforementioned problems and deteriorating conditions within the protection homes undoubtedly call for a review of VE’s programs in consideration of the type of work to be expected of VE volunteers in these precarious establishments. Thus, VE Global must:

1. Define the community it is serving and Identify its needs,
2. Reevaluate its programs in relations to the identified community and its needs,
3. Adapt its recruitment and training of volunteers to support the proposed program changes.

1. Target Community and its Needs

VE Global’s mission reads: We foster the development of children at social risk in Chile by training and empowering volunteers to serve as positive role models, educators and advocates of social justice.

The community VE Global works with can thus be defined as (1) the volunteers- refer to section 3- and (2) children at social risk. Considering the latter, VE Global works with children from varying backgrounds in different types of care establishments. VE Global has previously worked at children’s protection homes, community centers, schools and preschools in some of the most vulnerable areas of Santiago. Each of these institutions serve a distinct population of children, at different types of social risk. This affects the focus of VE’s programs, the needs they should target, and their impacts on the community (children) they serve. As of February 2018, VE Global is expecting to continue its partnership with Mi Club Domingo Savio and is in search of new partner organizations.

Mi Club Domingo Savio is an co-ed after school center that serves 50 children ages 5 to 18 from families in emerging poverty in the community sector of Santa Eduvigis, Padre Hurtado. The center pursues a positive and integral development agenda by accompanying children and their families through the formal education process to break the cycle of poverty through education. On a regular day, children arrive at the center after school to work on homework and participate in various educational workshops provided by the center, and return home at 7:00-7:30 pm (Fundacion de Menores Domingo Savio, 2016).

The main difference between the community served by Domingo Savio and the community supported by protection homes (residencias/hogares de protección) such as former partners Nuestra Señora de la Paz and Fundación Acompaña for example, is whether the children have access to and/or live with their families. It must be taken into account that unlike the children supported by Domingo Savio, children in protection homes as such have been...
separated from their families by the State as a measure to protect them from their family and/or abuses within the domestic setting. These children cannot leave the establishment and most often live with other children from similar backgrounds in the same establishment, are separated by gender, have limited access to their families, and are dependent on the educators and team (non-family members who cannot provide individual/ personalized attention) for their well-being and development. As identified in the research, it is likely that a notable number of the children are in need of psychological and/or psychiatric attention, and that their needs are not adequately met by the protection home and its staff.

Considering the differences in my personal experiences working at a protection home and the experiences of a coworker who worked at another protection home, I cannot generalize the demographics and characteristics of the community I served in my protection home as one likely to be similar to other potential protection home partners. However, from my exchange experience at Domingo Savio, it is evident that the children residing in protection homes behave differently, resulting mainly from the stigma around protection homes, the confined environment in which children of ages from six to eighteen with varying reasons for being assigned to an alternative care establishment are forced to interact and engage within a confined space resulting often in not the best dynamics and/or positive influences, and their limited access to basic activities that other children their age (11-17 years) can engage in freely (use of phones, use of social media, dating, going over to a friend’s house, etc.). Among themselves, the children often detailed explicit and graphic images of sexual and/or physical abuse to others (most often younger children), inflicted physical or psychological abuse on another (most often younger), and gossiped about each other’s private background and family information (marital rape, physical abuse of a family member by another family member, economic standing, etc.). When interacting with those outside the protection home and familiar school settings, the children often demonstrated defensive behavior and difficulties interacting with others; at various VE events such as Liga de Deportes at which children from all partner organizations come together, the children from the my protection home asked me repeatedly if “the other children are from protection homes as well”, and have acted aggressively against the “non-residencia” children (swear, ignore, and threaten to hit or kick).

It is thus imperative to consider both the social/background differences between the children served by various types of establishments and the dynamic of the children when brought together from their respective establishments for VE’s programs. In order to ensure VE is appropriately meeting the needs of each group and does not cause conflicts in engaging all groups in its programs, VE must:

1. Narrow its partner organizations to a specific type of establishment (after school center, adoption center, protection home, etc.)

OR

2. Identify the types of social risk its serving communities are exposed to, understand the community served by different types of establishments and how they compare/contrast, and select similar needs that it will work to meet.

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13 The public perception of protection homes and the children residing in them have deteriorated in the past decade. The children under the protection system are labeled “problematic children” and treated as such.
In terms of the programs and assistance provided by the VE’s partner organizations, Domingo Savio works with [international] volunteers from non-VE organizations while most SENAME and related protection homes do not, and are in shortage of full time volunteers. Domingo Savio also focuses on providing educational assistance while protection homes oversee everything from life within the home, extracurriculars, school, medical needs, and relations with the Family Court. The former provides different arts, language, and sports workshops while the latter do to a limited extent by bringing in external organizations or service providers (municipality social workers, Rotary Club, etc.), depending on resources. Fundamentally, protection homes lack programs to engage the children and foster their positive development.

Below is a table examining the community served by Domingo Savio and potential partner protection homes in terms of the social risks affecting the community, the needs of the children, and the needs of the respective establishments. Based on the table below, it is clear that there are few mutual needs between the two groups as they are fundamentally different in the type of social risk that affects each community and the severity of the risk in relation to the rights of a child. A general need between both groups would be positive development activities and resilient role models (volunteers) who can organize and coordinate those activities. However, it must be noted that based on the distinct needs of the children and the establishments, a general umbrella of “serving as role models to foster positive development” leaves much ambiguity as to whether the specific needs of the respective community are met.

<table>
<thead>
<tr>
<th>NEEDS</th>
<th>Domingo Savio et al</th>
<th>SENAME Protection Homes</th>
<th>MUTUAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>RISKS</td>
<td>Economic and related risks</td>
<td>Domestic/ inter-familial risks Physical, psychological, sexual abuse</td>
<td>(possibly) poverty related.</td>
</tr>
<tr>
<td>Children</td>
<td>- help with homework</td>
<td>- positive development and recovery focused activities - individual attention/ privacy</td>
<td>Positive development activities in various areas</td>
</tr>
<tr>
<td></td>
<td>- positive development activities</td>
<td>- appropriate psychological/ psychiatric attention - public excursions and/or any activity that takes place out of the residencia</td>
<td>Resilient role models</td>
</tr>
<tr>
<td></td>
<td>- resilient role models</td>
<td>- external support group to possibly report to or rely on - resilient role models</td>
<td></td>
</tr>
<tr>
<td>Establishment</td>
<td>*Volunteers to:</td>
<td>*Full time volunteers to:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- help implement programs and supervise workshops - assist in the office - run VE workshops (if there is time) - serve as positive role models for the children *Economic/ financial assistance</td>
<td>- organize positive development programs - organize engagement programs (arts, sports, etc.) - interact with children and establish stable relationships - serve as positive role models for the children - coordinate age-appropriate</td>
<td>Volunteers that serve as positive and resilient role models Diverse interest/ talent development workshops Economic, financial, and material</td>
</tr>
</tbody>
</table>
To elaborate, at the protection homes, the role of the volunteers could potentially extend beyond activity coordinators as they are often the only available support group that is independent of the protection home, the caregivers, the technical team, the SENAME network, the Family Court, and the protection system. They add to the protection home to foster an alternative family/home environment which result in the establishment of relationships with the children quite different from those expected/resulted in establishments that serve a different purpose. In addition, at establishments such as Domingo Savio where there already are organized schedules and trained professionals running such activities, volunteers tend to assume the role of a helping hand while in the protection homes, volunteers are more likely to be entirely in charge of providing [possibly the only] programs.

VE Global’s volunteer program and four core programs in this regard need to adapt to the complex and diverse community it serves. Its currently existing programs meet the needs identified by establishments such as Domingo Savio and better-resourced protection homes. Volunteers are able to provide help with homework, organize and VE approved, interest-development workshops, and implement the four core programs that target physical health, reading, English education, and art. However, in the search for new partner organizations for 2018, if VE Global seeks to work more with SENAME protection homes, it must reevaluate its volunteer program to meet the recovery focused, integrative, and support-based needs of the children in the protection homes. Assuming VE Global’s continued partnership with Domingo Savio, rather than maintaining programs that address the few/cursory mutual needs among its various partner establishments, it would be best to remodel the volunteer program to incorporate a more comprehensive training that serves the needs in the protection homes (and can be applied at Domingo Savio) and incorporate measures to ensure a smooth interaction among children from different types of establishments at VE’s group programs.

2. Evaluation of Current Programs and Recommendations

(a)Volunteer Program

VE Global receives volunteers from all over the world. Each VE volunteer is placed in one of its partner institutions where s/he works a minimum of 30 hours each week. Depending on the organization, volunteers work with children from ages three to seventeen. At the partner organizations, volunteers run various biweekly workshops ranging from cooking, painting, and reading, to creative writing, science experiments, etc. All workshop plans\(^4\) are reviewed and cleared by VE Global before they are implemented in the partner establishments, and must provide a list of specific target objectives. These workshops

\(^4\) Refer to Appendix: Workshop Plan Template
ensure the volunteers are organizing a variety of programs for the children to engage with and are crucial in addressing the lack of activities and programs in the protection homes.

Considering the lack of opportunities for children in protection homes to experiment with their interests, and their limited access and exposure to a variety of non-traditional educational experiences, VE Global can consider shifting the primary focus of the workshops from engaging the children and ensuring volunteers share their skills to using these workshops to help children explore their interests and talents. VE’s current workshops and volunteers already address these points but by making interest and talent discovery the primary focus, these workshops can promote positive self-discovery and the strengthening of self esteem. Both of these developments can assist in the process of recovery and allow for more personal attention.

I organized multiple creative writing workshops for children who showed a keen interest in writing. The workshop wasn’t meant to engage all of the girls but a few girls that wanted to write, explore their voice, and channel their expressions to create something of their own. This took away from the time I could’ve spent with the group as a whole but it was a valuable opportunity to provide individual attention (need) and provide guidance as the girls struggled to find their identity (in writing). I also organized multiple fashion related activities where those interested in design and fashion could work on sketching, modeling, and creating life-size samples using each other as models. For those interested in art, I allowed them to use whatever materials to create whatever (need) it is they wanted, and focused on providing positive feedback (need).

As such, VE could consider promoting workshops that target specific children in rotation to address the need for personal attention, positive feedback, and recovery rather than organizing workshops that address the whole group/ whoever is interested in the activity. Two questions to keep in mind: are these objectives what the children need? How can children benefit from these objectives? Conducting weekly surveys could also help understand what types of workshops the children want and allow volunteers to plan out their workshops to meet the different types of interests. The focus should be on organizing workshops that the children want, not organizing workshops then working with whoever is interested. Moreover, VE should reconsider the workshop requirement; rather than requiring two workshops per month, VE could collect the interest surveys and work with its volunteers to evaluate if the volunteers are addressing the feedback and how VE could help them in their efforts. By doing so, VE could better serve its mission to train and empower volunteers. Its weekly training sessions can focus on brainstorming activities to address less familiar interest areas such as IT, etc. to incorporate all the skills that VE’s rich international volunteers can provide.

VE should also consider changing the structure of its workshops to be more flexible. Because of the stigma around the protection homes and the restrictive lifestyles within them, it is important for the children to engage in free/ impromptu activities. If the workshops were remodeled to be interest-serving-activity focused, they can work as great opportunities for children to engage in non-regimented activities in the same way children at home can.
On a similar note, workshops should be tailored by age if possible. Domingo Savio separates its children into three groups: ages 5-8, 9-12, and 12+. Within the protection homes, such divisions will be difficult to implement because of the number of children and the limited number of volunteers. However, a noted issue in the protection homes is the influence children of different ages have on each other, especially in such confined settings. VE should instruct its volunteers to be cautious of this component and the type of problems that can occur as a result. If there are multiple volunteers in one establishment, they can also consider working with specific age groups (as in Domingo Savio) if possible.

VE volunteers do more than organize workshops and activities in the partner establishment. As a part of the mission, VE volunteers work to serve as positive role models, educators, and advocates of social justice. While resiliency is a focus of the volunteer program and exercised by volunteers on a day to day level, its impacts are difficult to measure and are diverse. VE should train volunteers to work on specific areas such as fostering self confidence, healthy body images (physical/ psychological) and gender perceptions (gender/ psychological). These do not need to be instructed in the form of lectures or activities, but by training volunteers to incorporate certain speech when addressing the children. For example, volunteers can be encouraged to assign empowering nicknames (sample: mi champion) to each of the children and repeat that to the children in conversations, compliments, feedback, etc. This practice worked well in my experience with children working to meet up to their own expectations of their nicknames: “Tia, yo puedo ayudarte. No hay nada que yo no pueda hacer porque yo soy tu champion.”

Another aspect that could be included in VE’s volunteer program is cultural and arts related excursions. Lack of cultural and arts exposure was cited to be a big problem in many of the protection homes and the limited access to internet and different types of media in these homes add to this problem. VE programs team (or DevComms for partnerships) and the volunteers could work together to organize weekend/ after school excursions to art galleries, museums, etc. This would also allow casual trips out of the protection homes, exposure to arts, and ameliorate feelings of confinement in the protection homes.

In terms of working with the caregivers and technical teams, often partner establishments have asked volunteers to fundraise on behalf of their establishment. From the experiences of the class of September 2017, volunteers at Domingo Savio and Fundacion Acompaña organized fundraisers to donate directly to their establishments, and volunteers at Nuestra Senora de la Paz were asked multiple times to organize informal material drives for the protection home. As noted above, many of the alternative care establishments, regardless of their type, lack financial and material resources. Volunteers are already required by VE to organize fundraisers for VE Global. Their peer to peer fundraising plays an important role in sustaining VE Global. However, possibly in the future when VE is more reliant on grants than inconsistent P2P volunteer fundraising, it can consider allowing volunteers to fund for the establishments where they work, or share a part of their fundraising to support the partner establishments. This would facilitate measuring the impact VE volunteer fundraisers have on directly supporting the children, and be more adequate for the needs identified in the establishments. Antiguo (past volunteers/ interns) funding was brought up as a possibility multiple times in early 2018 Development and Communications meetings, but considering the volunteers are more invested in their respective establishments and the
children than VE Global (the help going to the establishments is less transparent and less direct through VE fundraising), antiguos would be more likely to fundraise on behalf of the establishments. To make sure volunteers feel like they are fundraising for a tangible change, VE Global should work on specifically outlining how the funds from volunteer fundraisers are used, and specifically, how the funds are directly helping the establishments the volunteers are dedicated to.

Finally, VE must train its volunteers on reporting and/or relaying reports of abuse in the protection homes. It must also provide its volunteers with information on possible steps the volunteers could take (that doesn’t interfere with the function or rule of the protection home) in addressing such concerns with a child, and the proper ways of speech concerning gender, sexuality, psychological disorders, medication, etc. to ensure volunteers are able to identify when inappropriate verbal or psychological abuse is taking place. It must also work on communicating the follow-up steps with the volunteer and be transparent about VE’s position and actions.

VE does not require any background in psychology or social work for its volunteers, and thus, many are not trained for the type of situations and expectations they might encounter in the protection homes. Based off of the Student Outreach and Evaluation report, it can be seen that approximately half of all volunteers were students either in their post-high school gap year or in university. Gap year students make up nearly 30% of VE’s entire volunteer demographic (VE DevComms, 2018). It is safe to assume nearly 50% of VE’s volunteers do not have professional or in-field experience related to social work or psychology, and of the non-student volunteers, not required as well. Therefore, all the above mentioned recommendations are to be taken into consideration when recruiting volunteers, and in planning necessary and appropriate training for the volunteers during orientation and throughout their service.

(b)Core Programs

In addition, to their daily work at the partner establishments, VE volunteers help implement and improve VE’s four educational programs: ¡Vamos a Leer!, Festival de Arte, Liga de Deportes and English in Motion. These four programs focus on developing mature reading skills and enjoyment for reading, providing an opportunity to express oneself through art, encouraging healthy lifestyles, and learning English outside the classroom.

VE’s core programs generally meet the needs identified in the literature review and evaluations above. For specific recommendations and changes, however, each program
should be researched thoroughly to compare with other similar programs, evaluate their efficiency, and target better data collection in terms of feedback and impacts.

Few recommendation for all four programs would be to find ways in which children from different establishments and backgrounds can get to know and interact with each other, and to pay attention to age differences. Festival 2017 for example was great in that many of the children had time to get to know each other talking about their artwork, sitting in groups freely chatting, etc. Adding events that provide such opportunities could help children feel more comfortable interacting with one another and realize they aren’t alone and isolated within their protection homes.

VE should also consider how children come to participate in VE’s activities; generally, children sign up based on their availability and interest, but in the case of Nuestra Senora de la Paz, the technical team and caretakers also took part in selecting the children that get to participate in VE’s programs. Children were often threatened to not be allowed to participate at our events, and such actions were taken as a form of punishment on numerous occasions. While this is more a concern of punishment and discipline within the protection homes, VE could possibly look into ensuring its events are all-inclusive and not to be used as a leverage of abuse or punishment.

Conclusion

The alternative care system in Chile supports 19,000 children throughout Chile, to protect children from further/repeated violations of their Rights of a Child. However, as examined, there are many flaws within the system that have led to the deaths of 1313 children in the past decade, and more than half the children who report to have been experienced some form of abuse in their alternative homes. Due to poor training of the caretakers, many children are at risk of poor and abusive treatment within the protection homes. They also lack access to positive development and recovery programs that are pillars of the alternative care system.

VE Global, as an NGO that trains and empowers volunteers from around the world to enter different establishments has been working to provide programs to enrich the children and provide them with positive role models. It has been working to meet the needs of children at various social risks in Santiago on a day to day basis. Now in face of multiple changes and difficulties within the organization itself and the alternative childcare system as a whole, VE Global must reform its programs to meet the specific and crucial needs of its target communities. With the abovementioned recommendations and further research into each of the specific four core programs, VE Global can better serve its communities and better track their impacts in the community and long term, in the system. Furthermore, by strengthening its training program and focusing on the outcomes rather than the outputs, VE Global will be able to meet all parts of its mission to foster the development of children at social risk in Chile by training and empowering volunteers to serve as positive role models, educators and advocates of social justice.


http://ciperchile.cl/2016/08/30/tribunales-de-familia-las-graves-deficiencias-del-sistema-de-peritos/


