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Keeping Families Together: A problem-structuring approach to policy and programming to prevent family separation and orphanage placement in Cambodia.

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Keeping Families Together

A problem-structuring approach to policy and programming to prevent family separation and orphanage placement in Cambodia.

James Farley

PhD

This dissertation is submitted for the degree of Doctor of Philosophy,
Department of Sociology, Durham University.

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Abstract

The United Nations Convention on the Rights of the Child (1989) and Guidelines for the Alternative Care of Children (2010) establish a child's right to remain with their parents and ratifying governments' duty to support families at risk of separation. Despite these standards, global child care policy and programming primarily address children already separated from their families, and the United Nations has observed that many countries lack sufficient preventive family support services. In Cambodia, high rates of family separation and a perceived over-reliance on residential children's institutions are significant issues, prompting attention to child care reform and deinstitutionalisation.

This study, informed by Hoppe's (2010) problem-structuring and Bacchi's (2009) '*What's the problem represented to be?*' approaches, analyses Cambodian child care reform policies and programmes, as well as accounts from twenty-three Cambodian social workers, twenty NGO managers and twelve family caregivers with lived experience of family separation and the placement of children in residential care. By comparing and contrasting these perspectives, the study builds a contextualised descriptive map of the drivers of family separation in Cambodia, allowing for an informed structuring of the problem.

Social workers and caregivers who participated in this study highlighted ongoing challenges in keeping children living at home, primarily due to livelihood and poverty-related issues, as well as other socioeconomic factors such as migration, over-indebtedness, substance misuse, and ethnic discrimination. Conversely, analysis of child care policy and programming documents revealed an emphasis on globalised policy models influenced by neoliberal values and the child care deinstitutionalisation framework, focusing on the closure of children's residential care centres and behaviour change approaches targeted at parents and caregivers to reduce violence against children, improve parenting capacity, and counter perceived positive community attitudes towards children's residential care. These policies pay less attention to household economic strengthening measures to improve family income and mitigate the impacts of structural socioeconomic factors on families.

The findings suggest a disconnect between families' on-the-ground challenges and the current policy and programming focus. The study concludes by discussing the implications of the findings for policy, programming, and practice and proposing the problem-structuring framework as a participatory, reflective, and pragmatic approach for analysing and designing policy and programming to help keep families together.

Keywords: Cambodia; child care, deinstitutionalisation, family support, orphanage, social work.

Dedication and Acknowledgements

This dissertation is dedicated to:

Nupur Kumar Farley,

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Acronyms

3PC - Partnership Programme for the Protection of Children
BEIP - Bucharest Early Intervention Project
CCP - Chinese Communist Party
CDHS - Cambodian Demographic Health Survey
CPP - Cambodian People's Party
DI - Deinstitutionalisation
DoSVY - District Office of Social Affairs, Veterans and Youth Rehabilitation
EU - European Union
FCF - Family Care First
HDI - Human Development Index
INGO - International Non-Governmental Organisation
LMIC - Low and middle-income country
MFI - Micro-finance institution
MoEYS - Ministry of Education and Youth Services
MoSVY - Ministry of Social Affairs, Veterans and Youth Rehabilitation
MoWA - Ministry of Women's Affairs
MPI - Multi-Dimensional Poverty Index
NISA - National Institute of Social Affairs
NGO - Non-Governmental Organisation
RCI - Residential Children's Institution
RGC - Royal Government of Cambodia
SDGs - Sustainable Development Goals
ToC - Theory of Change
UN - United Nations
UNCRC - United Nations Convention on the Rights of the Child
UNDP - United Nations Development Programme
UNGAC - United Nations' Guidelines for Alternative Care
UNICEF - United Nations International Children's Emergency Fund
USAID - United States Agency for International Development
VAC - Violence Against Children
WCCC - Women and Children's Commune Council

Chapter 1. Setting the scene

'It is better to keep [my children] in the orphanage. Because they get an education there.

It's not that I don't want to take care of them [myself]. But, it is better for them there.

I want them to have a better future.

I do not care about myself.

As long as I have enough to eat, it is enough.'

Cambodian mother¹

1.1. Introduction

Every day, families around the world are disrupted, and children are separated from their parents and caregivers due to poverty, migration, conflict and natural hazards such as floods and earthquakes. Add abuse, neglect, difficulties in accessing education and parental death or incapacity due to health conditions or substance misuse, and the result is between 5 million and 6 million children estimated to live in residential children's institutions and many millions more at risk of being separated from their families globally (Desmond et al., 2020). Most of these children are from low-income families in the global south, where limited social welfare systems are in place to ensure safe and appropriate care for children separated from their families or to support their families in caring for them at home.

A child's right not to be separated from their parents unless it is in their best interest is set out in Articles 7 and 9 of the *United Nations Convention on the Rights of the Child* (UNCRC, 1989). Ratifying governments' duties to prevent the need for residential or alternative care placement by providing family support services are further underscored in Article 18 of the convention (UNCRC, 1989) and Section IV of the *UN Guidelines for the Alternative Care of Children* (UNGAC, 2010).

Alternative care and child care deinstitutionalisation (DI) are prioritised components of a global child care reform policy model, and the last decade has seen national and international institutions and non-governmental organisations (NGOs) pay increased attention to children's care in the global south (Goldman et al., 2020). These efforts have focused on reducing the number of children living in orphanages and transitioning the

¹ Caregiver 4.

provision of out-of-family care from residential children's institutions (RCIs) to community and family-based alternatives such as kinship care, foster care and adoption.

The selection of Cambodia as a case study for this research reflects its position as a high-profile site of global child care deinstitutionalisation policy and programming, as well as my connections and experiences as a social work consultant in Cambodia and other Southeast Asian countries since 2009.² In response to international pressure over increasing numbers of children out-of-family care and living in residential children's institutions, the Royal Government of Cambodia (RGC) and its development partners initiated a national child care reform and deinstitutionalisation programme in 2017 (MoSVY, 2016). To date, Cambodian policy and programming in this area have prioritised regulatory and post-family separation measures such as closing residential children's institutions, strengthening family-based alternative care options and reintegrating children living in residential centres back into their birth families. In contrast to this reactive, post-family separation emphasis, this study explores family support policy and programming seeking to prevent family separation and the placement of children in residential care. This focus is not to undermine the importance of realising children's rights across the entire ambit of child care reform,³ but to highlight findings from this research that identify preventative family support elements as underdeveloped in Cambodian policy and programming.

Given the scale of the issue, child care reform and deinstitutionalisation continue to receive insufficient attention or resources (Goldman et al., 2020; Shawar & Schiffman, 2020). This low global profile can be attributed to several factors. First, the diverse and multi-sectoral nature of the economic and social drivers contributing to family separation and residential placement makes it complex to address. Second, competition for policy and programming attention with other social welfare issues exists. Third, the primarily low-income families affected have limited power to secure policy attention. Additionally, deinstitutionalisation (DI) proponents have encountered challenges in reaching a consensus on and clearly defining the issues that should be addressed, further contributing to child care's de-prioritising, restricted funding, and piecemeal implementation (Davidson et al., 2017). Put simply, governments and international donors are more likely to attend to and act on an

² See Section 1.3.

³ For example, regulatory strengthening, developing foster care and adoption services.

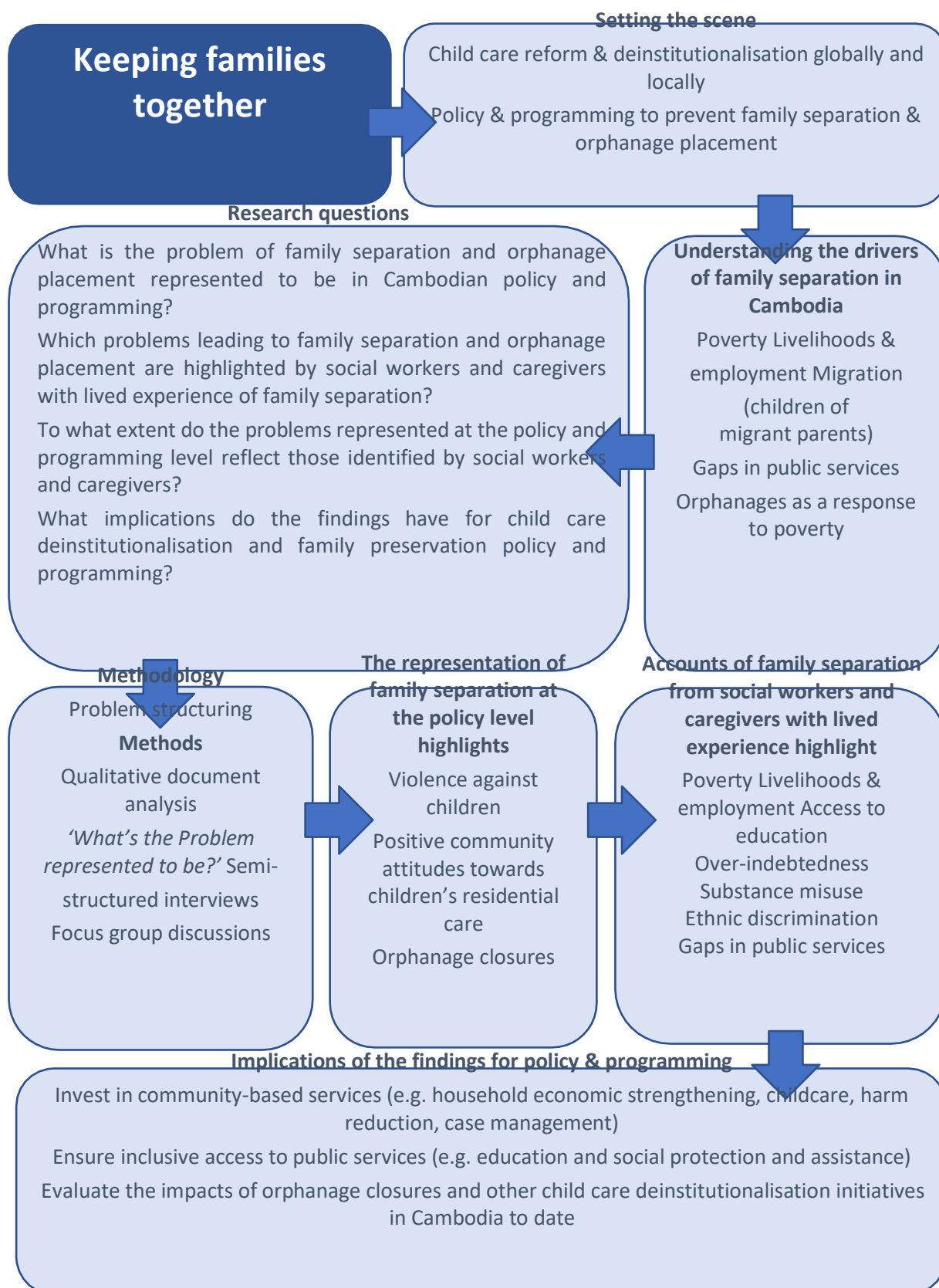
issue when those advocating for action can present a clear and mutually agreed definition of the problem, why it is important and how it should be addressed.

This dissertation is entitled *'Keeping Families Together: A Problem-structuring Approach to Policy and Programming to Prevent Family Separation and Orphanage Placement in Cambodia'*. The problem-structuring approach to policy analysis and design (Hoppe, 2010) argues for time and effort to be invested in gathering and reflecting on information drawn from different levels of a policy network in order to take account of different stakeholders' alternate and multiple perspectives on the 'problem' that the policy seeks to 'solve'. In this way, a problem-structuring approach seeks to pragmatically balance high-level political agendas and aspirations with the street-level perspectives and needs identified by policy implementers and the policy target group.⁴ In the context of this study, identifying and designing effective programming to keep families together requires balancing the goals of international and national agendas, priorities, and policy frameworks with the perspectives of social workers and family caregivers who have experienced family separation and orphanage placement. This approach aims to contribute to developing and implementing policy and programming that addresses real needs and enjoys support across the policy network.

Figure 1 below provides an overview of the key areas addressed in the dissertation.

⁴ Children with experience of family separation and residential care placement were not included in the sample for this study. This rationale behind decision is discussed in Section 3. 4.1.

Figure 1. Keeping families together



1.2. Background and context

The following section first provides a historical and socioeconomic overview of Cambodia to set the context for this study. It then details the development of child care deinstitutionalisation internationally and in Cambodia. Finally, I briefly introduce the problem-structuring approach chosen to guide this study's analysis of family separation and its associated policies and programs.

1.2.1. Cambodia: An overview

Cambodia is a Southeast Asian country located between Vietnam, Laos and Thailand, with a population of just over 17 million (EU, 2024). Following its independence from France in 1953, the country's political, economic and social journey has been tumultuous. In the 1970s, civil war and the period of the Maoist Khmer Rouge regime led to social and economic collapse and the starvation, murder and premature deaths of over two million Cambodians. The fall of the Khmer Rouge occurred after Cambodia was invaded and occupied by neighbouring Vietnam in 1979. Following Vietnam's withdrawal in 1989, intense intervention by international institutions and Western NGOs ensued (Travoullion & Bernath, 2021). Between 1992 and 1993, Cambodia was administered directly by the United Nations.⁵ Increasing political stability from the late 1990s fostered economic and social development, and the past two decades have seen rapid economic growth linked to China's rise as a regional and global power. Cambodia attained lower-middle-income status in 2015, and poverty rates almost halved between 2009 and 2019.⁶ With almost two million Cambodians escaping poverty (World Bank, 2022), Cambodia has achieved improved living standards and progress in some areas. For example, between 2009 and 2020, access to electricity trebled from 26% to 86% of households (CSES, 2020 in World Bank, 2022), and maternal and child mortality and health improved substantially (CDHS, 2022).

However, multidimensional poverty has declined less quickly than the headline economic statistics might suggest, and developmental progress has been uneven. Many households remain economically vulnerable, with persistently high poverty levels, precarious livelihoods, few social safety nets, and limited access to essential services such as health

⁵ The United Nations Transitional Authority in Cambodia (UNTAC) is one of only two instances of the UN directly administering a country. The other being East Timor 1999-2002 (Patrick, 2001).

⁶ 17.8% of the population lived below the national poverty line of 10.951 Riels per day (approx. \$2.50 USD) in

2019 (ADB, 2023).

and education (World Bank, 2022). For example, while 98% of Cambodian children now enrol in primary education, less than half maintain attendance long enough to reach secondary school. In addition to this high attrition rate, accessing a reasonable quality of education in state schools remains a challenge, with fewer than 10% and 8% of children, respectively, reaching minimum levels of proficiency in literacy and maths by age 15 (MoEYS, 2018:8). Nearly half of children remain multidimensionally poor, and 4.5 million Cambodians are classified as 'near poor' (UNDP, 2022), meaning they are vulnerable to falling back into poverty if exposed to natural or socio-economic shocks such as flooding, health problems, or unemployment (UNICEF, 2019).

To cope with shocks, many families borrow money, and Cambodia has seen a rapid expansion of the microfinance sector (Green & Bylander, 2021). Whilst these microfinance institutions (MFIs) have played a role in providing financial services to people previously excluded from the banking system, concerns have been raised about inadequate regulation of the sector, predatory lending, and high interest rates leading to a rise in household indebtedness and the grabbing of land as collateral (Bylander, 2015; Green, 2019).

Turning to livelihoods, while the government and international agencies report unemployment as remarkably low in Cambodia,⁷ official figures fail to convey the real-world challenges the Cambodian workforce faces, such as the high prevalence of informal employment and the implications of weak or unenforced labour regulations. Non-formal employment is the norm in Cambodia, with 88.3% of adults working in the informal sector (UNDP, 2023), where they may face vulnerabilities, including long working hours, low pay, job insecurity, exploitation and labour migration. Cambodia is currently on the move. Internal and cross-border labour migration is prevalent, with an estimated 4.2 million migrants,⁸ most of whom are internal (UNICEF, 2019a). This migration is primarily driven by livelihood and economic factors, with many people from rural areas moving to urban centres, particularly the capital, Phnom Penh, in search of employment.⁹ This rapid urbanisation, coupled with limited infrastructure development, creates large informal urban settlements and increased vulnerability to poor living conditions characterised by

⁷ According to the International Labor Organization (ILO), the modelled estimate for 2022 indicates an unemployment rate of 0.4% (The World Bank, 2022).

⁸ Out of a total population of around 17 million people (EU, 2024).

⁹ In twelve years, Phnom Penh transformed in scale, growing from four urban districts with 1.3 million inhabitants in 2008 to 14 districts with over 2.1 million people, according to the latest census (RGC, 2019).

high levels of violence, inadequate infrastructure, limited access to services and substance misuse. A growing concern in rural provinces is the number of children left behind by migrating parents in the care of grandparents, who may be unable to care for them adequately (Marchetta & Sim, 2021).

Ensuring social stability and the well-being of millions of low-income families is acknowledged as a policy priority by the Royal Government of Cambodia (RGC) and its development partners, and social protection and assistance systems are now being developed. The COVID-19 pandemic saw the successful scaling of nascent cash transfer programs, signalling a heightened focus on targeted poverty-reduction interventions by directly providing cash to families in need. However, implementation of these programs faces challenges, including limited state financing and inefficiencies in targeting mechanisms. For example, a lack of transparency in the identification of cash transfer recipients by local authorities has raised concerns about the role ethnic discrimination and patronage networks play in the disbursement of funds.

Thirty years after Cambodia's experiment with democracy began, the Kingdom's political establishment and ruling elite have hardly changed. Political opposition is effectively outlawed, and power remains in the hands of a small number of families and the ruling Cambodian People's Party (CPP). The country's patrimonial political system and social dynamics remain driven by hierarchical relationships based on wealth, status, power inequalities, and personalised forms of official interaction that do not align with the meritocratic and democratic governance rhetoric advanced by the country's multilateral aid donors (Biddulph, 2017). Patron-client relationships pervade almost every aspect of Cambodian life, with a system of patronage well entrenched in society (Brinkley, 2009). In this social and political context, petty and grand forms of corruption are widespread, ranging from systematic non-transparency in public finances to the routine payment of unofficial extra fees to school teachers (Dawson, 2009).

In summary, while recent economic growth has led to developmental and poverty reduction gains, the speed and scale of change in Cambodia have also incurred social costs, particularly for the country's poorest. Millions of low-income families still face difficulties in meeting basic needs, precarious and exploitative employment conditions, over- indebtedness and

barriers to accessing quality education. The rapid pace of economic and social change has resulted in significant social dislocation. This is reflected in the decline of

the traditional rural economy and way of life, increased over-indebtedness, substance misuse, mass migration, and growing pressures on family life. These factors contribute to high levels of family separation and the placement of children in residential care institutions.

1.2.2. Child care reform and deinstitutionalisation

In light of findings of the physical, psychological and social harms of child care institutionalisation (Berens & Nelson, 2015) and the UN-recognised right of children to be raised in a family environment (UNCRC, 1989), child care reform refers to the process of shifting from large-scale residential children's institutions to family- and community-based care for children who are out-of-family care. This approach aims to reduce the number of children living in residential centres, prevent unnecessary family separation, enhance the quality of care within families and communities, and provide family-based care alternatives for children, such as foster care, when living with the birth family is not possible or appropriate. Deinstitutionalisation (DI) forms part of this overarching policy model for reforming the existing child care system and has become a high-profile component of the global children's care agenda. Proponents of deinstitutionalisation, including the United Nations, advocate for eliminating all residential care for children (Goldman et al., 2020), arguing that deinstitutionalisation promotes children's rights and improves their outcomes across various measures.

Historically, the deinstitutionalisation of children's alternative care occurred in the US between the end of the Second World War and the 1990s (Jones, 1993) and followed a similar trajectory in the UK. The fall of the Soviet Union and subsequent media exposure of the physical and emotional neglect of children living in large, state-run and chronically under-funded Romanian orphanages in the 1990s brought the issue of orphanage care and child institutionalisation to global attention. In response, the early 2000s saw several agenda-setting events and publications highlighting the need for systematic and global child care reform and deinstitutionalisation, such as the UN General Assembly Special Session on Children in 2002, *'Children on the Brink'* (UNAIDS, 2002) and the Stockholm Conference on Children and Residential Care in 2003. This political and media attention initiated a 'deinstitutionalisation turn' in the children's rights agenda (Iusmen, 2015; Stalford, 2012)

and helped mobilise international resources to child care issues. New transnational NGOs focused on deinstitutionalisation were founded during this period,

including Hope and Homes for Children in 1994, the Better Care Network¹⁰ in 2003, and LUMOS¹¹ in 2005. Each of these organisations began their work in Central and Eastern Europe. In 2009, the European Union prioritised child care deinstitutionalisation among all its member states, partly due to advocacy by LUMOS and other DI-focused NGOs. Moreover, the European Commission and other significant donors changed their funding regulations to promote child care deinstitutionalisation and divert overseas aid flows away from children's residential institutions and towards family-based care (Lumos, 2018). Over the last ten years, national and international institutions and NGOs have increased efforts to address child care and deinstitutionalisation in low and middle-income countries (LMICs), including Ghana (Frimpong-Manso, 2014), Nepal (Gale & Katiwasar, 2016) and Cambodia. This extension into the child care contexts of the global south has identified and incorporated additional areas for intervention into the DI paradigm, including child trafficking, modern slavery (Van Doore, 2016) and voluntourism (McGehee, 2014).

In 2016, child care reform and deinstitutionalisation were not explicitly prioritised as specific targets of the Sustainable Development Goals (SDGs), unlike issues such as access to education and violence against children (VAC). However, significant progress was made in 2019 when 265 organisations endorsed recommendations to implement the latest UN Resolution on the Rights of the Child (UNGA, 2019). The resolution includes measures to support families at risk of separation and progressively replace residential children's institutions with family-based care. This endorsement brought global-level policy recognition and momentum to these issues.

However, despite the increasing global adoption of the deinstitutionalisation policy model, the details of a global child care policy framework are not as clear-cut or universally agreed upon as some literature and advocacy communications might suggest. The role of residential care for children out-of-family care remains a contested issue (Harlow, 2022), with international differences remaining. For example, English-speaking countries tend to place only a small proportion of their out-of-family children in residential care compared with mainland Europe (6% in Australia v. 54% in Germany) and East Asia (14% in England v. 92% in Japan) (Ainsworth & Thoburn, 2014:18). This variation indicates significant differences in attitudes towards children's residential care between high-income countries,

¹⁰ An international advocacy and knowledge-sharing coalition founded by USAID, UNICEF and Save the Children.

¹¹ Founded by J K Rowling, author of the Harry Potter book series.

challenging the misconception that the use of residential care is primarily a 'problem' to be 'solved' in low- and middle-income countries.

There is a spectrum of perspectives within the child care policy and practice community about the best approach to child care reform, with defining an 'institution', elaborating what 'child care reform' encompasses and agreeing on whether deinstitutionalisation is the best entry point for care reforms all remaining divisive and contentious issues (Shawar & Schiffman, 2020). While some DI advocates call for the closure of almost all residential facilities, others argue for a progressive approach and see the need for a plurality of ongoing care arrangements. These tensions are reflected within the global children's care policy and practice community, where disagreements over identifying and defining the problems to be addressed hamper its ability to present and promote a unified and clear policy and programming vision at the international level.

1.2.3. Child care reform and deinstitutionalisation in Cambodia

The position and role of orphanages in contemporary Cambodia can be traced to the Khmer Rouge genocide of the 1970s and subsequent civil war, which lasted into the 1990s. This thirty-year-long period of conflict disrupted society and families, left many children without parents or caregivers and frustrated Cambodia's social, political and economic development. In the context of a failed state, private orphanages emerged as a way to provide shelter, care and education to vulnerable children in the absence of familial capacity, functioning state structures or public services (Carpenter, 2021). Cambodia's position as a geopolitically strategic post-conflict country brought unprecedented levels of international intervention, aid and external humanitarian and development activity from 1991 onwards. Operating in an environment of weak regulation and minimal state oversight, thousands of international and local non-governmental organisations (INGOs and NGOs), faith-based organisations, and foreign donors of diverse types contributed to establishing, embedding and expanding Cambodia's children's residential care and NGO sector.

In 2017, Cambodia's Ministry of Social Affairs, Veterans and Youth Rehabilitation (MoSVY) conducted a mapping exercise to address a lack of information on the number of residential facilities providing care for children (MoSVY, 2017). The mapping found that 11,788 children were living in 267 residential care institutions in five key provinces, known to be

the locations with the highest density of children's residential institutions.¹² This proliferation of residential children's institutions in Cambodia may reflect the lack of alternative sources of support for families who struggle to provide for their children. It can also be the most accessible support option for communities near a residential children's institution.

The mapping was limited to those residential care institutions that were officially known to or had a Memorandum of Understanding with the Ministry of Social Affairs. In the context of weak government regulation and oversight of the sector, the assumption was that Cambodia had many more residential care institutions than were identified in the mapping exercise. According to a government-commissioned study on community attitudes towards children's residential care, orphanages in Cambodia were *"described by families, staff and local government members as playing a role akin to that of a social services network"* (MoSVY, 2011:13). Some people have even gone so far as to describe children's residential care in Cambodia as a de facto social welfare system (Stark, 2017).

International deinstitutionalisation efforts in the 1990s and 2000s focused on addressing the child care situation in the large state-run orphanages of Romania, Bulgaria and other post-soviet countries, and there was no significant international pressure on Cambodia to reform in the early stages of the global DI movement. During this period, the number of orphanages in Cambodia continued to increase due to persistent socio-economic challenges, including poverty, limited access to education and a lack of capacity and coordination in the child protection sector (which remained dominated by foreign-funded NGOs). The continuing increase in the number of orphanages (despite a decline in the number of orphans) was further propelled by Cambodia's growing popularity as an international tourist destination and the opportunity orphanages provided for financial profit generated from tourists, paying volunteers and child sponsors from high-income countries (Miller, 2022).

However, growing global awareness of the negative consequences of an over-reliance on residential care for children led to increased pressure from multilateral institutions for child care reform and deinstitutionalisation in several low- and middle-income countries,

¹² Cambodia is divided into 25 provinces. The five key provinces identified were Phnom Penh, Battambang, Siem Reap, Kandal and Preah Sihanouk, locations which MoSVY classified as priority provinces for the reintegration of children to their families and communities.

including Cambodia. Under the *UN Convention on the Rights of the Child* (UNCRC, 1989), a UN committee monitors the progress made by states in meeting their commitments to children's rights, with all signatory states periodically reporting on the steps they have taken to implement the convention. The UNCRC committee's *Concluding Observations* reports repeatedly requested countries to adopt child care deinstitutionalisation policies (Ulybina, 2023), and in 2009, began to specifically highlight the need for the Cambodian government to evidence some progress in child care reform and deinstitutionalisation. In its *Concluding Observations* to Cambodia's 2009 progress report, the committee noted with concern that:

'There has been a 65 per cent increase in the number of children in orphanages [in Cambodia] between 2005 and 2008, and residential care continues to be considered the best option. The Committee is also concerned that:

(a) One-third of institutionalised children still have one of their parents;¹³

(b) Residential care facilities remain inappropriately registered and monitored;

(c) Insufficient budgetary allocations and the lack of well-trained child-care workers hinder the implementation of the State party's policies and guidelines effectively. (UNCRC, 2011:10)

In response, the Cambodian government and its child welfare development partners published Sub-Decree No. 119 on *The Management of Residential Care Centres* in 2015 (MoSVY, 2015), which set out minimum standards and monitoring mechanisms for the children's residential care sector. In-country research also revealed that the majority of children living in Cambodian residential care were not orphans (MoSVY, 2011) but were from vulnerable, low-income households. In common with other low and middle-income countries, these children were often placed in residential care by their parents or extended family to secure their basic needs or because their caregivers believed they would receive better care, education and opportunities in residential care than they would at home (MoSVY, 2011). This research and policy attention culminated in the publication of the *National Action Plan for Improving Child Care 2016 – 2018* (MoSVY, 2016),¹⁴ in which the Royal Government of Cambodia (RGC) committed to safely reducing the number of children

¹³ This is considered a significant under-estimate in the Cambodian context (MoSVY, 2016).

¹⁴ Hereafter referred to as the *Action Plan* (MoSVY, 2016).

living in residential children's institutions (RCIs) by 30%, primarily through their supported and managed reintegration to their birth families.

The results of this high-profile and coordinated government and civil society campaign for orphanage reduction and family reintegration were published in 2020 (MoSVY, 2020). At first glance, they suggest that the *Action Plan* (MoSVY, 2016) successfully met its ambitious targets. The headline results show a reduction in the number of RCIs across the country from 432 to 232, which by 2019 were accommodating 6,778 children (3,313 girls). In other words, between 2016 and 2019, the number of orphanages across the country decreased by 174 (43 per cent), and the number of children living in them decreased by 9,801 (59 per cent).

However, a closer reading of the report reveals that of the 9,801 children who left residential care between 2016 and 2019, only 1,419 children¹⁵ were formally supported to return home by either government or NGO social workers. This suggests that the government's target of 'safely' reintegrating 30% of children living in RCIs was not met. Additional questions raised include why the number of residential centres and children living in them declined so precipitously during this period, as well as questions over the safety and wellbeing of the 8,382 children that returned home without the support or oversight of any child welfare agencies. Of the 174 RCIs that closed during this period, only two were closed by the government because they failed to meet minimum standards. Of the others, 95 were reclassified as community-based care or transitioned to providing non-residential services, and 77 closed due to lack of donor funding or other unspecified reasons. These figures suggest that most of the reduction in Cambodia's children's residential care sector from 2016 to date is due to factors outside of formal policy and programming efforts. Possible drivers include the impact of international campaigns and media attention on the adverse effects of residential care and orphanage volunteering. These advocacy and communication campaigns may have influenced international donors to reduce or stop funding orphanages and discouraged visitors to Cambodia from paying to volunteer with children in residential care. Below is an example of deinstitutionalisation media campaign material targeting international volunteers and tourists produced by

¹⁵ (12% of the 11,788 children living in RCIs in the five target provinces at the beginning of Cambodia's child

care deinstitutionalisation campaign in 2016.

MoSVY, UNICEF Cambodia and the Partnership Programme for the Protection of Children (3PC) network of local NGOs.

Figure 2. Children are not tourist attractions (Friends-International, 2015)



In summary, high levels of family separation and an over-reliance on children’s residential care are now recognised as a problem requiring policy and programming attention in Cambodia (MoSVY, 2017), and the country currently has multiple actors in government and civil society, internally and externally, aligned in their willingness to progress child care reform. As the lead ministry for child welfare, the Ministry of Social Affairs, Veterans and Youth Rehabilitation (MoSVY) works in partnership with the Ministry of Women’s Affairs (MoWA), UNICEF, USAID, and other development partners and NGO networks such as Family Care First (FCF) and the Partnership Programme for the Protection of Children (3PC) in the implementation of its child care deinstitutionalisation agenda. Government figures indicate that a significant number of residential centres have closed, and children returned to live with their birth families since 2016. However, an analysis of this initiative's results highlights risks in its implementation.

Despite routine calls for enhanced and targeted family support services to prevent family separation featuring prominently in the child care reform policy documents, advocacy and literature, findings presented in this study suggest that the focus of DI policy and

programming in Cambodia to date has been on responses and solutions for children already out-of-family-care, with a relative dearth of research, policy, proposals or programming to prevent family separation in the first place.

1.2.4. Problem-structuring and the prevention of family separation and orphanage placement

To achieve this study's aim of generating new insights into mechanisms of family separation in Cambodia that can help inform preventative policy and programming, a problem-structuring theoretical framework was adopted. This approach to policy analysis and design (Hoppe, 2010; Hoppe, 2017; Grin and Van de Graaf, 1996) argues that prematurely seeking solutions to problems at the expense of conducting a thorough examination of problem settings from the perspectives of different actors often makes assumptions that do not correspond to the context-specific and contingent realities of policymaking and implementation and risks misdiagnosing the real problem(s).

Traditional solution-focused approaches often assume policy problems have an unambiguous and agreed-upon meaning, and therefore, policy designers need only inquire into the best solution. In practice, different people often hold different understandings and interpretations of the same issue. That is to say, 'problems' in the context of public policy are not objective properties of situations. Rather, they are actively constructed definitions of reality, often put forward by opinionated and invested stakeholders to be used in claims-making and bargaining to get others to accept them. While politicians, civil servants and policy professionals are inclined to logically but over-optimistically argue from available administrative agencies, policies, and strategic plans to desired outcomes (forward mapping), designing and implementing well-targeted and robust programs requires that such top-down command-and-control lines of thinking are exposed to sobering bottom-up stories about the real-life experiences of those citizens and street-level bureaucrats directly affected by planned policy changes (backward mapping).

Only after circling around an issue from several perspectives does one get a better feel for the possibilities and objections around framing a problem in a particular way. Therefore, a problem-structuring approach to analysing and developing policy seeks to construct a comprehensive descriptive map of the problematic situation by incorporating knowledge about street-level perspectives and the interpretative frames of the various problem

owners 'out there'. This knowledge can, in part, be obtained via statistics and quantitative data, but proactively *'listening to and registering the narratives of stakeholders about their problem perceptions and experiences is the only feasible way to get a [real] feel for the problem.'* (Hoppe, 2017:13)

In the context of preventive family support interventions being under-considered at the policy and programming levels, this research uses qualitative methods aligned with the problem-structuring model (Hoppe, 2010; 2017). The aim is to generate knowledge about the drivers of family separation from across the policy network. The methods employed, such as document analysis, semi-structured interviews and focus group discussions, are used to develop a richer understanding of the problem of family separation and the placement of children in residential care in Cambodia. This extended understanding, in turn, informs the development of recommendations that aim to balance high-level policy priorities and frameworks with the expressed wishes and needs of those who have experienced family separation (i.e. balancing forward and backward mapping).

My personal history and background are integral to the research process, influencing my selection of the topic, formulation of the research questions, and engagement with the research participants. In the following section, I provide a positionality statement that outlines some aspects of my background and perspectives that may have influenced the research process, design, and data interpretation.

1.3. My position and interest in child care reform

I am a middle-aged white British man registered as a UK social worker. My interest in child care reform and deinstitutionalisation stems from my experience as a social worker in the UK and internationally. I have worked in children's residential care settings in the UK, Southeast Asia, and North Africa. In these roles, I have observed the harms associated with residential care, such as difficulties in maintaining relationships with birth families and the lack of support for young people ageing out of the care system. However, I have also noted that a significant number of children and young people express a preference for living in residential care and group homes rather than with their birth families or in foster care due to various individual circumstances.

My direct work in children's residential care primarily focused on teenagers in the 1990s, and I found the environment lively and engaging. However, I am mindful that my positive

experiences as a young, enthusiastic residential social worker may have influenced my perspective on children's residential care. I know that my viewpoint is not the only valid one, and I am committed to challenging my views and learning from others. To inform and extend my understanding of the potential impacts of residential care, I have, over the years, supplemented my perspective with other views, particularly those of children, young people and families with lived experience of family separation and children's residential care.

Financial privilege has given me the opportunity and resources to conduct this research. The parents and caregivers who participated in this study were among the very poorest in Cambodia, and I have no first-hand experience of living in comparable circumstances. I am responsible for ensuring that this study's benefits extend beyond my academic and professional pursuits and contribute to developing impactful policy and programming for families at risk of separation.

As a social work advisor for the Southeast Asia-based NGO Friends-International since 2011, I have provided technical support to local social work staff working with marginalised children, youth and their families across various program areas. In addition to regularly accompanying local social workers on field visits, my work has involved assessing children's residential centres and training RCI management and staff seeking to transition to providing community services. The deinstitutionalisation (DI) policy model informed most of this work. Since 2014, I have regularly participated in the international deinstitutionalisation community of practice, advocating for the child care deinstitutionalisation paradigm through organising and delivering DI-orientated training and events. While I support reducing the number of children living in residential care, my experience with diverse residential care institutions worldwide has led me to adopt a nuanced and qualified stance towards the deinstitutionalisation policy model. This perspective has prompted me to question some elements of the approach in professional forums. Despite my professional involvement in DI activities in Cambodia and other countries, I am critical of approaches to deinstitutionalisation that are overly dogmatic. In particular, I question the generalisability of the evidence used to argue that all non-family-based forms of care are likely to have adverse effects on children, irrespective of individual circumstances. I also think the prevailing deinstitutionalisation discourse, which extends beyond targeting large-scale or

substandard facilities and orphanages to advance a critique of all residential care and the ultimate closure of all residential centres for children,

insufficiently considers local contexts and the individual circumstances, wishes, and feelings of children and their families.

I began my PhD journey in 2017 after securing funding from the UK's Economic and Social Research Council to conduct policy-related research on Islamic systems of child adoption in Egypt. I worked on that project until 2020 when political changes in the Egyptian Ministry of Social Security prevented me from obtaining permission to collect data in Egypt. Believing that the problem-structuring methods I had selected were transferable and could yield valuable findings in other contexts, I retained the same methods and research design to explore the prevention of family separation in Cambodia.

Despite my long-term residence in Cambodia, I was aware of my outsider status, power dynamics, and cultural and ethical considerations inherent in conducting this research. Throughout the research process, I adhered to ethical standards, including prioritising the well-being of participants, respecting cultural norms, collaborating with local partners, and ultimately aiming to provide tangible benefits from the research and its findings. These research ethics are detailed in Section 3.2.

Awareness of the potential for cultural misunderstandings and unequal power dynamics to influence the research reinforced my commitment to approaching the project as a collaborative endeavour. The research design prioritised the voices of social workers and caregivers, aiming to include their perspectives authentically. This approach sought to generate findings that could inform actionable recommendations based on the needs identified by the participants. My outsider status and association with international and local NGOs risked causing some participants to assume or hope I had access to resources I could share with their family, NGO, or local government office. To mitigate this, I provided all participants with clear research information in Khmer and arranged interviews through local social workers known to the participants.

My experience as a field social worker and in strategic, policy-level roles has led me to adopt what I consider a 'realistic' or pragmatic approach to advocating for changes in social policies. This gradualist and reformist stance is reflected in the selection of problem-structuring as the theoretical framework for this study. This approach aims to incorporate the views and address the needs of those most directly impacted by social policies while also aligning with the aims and objectives of the governments and international agencies

responsible for selecting policies and funding programs. I am uncomfortably aware that this depoliticised position risks taking systemic inequalities and governance-level assumptions for granted, potentially overlooking opportunities for transformative change. However, in my experience, this approach offers a politically palatable foundation for collecting and presenting comprehensive evidence that promotes the participation of policy target groups in the policymaking process and advances pragmatic yet meaningful improvements.

1.4. A note on terminology

This study seeks to generate new knowledge that can contribute to policy and programming to prevent the separation of children from their families in Cambodia. To ensure harmonisation with prevailing usage, the definitions are primarily derived from the Royal Government of Cambodia's *Policy on Alternative Care for Children* (MoSVY, 2006) and the *United Nations Guidelines for the Alternative Care of Children* (2010). By aligning with these documents, the study maintains a consistent use of terminology within child care reform policy, programming and discourse, fostering common understandings and enhancing the potential impact of the research and its recommendations.

Alternative care is defined in the RGC's *Alternative Care for Children* (2006) and the *UN Guidelines for Alternative Care* (2010) as various forms of living arrangements for children who are deprived of parental care or at risk of being so. These forms of care include foster care and the formal and informal placement of a child with other family members (kinship care). According to Article 9 of the *UN Convention on the Rights of the Child* (UNCRC, 1989), **family separation** refers to instances where children are separated from their birth parents or legal guardians due to various circumstances such as conflicts, natural disasters or other emergencies. Separation can also formally occur for protective reasons when it is in the best interests of the child, such as in cases of abuse or neglect. In the context of this study, it also includes separation due to parental migration and instances when children are placed in alternative care settings, such as foster care, kinship care, or residential care facilities, due to the inability of parents to care for them for financial, health or other reasons (UNGAC, 2010).

Although the majority of those with lived experience of family separation and the placement of children in residential care who participated in this research were biological

mothers, I have chosen to use the term '**family caregivers**' throughout the study. This term is more inclusive and recognises a broader range of individuals who may be responsible for a child's care, such as grandparents, older siblings, other relatives, and non-relative guardians.

This study uses UNICEF's definition of **residential children's institutions (RCIs)** as '*group living arrangements for children without primary caregivers or whose biological parents are unable to care for them. It is meant to provide 24-hour care by paid staff, meeting children's basic needs of shelter, food, clothing and education. These can be places of safety for emergency care, transit centres in emergencies, and all other short and long-term residential care facilities, including group homes. Other terms used for this form of care are **residential care** and **orphanages***' (MoSVY, 2011:11). In line with common usage in the literature and by participants in this study, I employ all three terms and the term **children's residential centres**.

Child care reform encompasses a range of policies and practices to enhance and adapt the systems and services that provide care for children. This includes legislative changes, new programming priorities, and child care and social service workforce development initiatives. A key aspect of child care reform is the shift from residential children's institutions (RCIs) to community and family-based care. This includes closing down residential children's institutions. In the context of child care deinstitutionalisation, UNICEF defines **family reintegration** as the process of returning a child from institutional care to their birth family or into alternative family-based care, such as extended family or foster care. This process should involve several steps to ensure the child's well-being and successful adjustment. These steps include assessment, reintegration and follow-up support (UNICEF Malawi, 2019).

Child care deinstitutionalisation (DI) refers explicitly to reducing reliance on institutional care for children by closing or repurposing existing residential children's institutions and transitioning to family-based or community-based alternatives. DI policy emphasises the importance of developing community-based services that support families in caring for their children within their own communities, thereby preventing the placement of children in residential care. If a return of a child to their birth family is not possible, **family-based alternative care** options aligned with DI principles include foster care, kinship care, and adoption.

This research focuses on policies and programs to prevent family separation and highlights services for families at risk of separation. In the context of this study, the term **‘family support’** encompasses a diversity of approaches tailored to individual circumstances, such as case management, social assistance cash transfers, vocational training, education support, household economic strengthening, employment support, and childcare services.¹⁶ These family support measures are critical in keeping families together and providing children with a safe and stable environment.

In the social work context, case management and individual care planning are closely related but distinct processes. **Case management** is a broad, comprehensive process that involves coordinating and providing services to meet clients' needs. It includes assessing the client's needs, planning and arranging services, monitoring the client's progress, and advocating for the client. **Individual care planning** is a specific component within the broader case management framework. A personalised plan is developed collaboratively by the social worker and the client to address the client's unique needs. The individual care plan outlines the specific goals for the client, the interventions that will be used to achieve these goals, and the roles of both the client and service providers in the process.

This study employs ‘poor’ and ‘low-income’ to describe economic deprivation. The term **‘poor’** evokes various socioeconomic issues, including low income, lack of access to essential services, social marginalisation, and inadequate living conditions. It aligns with broader poverty measures, such as the Multidimensional Poverty Index (MPI), which captures the diverse impacts of poverty. The term **‘low-income’** is also used in this research to highlight the necessity for targeted income-strengthening policies and programs designed to support economically disadvantaged families.

In this study, **‘global south’** broadly refers to previously colonised parts of the world generally characterised by lower economic and industrial development levels. The term often encompasses parts of Latin America, Africa, and Asia. The term is useful when discussing transnational policies such as child care deinstitutionalisation as it provides a historical, geographical and economic framing and can help analyse structural dynamics and maintain an awareness of the potential ongoing influence of colonial and post-colonial patterns and dynamics. In line with international development literature and Cambodia's

¹⁶ In the context of this study, 'childcare' (as opposed to 'child care') refers to services designed to provide temporary, short-term care and supervision to children, usually when their primary caregivers are at work.

state-level discourse, the term **low-and-middle-income country (LMIC)**, based on the World Bank income-per-capita Index (World Bank, 2022), is also used.

1.5. Focus and aims of the research

Approximately 5 million to 6 million children live in residential children's institutions globally, primarily in low-and middle-income countries (Goldman et al., 2020). The *United Nations Convention on the Rights of the Child* (UNCRC, 1989) and recent recommendations of the *UN General Assembly Resolution on the Rights of the Child* (UNGA, 2019) make clear that whenever possible, children should grow up in a family environment and priority should be given to supporting children's parents and extended family to prevent unnecessary separation. Despite this, over 80% of children living in orphanages have at least one living parent, with poverty, not orphanhood, being the most commonly cited reason children are placed in residential care (CRS, 2017; Williamson & Greenberg, 2010).

Child care deinstitutionalisation policy and literature commonly identify 'poverty' as the underlying driver of family separation and orphanage placement in Cambodia and other countries of the global south. However, from a policy and programming perspective, these poverty-related problems are insufficiently identified or structured. This study addresses this gap by generating data from selected policy and programming documents and interviews with stakeholders from across the Cambodian child welfare policy network. The findings of this study can inform policy and programming recommendations by surfacing multiple understandings of the proximal and structural factors driving family separation and orphanage placement in Cambodia and allowing for the comparison of different perspectives and priorities from different levels of the policy network.

Given the significant costs associated with deinstitutionalisation for children, families, and societies, along with the limitations of alternative strategies such as foster care, this research concentrates on two main areas. First, it aims to understand the mechanisms through which children become separated from their families and placed in residential care. Second, it seeks to build on those understandings to identify and recommend preventive approaches that address those mechanisms. The study's title, *'Keeping Families Together: A Problem-Structuring Approach to Preventing Family Separation and Orphanage Placement in Cambodia'*, reflects a problem-focused methodology. This approach aims to comprehensively describe the factors driving family separation, informed by a broader

spectrum of stakeholders than is typically consulted. The objective is to identify actions that can effectively reduce or prevent family separation and the subsequent placement of children in orphanages. This approach emphasises a holistic and inclusive examination of the policy problem to develop targeted and practical solutions.

This study aims to:

- Contribute to understanding the factors leading to family separation and the placement of children in orphanages in Cambodia.
- Highlight the experiences of social workers and family caregivers who have experienced family separation and the placement of children in orphanages.
- Create a comprehensive descriptive map of family separation and orphanage placement in Cambodia, integrating strategic and policy-level considerations with insights from social workers and caregivers.
- Based on the findings, recommendations will be made for future research, policy development, and program initiatives aimed at preventing family separation.

1.6. Structure of the dissertation

This chapter has provided background on the study's Cambodian context, introduced key trends in the global child care reform and deinstitutionalisation movement, and described how international actors are working to promote family-based care and eliminate residential children's institutions in Cambodia. It has concluded by defining some key terms and setting out the aims of this study.

In chapter two, the literature on child care deinstitutionalisation as a policy model, the drivers of family separation and various strategies to prevent family separation in Cambodia and elsewhere are reviewed. The chapter then sets out the research questions arising from identifying gaps in the literature. Chapter three describes the methodology and methods adopted for the research and considers the ethical aspects of the study. Chapter Four presents an analysis of Cambodian policy and programming documents, aiming to identify which commonly identified drivers of family separation have received the most attention. The chapter then interprets how the issue of family separation is represented within these policy documents. Chapters five and six present and discuss findings generated from focus

group discussions and semi-structured interviews with Cambodian social workers and caregivers with lived experience of placing children in

residential care. Finally, Chapter Seven summarises the key findings of the research, identifies the study's original contribution and examines the implications of the findings for child care reform in Cambodia. Policy and programming recommendations are provided based on these findings, as well as recommendations for further research. In conclusion, some personal reflections on the process of conducting the research and producing the dissertation are offered.

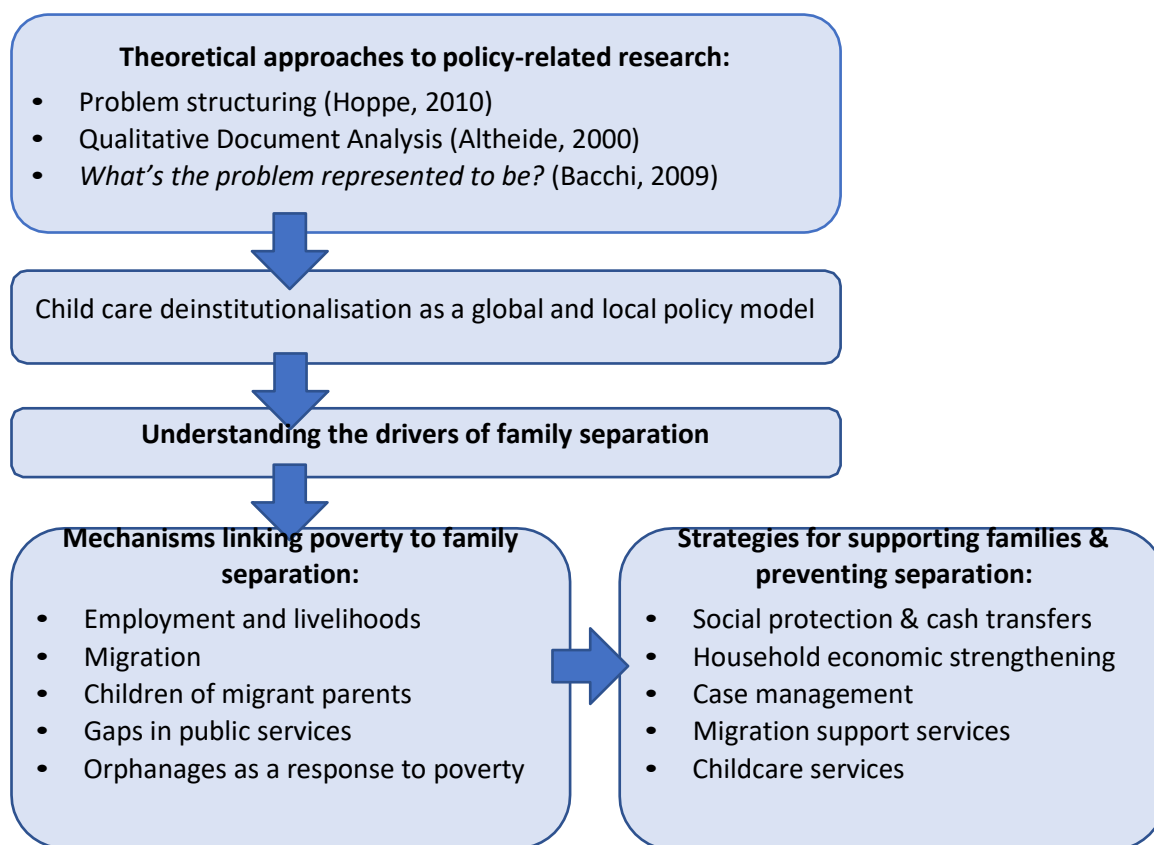
Chapter 2. Literature review

2.1. Introduction

This chapter begins by providing an overview of relevant policy-related theories that informed the design of this study, with a particular focus on social constructionist approaches. These approaches challenge traditional, objective, and linear perspectives on policy-making and program delivery. The chapter then reviews the literature on child care reform and deinstitutionalisation, emphasising the varied definitions and conceptualisations of 'deinstitutionalisation' (Shawar & Schiffman, 2020). This sets the foundation for examining the literature on the Cambodian experience of child care reform and deinstitutionalisation, identifying key factors driving family separation and orphanage placement, such as poverty, limited access to education, and migration. Following this, I review empirical evidence on various strategies and interventions to prevent family separation, including household economic strengthening, social protection payments, safe migration, and childcare services. The chapter concludes by identifying gaps in the current knowledge, presenting the rationale for this research, and outlining the specific research questions that will be addressed.

Figure 3 below provides an overview of the key areas addressed in this chapter.

Figure 3. Literature review overview



2.2. Theoretical approaches to policy analysis and design

In this section, I discuss the theoretical approaches to policy analysis that guided my exploration of the literature. I then review the literature that informed this study's conceptual framework and describe and analyse the policy-related research approaches that influenced my choice of methodological tools. Chapter 3 provides a more detailed presentation and discussion of these methodologies.

This study draws on critical and social constructionist approaches to analyse and discuss policy formation and development. This perspective informs the study's theoretical orientation and methodology, emphasising the value of incorporating diverse perspectives and experiences in the policy design process. Social constructionism (Berger & Luckman, 1966) disrupts essentialist beliefs and underscores the socially constructed nature of reality. In policy-related research, this perspective challenges traditional notions of policy and the problems it purports to address as objective and value-neutral, highlighting the subjective, interpretative, and contingent nature of policy design and delivery. By acknowledging the influence of social constructions in shaping policy agendas and the political, social, and institutional contexts in which they are formed and implemented,

policymakers can embrace more inclusive, reflexive, and contextually sensitive approaches to policy design. Hal Colebatch's concise yet insightful book *Policy* (Colebatch, 2009) highlights policy work's constantly evolving and iterative nature. A central theme of the book is the interplay between policy content and context. Colebatch challenges conventional notions of policy as a linear and deterministic process by illustrating how policies are shaped within specific social, political, and economic settings. This contextual approach requires policymakers to tailor interventions to distinct circumstances and opportunities.

Several theoretical frameworks were found to be relevant to the formation and development of social welfare policies in the context of this study. Backward mapping theory is prominently featured in policy-related literature and highlights the potential for input from policy implementers to contribute to policymaking. Elmore (1979) defines backward mapping as an analytic approach that focuses on data and observation from the lowest level of the implementation process to facilitate the identification of elements of policy delivery that are not 'working' for policy implementers at the street level. One standard method in this approach is to trace back frequently observed workarounds in the professional routines of policy implementers (Campbell, 2011). The effectiveness of this approach in a range of social, educational, and health-related policy contexts is evidenced in the literature (Dyer, 1999; Walker & Koroloff, 2007; Thompson et al., 2017), suggesting that backward mapping is a useful tool in policy adaptation and development, allowing for granular analysis of street-level implementation processes and the identification of areas for improvement. As such, the approach helps determine policy implementation's delivery and effects and identifies challenges, which can then inform policy adjustments.

From a social constructionist perspective, policy problems are not 'given'; they are constructed through power, the practices of policymaking, and the interpretative framing schemes of those involved in the policy and implementation process (Bacchi, 2009; Colebatch, 2009; Schon & DeSanctis, 1986). The problem-focused approach adopted in this study (Bacchi, 2009; Hoppe, 2010) offers a counter to the current enthusiasm in both international development and public policy for 'solution-focused' or 'evidence-based' approaches and instead seeks to extend understandings of how policymaking (and by implication governing (Foucault, 1984) takes place. This analytic orientation shifts the focus from problem-solving to problem *questioning* and '*interrogating how proposals for change*

'represent' problems' (Bacchi, 2009: vii) and the implications of that understanding for informing policy design and implementation.

Policy scholars from this school of thought treat policy 'problems' in various ways (Gstrein, 2018; Hoppe, 2010), highlighting how identifying, framing, and defining problematic public issues inform and shape the subsequent policy response. In his 'problem structuring' approach to policy design, Robert Hoppe (2010, 2017) highlights the dynamics of 'puzzling', 'powering' and 'participation' in the policy process. Making claims for a particular way of defining or solving a problem to solicit policy attention and resources depends, first, on *puzzling* or intellectual analysis as a 'cognitive support' (Hoppe, 2010:18) for advancing the kind of convincing claims necessary to secure *'authoritative policy choice'* (Colebatch, 2006:219). Further structuring of policy issues also depends on *powering*; that is, the pressure and influence mobilised behind particular perspectives and claims in the political process of engaging the state and other stakeholders to support specific goals and paths of action rather than others. Finally, the ultimate form that policy problems and their solutions assume both on paper and on the ground depends on *participation*; that is, on *'who is included or excluded from having a voice in the puzzling; and whose resources and connections create what weight and influence in the powering'* (Hoppe, 2010:18).

2.2.1. Problem-focused approaches to policy analysis and design

Three related problem-focused theories inform this study. Schon and DeSanctis's (1986) problem-framing approach and Robert Hoppe's (2010, 2017) problem-structuring methods informed the research design and semi-structured interview schedules, which helped uncover the interpretive frames of stakeholders within the policy network. Additionally, Carol Bacchi's *'What's the Problem Represented to be?'* approach (Bacchi, 2009) was employed to analyse the policy-related documentary data. These approaches are discussed further in Section 3.3 of the following chapter.

In brief, Hoppe and Bacchi both argue that prematurely seeking solutions to identified problems in policymaking without first conducting a thorough multi-perspectival examination of problem settings and representations fails to account for the conceptual and political complexities of how citizens and non-citizens are *'governed through problematizations'* (Bacchi, 2009:25). Practically, more traditional approaches often assume a linear, instrumental-rational model of the policy process, which does not align

with the nuanced and contingent realities of policymaking and implementation. As a result, it risks wasting resources and failing to achieve stated aims due to misdiagnosing the problem(s). As the pragmatist philosopher John Dewey noted:

'A problem well set is half solved.' (Dewey, 1938 in Dewey, 2007)

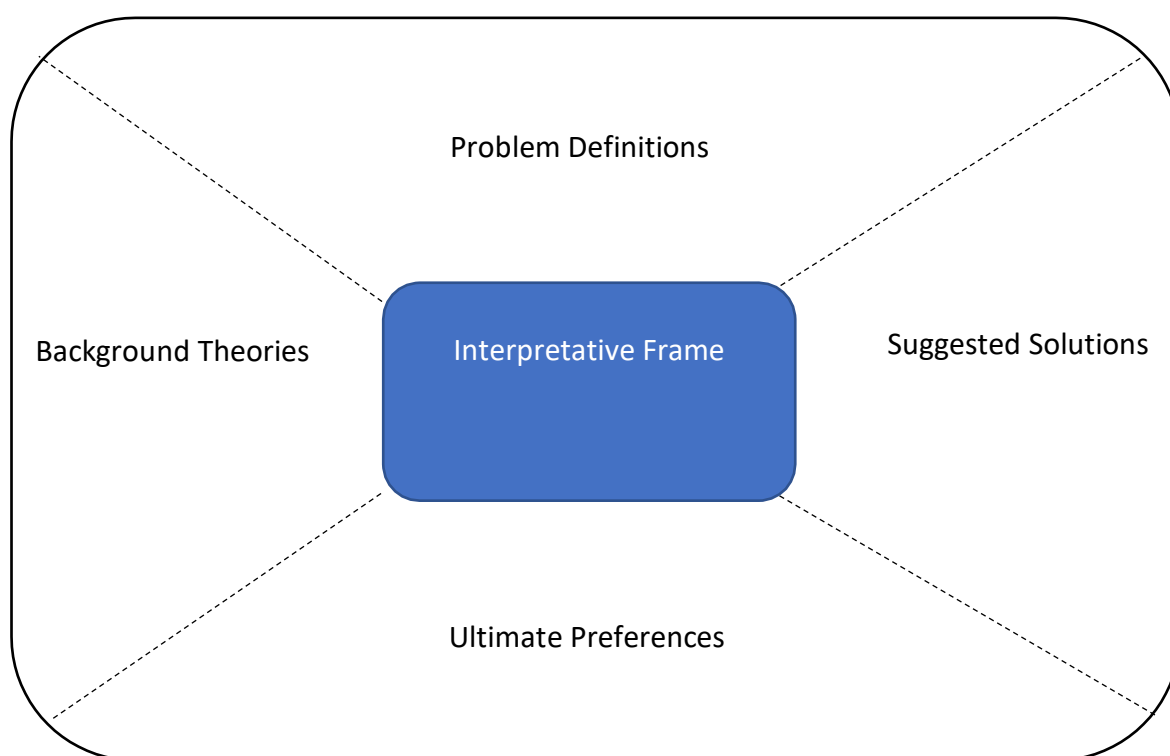
In practice, this kind of sensitivity to problematicity requires 'frame reflectiveness' (Rein & Schon, 1996). People across a policy network hold divergent and competing values, worldviews and perceptions expressed in a plurality of belief systems, attitudes and practices. What different stakeholders 'see' as the problem and deem as 'relevant facts' or 'potential solutions' often differ depending on their interpretative framing of the issue. As an analytic methodology, a problematising approach asks *'how and why certain things (behaviour, phenomena, processes) become a problem'* (Fliethmann, 2016:1).

Extending the frame reflective public policy work of Schon and DeSanctis (1986), Grin and Van de Graaf (1996) elaborate four separate elements in an interpretative frame:

- What exactly does the actor see as the problem in a given situation?
- How does the actor assess the consequences of various potential solutions to the problem as he or she sees it?
- What background theories (ways of thinking and acting) does the actor employ?
- What are the actor's ultimate preferences?

These four components, which comprise these frames of meaning, or 'problem frames,' informed the design of the semi-structured interview schedules (See Appendix D and Appendix E) used in this study and are summarised below.

Figure 4. Elements of an interpretative frame (Author's own based on Grin, Van de Graaf & Hoppe, 1997; Schon, 1983)



2.2.2. Policy document analysis

Document analysis is a crucial research method in policy-related studies so that one might expect a substantial body of literature on the subject. However, the available literature on documentary research is limited (Morgan, 2022; Tight, 2019). Despite its importance for policy-related research and evaluation, conducting a rigorous and thorough analysis of policy and program documents poses significant methodological challenges. These challenges arise from the inherent characteristics of the documents and the specific contexts in which they are produced and implemented. The literature review found examples of various approaches; for example, Chen et al. (2022) conducted a study on public health services in China using a textual analysis method outlined by Cardno (2018) to analyse the contents of policy documents. In this case, the method described by the authors was a deductive thematic analysis of the documentary corpus using a pre-defined set of thematic codes. Alternatively, quantitative bibliometric and descriptive statistical approaches to content analysis (Zhang et al., 2018) identify themes from documents using keywords. They can be used to track discursive shifts in policy topics and priorities. These methods may be helpful depending on the type and uniformity of documents under

analysis. However, they leave balancing the relative importance or real-world influence or impact of content across diverse documents unaddressed.

Policy and programming documents can be long, jargon-heavy, and structured and formatted in various ways—for example, legislation, guidelines, recommendations, and performance indicators. The quality, level of detail, and specific focus of the documents can also vary significantly. Some documents offer extensive fine detail, while others are intentionally vague and overly broad. To further complicate matters, the type and quality of a policy or programming document may not necessarily reflect its political or practical importance within any given policy space. These factors make conducting a thorough, uniform and useful analysis of a body of policy and programming documents challenging. Despite these difficulties, robust analysis of policy and programming documents is essential in policy-related and evaluation research. Researchers can employ multiple methodologies to overcome challenges, including triangulating data generated using qualitative and quantitative approaches, stakeholder interviews, and case studies.

In the next section, I critically review the research on children placed in residential institutions and the associated global policy model of child care deinstitutionalisation (DI).

2.3. Child care deinstitutionalisation as a global and local policy framework

Harms caused to children placed in residential children's institutions (RCIs) have been extensively documented, with a large body of literature describing the negative impact of institutionalisation on children's health and development, as well as a heightened risk of abuse (Bowlby, 1951; Oates et al., 2005 in Wedge, 2013; Schoenmaker, 2014; Tolfree, 1995; Van IJzendoorn et al., 2020). These and other studies have reported similar findings: institutionalised children experience deficits across multiple developmental and psychosocial domains (Berens & Nelson, 2015; Dozier et al., 2013; Smyke et al., 2007). Even where institutions are well run and meet children's material needs, they often struggle to provide the individual attention and love children need to thrive (Berens & Nelson, 2015). Additionally, long-term placement in care can make it difficult for children and young people to maintain ties to their birth families (Nielson et al., 2004), reintegrate back into their community (Carpenter, 2021), and have negative psycho-social impacts that last into adulthood (Berens & Nelson, 2015). This body of evidence underpins the movement to

minimise children's exposure to institutional care and promote family-based alternatives (Bajpai, 2017; Harlow, 2022).

However, much of the research highlighting the harmful effects of residential care on children's development has been generated in Romania and other former Soviet Union countries (Ghera et al., 2009; Humphreys et al., 2015; Nelson et al., 2014). The revelation of the chronically neglectful living conditions and care of children in large, severely under-resourced state-run orphanages in Romania and other former soviet countries received high-profile Western media attention during the 1990s and 2000s (Popa-Mabe, 2010; Shawar & Schiffman, 2020). Subsequently, countries in the former Soviet Union (in particular, Romania, Bulgaria, and Moldova) became some of the first sites of the global child care deinstitutionalisation (DI) movement outside the Anglophone countries.¹⁷ This movement was led by newly formed Western NGOs working in countries of the former Soviet Union such as LUMOS and Hope and Homes for Children (Esponda, 2017) as well as global agencies such as UNICEF (Ulybina, 2023).

For example, Berens and Nelson's (2015) systematic review principally rests its case for the harmful developmental effects of children's residential care on findings from studies conducted in post-Soviet collapse Romania as part of the Bucharest Early Intervention Project (BEIP) and English Romanian Adoptees (ERA) Study. Both projects generated a high volume of research and findings (Van Ijzendoorn et al., 2008; McCall & Groak, 2015; Nelson et al., 2007). However, as their names indicate, these studies sampled only Romanian orphanages. In the context of this Central and East European research focus, and emphasising the need for social policy and programming to be designed and implemented via a contextualised approach, Whetton et al. (2014) raise concerns that research analysing the effects of residential care on children has focused mainly on findings from under-resourced institutional hospital-like settings in Eastern Europe using shift workers to care for large numbers of infants and children. The extreme conditions in these orphanages were not representative of children's residential centres worldwide, raising doubts about the suitability of Romania and other former Soviet-bloc countries as case studies or generalisable research sites for developing a global social policy. It's important to note that similarly harmful and abusive care environments are rarely documented in the

¹⁷ Note that I did not access literature in diverse languages, and this may have contributed some biases to the literature review.

international literature on children's residential care, which should be considered when interpreting the findings of these influential and frequently cited studies.

Additionally, many of the studies reviewed by Nelson and Berens (2015) focus on the harmful effects of the institutional placement of infants, often under six months old (Dozier, 2014; Nelson et al., 2009). That newborns and infants experience developmental delays as a result of being placed in large child care institutions where they do not receive sufficient food, individual care or love is an important but unsurprising finding. However, it does not constitute evidence that residential care inevitably harms children and youth of all ages and circumstances. In the Cambodian context, for example, children frequently enter smaller, family-run residential care centres in their early teens, often to facilitate their secondary school attendance (Carpenter, 2021; Coleman, 2020).

Proponents of child care deinstitutionalisation highlight that most children in residential care are not orphans and that approximately 80% of the estimated 2.7 million living in orphanages globally have at least one living parent (UNICEF, 2024; Williamson & Greenberg, 2010). However, significant difficulties persist in counting the number of children in residential and other forms of alternative care (Desmond et al., 2020; Petowski et al., 2017). Desmond et al. (2020) found that enumerations of children living in residential care are susceptible to the methods used, with estimates ranging from 3.1 million to 9.4 million children globally. Several factors contribute to these data weaknesses. Many low- and middle-income countries lack administrative systems tracking children outside of family care. Additionally, many children's residential care centres are unregistered, and an ongoing debate exists about defining an institution (Desmond et al., 2020; Shawar & Schiffman, 2020). Standardising the definition of institutional care and improving data collection, particularly in low and middle-income countries with large child populations, would help ensure children out-of-family care feature on the statistical map and allow for improved monitoring and evaluation of the impacts of deinstitutionalisation interventions.

McCall & Groark (2015) argue that as many of children placed in residential care have living parents, they can, therefore, be considered 'unnecessarily' separated from their families, and child care policy should prioritise shifting resources from residential care to the social support services needed to strengthen families' capacity to care for their children at home. Scholars more critical of the deinstitutionalisation paradigm suggest a more contextually informed and gradual shift away from residential care during which resources are directed

towards enhancing the quality of care in both family and institutional settings rather than focusing too exclusively on eliminating all forms of care that are not family-based (Islam & Fulcher, 2022; Whetton et al., 2014). Following this line, Shawar and Schiffman (2020) highlight voices critical of deinstitutionalisation that raise concerns about the consequences of widespread orphanage closures and the reintegration of children into birth families in situations where those families may lack the willingness or capacity to care for their children, and the child welfare sector may lack the requisite level of capacity and resource to provide adequate community-based social support, social assistance or monitoring.

'You get other bold statements like: 'A large majority of children living in institutions have one living parent or existing family.' So what? That says nothing about those people's willingness, ability or capability to be the caregivers. If they're not willing, it doesn't matter if they are alive.' (Shawar and Schiffman, 2020:21)

Despite the good intentions behind deinstitutionalisation, unintended adverse consequences associated with orphanage closures and family reintegration are documented in the literature. Johnson (2022) highlights the risk of increased child vulnerability to exploitation and abuse in community-based settings, underscoring the need for regular social work monitoring and follow-up for children reintegrated from residential children's institutions to birth families or placed in community-based alternative care. Maintaining a critical stance, the literature review highlighted additional risks in implementing child care deinstitutionalisation in low-resource settings. A study by Carter and Williams (2013) identified disruptions in education and healthcare access for children reintegrated from residential care into community-based care, raising questions about the adequacy of community-based support systems in many low- and middle-income countries. Smith and Jones (2018) argue that deinstitutionalisation might inadvertently lead to increased strain on birth families or substitute caregivers, potentially compromising children's safety and well-being. In the Cambodian context, a think-piece by Fronek et al. (2019) highlighted potential risks involved in hasty implementation of deinstitutionalisation policies and the rapid transformation of practice in a context of under-investment in the country's capacity to assess and respond to the real needs of children and families within their communities. Research by Thompson (2015) suggested that successful deinstitutionalisation requires not only the closure of children's residential centres and the return of children to their birth families but also comprehensive reform of child welfare systems, policy frameworks and service delivery models. Critically, challenges arise when

transitioning from institutional to community-based care, as outlined by Wilson and Garcia (2019), who, echoing Carter and Williams (2013), underscore the need for robust infrastructure and support networks to ensure the well-being and safety of children in community-based care.

The literature on the effectiveness of deinstitutionalisation policies and programs reveals mixed outcomes. Anghel et al. (2013) found that while the number of children living in residential care in Romania and Hungary had declined somewhat since the 1990s, implementation of DI reforms had been slow, and significant gaps existed between the high-level, child-rights-informed legislation and national plans and realities on the ground. The authors identified several factors contributing to this discrepancy: financial under-investment, insufficient social work staff, and a failure to use research, monitoring and evaluation to clarify and guide the links between services and needs. Huseynli (2018), using Azerbaijan as a case study, questions the view that 'lack of resources' underpins the slow and partial implementation of deinstitutionalisation in all cases. He argues that progress has been minimal despite over twenty years passing since Azerbaijan became the site of national and international child care deinstitutionalisation efforts. Similarly, UNICEF (2015) reported that other countries of the former Soviet Union that embarked on similar child care reform initiatives (for example, Russia, Ukraine, Turkmenistan, Uzbekistan, and Kazakhstan) have also shown no or limited progress in the deinstitutionalisation process. Huseynli (2018) notes that deinstitutionalisation progress in these resource-rich former Soviet countries compares unfavourably with that of less-well-off but comparable countries such as the resource-poor Republics of Moldova and Georgia, each of which has eliminated almost all their residential institutions and established family-based alternative care services such as foster care (Greenberg & Partskhaladze, 2014). For example, between 2005 and 2009, the number of children in institutional care in the Republic of Georgia declined from approximately 5,000 to 1,500 (Greenberg & Partskhaladze, 2014). Huseynli (2018) identifies a lack of national political will as the primary contributor to these differing outcomes. Greenberg and Partskhaladze (2014) similarly identify political will as being responsible for Georgia's significant reduction in the number of children living in residential care.

However, considering Georgia's progress in implementing child care deinstitutionalisation, I would highlight the initial low population of children in the country's residential children's institutions. Additionally, in 2006, Georgia received significant financial support of 7 million

Euros from the European Union, USAID, and the Swedish International Development Agency. This influx of donor funds facilitated a swift expansion of the foster care system. Consequently, foster parents began earning a monthly salary roughly twice the average wage of high school teachers in Georgia (Ulybina, 2020).

For cultural and socioeconomic reasons, establishing foster care has proved challenging in many countries (Harlow, 2022). Rogers and Karunan (2020) examined deinstitutionalisation in Thailand through interviews with child welfare practitioners. Participants perceived deinstitutionalisation as a complex problem, with some feeling that some children's residential care provision would remain necessary for a long time due to demand. Other practitioners felt that cultural barriers would prevent the development of foster care in the Thai context. However, based on the participants' accounts, the authors thought it would be incorrect to characterise deinstitutionalisation in Thailand as an intractable or 'wicked problem' (Rittel & Webber, 1973) as practitioners were hopeful of change, particularly in identifying increased family-strengthening policies to prevent family separation as helpful.

Cambodia's position as a high-profile site of the globalised child care reform movement is indicated by its government-supported child care reform and deinstitutionalisation policy focus (MoSVY, 2016; MoSVY, 2018) and the funding and direct implementation of DI programmes by international development actors such as UNICEF, USAID, and the EU. Child care deinstitutionalisation in Cambodia was operationally galvanised by the Government's *Action Plan for Improving Child Care* (MoSVY, 2016). The goal and quantitative target of this strategic plan, to reduce the number of children living in residential care by 30%, was (over) achieved with a reduction in the number of children living in residential care from 16,579 children in 2015 to 5,440 children in 2020 (MoSVY, 2020).

The *Action Plan for Improving Child Care* (MoSVY, 2016) was the guiding policy document for Cambodia's intensive deinstitutionalisation campaign. UNICEF Cambodia developed and advanced the plan via direct financial support to the Ministry of Social Affairs (MoSVY), sub-national authorities, and the national NGO implementing network, the Partnership Program for the Protection of Children (3PC). Child care reform in Cambodia received additional external impetus from USAID via their funding of both UNICEF Cambodia and the formation of the exclusively DI-focused NGO network Family Care First (FCF). While detailing the

internal power-play and inter-agency political manoeuvring of development partners in Cambodia is beyond the scope of this study, the diversity of Western

development partners and NGOs advancing globalised approaches to child care reform indicates the continuing geopolitical importance Western aid agencies place on maintaining presence and influence in Cambodia (in this case via the ‘soft power’ areas of social policy, and in particular policy with a child protection focus).

Ulybina (2023) discusses child care deinstitutionalisation as a global policy model. Using reports by state parties to the United Nations *Convention on the Rights of the Child* (1989), she found that 85% of countries worldwide have made at least some kind of commitment to child care deinstitutionalisation. However, she concluded that such policy commitments can sometimes be symbolic and only formally adopted as a low-cost way for countries to show commitment to world cultural norms and maintain or improve a government’s international legitimacy. Examining social policies through the lens of transnational agency is justified in countries like Cambodia, where the government’s social welfare budgets remain dependent on external (foreign) aid,¹⁸ and agendas are, to some extent, shaped by the ‘*pervasive influence of transnational actors*’ (Orenstein et al. 2008:1 in Ulybina, 2020:334).

Considering deinstitutionalisation as a global social policy model highlights the potential benefits of enhancing the identification and inclusion of particular cultural and contextual factors in the design and delivery of child and family policy and programming in different contexts. Shawar and Schiffman (2020) identify the genesis and homogeneity of of the policy models advanced by the global DI movement in the experiences of many of its leading NGO proponents in countries of the former Soviet Union: with ‘*many with experience [there] tending to favour a robust DI approach given the history of child maltreatment in these countries*’ (Shawar and Schiffman, 2020:23). In contrast, a cross- cultural analysis by Lee and Patel (2021) stressed the importance of tailoring deinstitutionalisation strategies to the country-context, arguing that a top-down or one- size-fits-all approach may not be practical or effective. In particular, the authors highlight that understanding social and cultural nuances is crucial to successfully implementing community-based care models.

¹⁸ Overseas development assistance made up 30.5% of net government expenditure in 2020 (World Bank,

2024).

2.3.1. Risks in the implementation of deinstitutionalisation in Cambodia

Fronek et al. (2019) critically identify potential problems implementing child care deinstitutionalisation policies in Cambodia. They highlight risks involved with haste in delivery, quantitative outcomes, short timeframes, and unrealistic demands placed on a social workforce before investing in their capacity to assess and respond to the needs of children and families at the community level.

‘Measuring outcomes in timeframes and numbers rather than on quality processes shifts the focus from the provision of families, child and community services to meeting targets within the required timeframe and encouraging an administrative focus which emphasises bureaucratic procedures rather than the standard of work needed.’ (Fronek et al., 2019:1).

In the Cambodian context, the authors argue that these deinstitutionalisation policies have led to mixed outcomes, with some ill-considered reintegrations made without proper assessment or provision of support services, families pressured to accept a child back when reluctant to do so for a diverse range of reasons, including poverty and poor health, and a lack of follow-up social work visits. The authors argue that these potentially unsafe practices were due to a combination of factors, including the lack of a transparent and widely shared approach to deinstitutionalisation, limited workforce capacity and a rush to meet targets. The analysis of the government's data on the closure of children's residential institutions and the number of children who returned home between 2016 and 2019 presented in Section 1: 1 of this study indicates that the number of children who returned home without any assessment, social work oversight, family support, or follow-up was high.

In summary, the prevailing body of research on children placed in residential care highlights extensive detrimental effects on their development and well-being. Such findings have spurred the child care deinstitutionalisation movement to minimise children's exposure to these institutions and develop family-based alternatives. However, much of this research, which mainly underscores the most severe consequences of residential care on children's development and well-being, derives from studies conducted in post-Soviet countries like Romania. These studies exposed severely abusive and neglectful conditions, but a review of the literature suggests that these conditions are not representative of the situation in residential children's institutions globally. This geographical, contextual and empirical focus

indicates a need for caution in generalising these findings universally. The literature review highlights several potential adverse consequences of rapid deinstitutionalisation. These

include increased child vulnerability to exploitation and disruptions in education. It also underscores the varied success of deinstitutionalisation efforts globally, noting slow progress and gaps in implementation in some countries. These issues are often attributed to insufficient financial and staffing resources, cultural resistance to foster care as a solution, and, in some cases, a lack of political will.

While the evidence supports a shift away from residential care towards family-based care as beneficial for children's well-being, several studies highlighted the need for a critical and contextualised approach to deinstitutionalisation that balances the reduction of residential provision and moving children out of residential centres with significantly strengthening the capacity of families and community services to provide care for children at risk of family separation. Only three empirical studies were found on the longer-term outcomes for children reintegrated from residential care or their families (Frimpong-Manso & Bugyei, 2018; Ochanda, 2016; Walakira et al., 2022). These studies identified significant challenges and highlighted the need to prioritise household welfare through economic strengthening efforts and other ongoing support to address the impacts of family-level poverty and safeguard children's welfare and access to education.

The following section reviews the literature exploring the drivers of family separation in Cambodia and other low- and middle-income countries. Although the literature identifies various contributing factors, they are all closely tied to the pervasive challenge of poverty. The studies reviewed highlight that economic hardship, often compounded by additional factors, is frequently the underlying cause leading to the decision to place children in residential care (Ashley et al., 2019; Erol et al., 2009).

2.4. Understanding the drivers of family separation in Cambodia and other low and middle-income countries

2.4.1. Poverty

Poverty has been identified as an underpinning factor driving family separation and orphanage placement in low- and middle-income countries, with research showing that children from low-income households are at higher risk of having experienced a range of adverse early childhood experiences and being placed in orphanages (Juffer & Ijzendoorn, 2005; Sherr et al., 2017). Studies describe the 'pull factor' of residential care centres, which

can attract impoverished and struggling parents by offering essential services that meet

their children's basic needs, such as food and access to education. (Bilson & Cox, 2007; Okalla et al., 2019; Akanla & Ojuri, 2020). Ashley et al.'s (2019) study interviewed Haitian mothers about maternal-child separation and the placement of children in one of Port Au Prince's five hundred orphanages. The study found separation strongly associated with insufficient economic means compounded by other factors, most notably access to education and lack of social support. In a study conducted in Turkey, poverty was also identified as the primary reason for the institutional placement of children (Erol et al., 2009). Bulgaria has the highest levels of orphanage placement and the lowest GDP per capita in the European Union (Minassian, 2021). Berberova-Valcheva (2019) describes the main reason for high family separation levels in Bulgaria as poverty and identifies the need for national social policy to increase family and employment support to address this trend. While academic research on family separation in the Cambodian context is sparse, studies commissioned by the Cambodian government and international NGOs also highlight poverty and access to education as the most commonly identified drivers of separation (Lizarazu, 2018; MoSVY, 2011; MoSVY, 2018).

While, in purely econometric terms, poverty in Cambodia has fallen in the past 15 years, these gains are fragile and unequally distributed, with 17.8% of Cambodians still living below the poverty line (World Bank, 2021) and 4.5 million people (30% of the population) remaining poor or 'near poor' and vulnerable to shocks that would leave them living below the poverty line (ILO, 2017). Traditionally, poverty lines are based on the monetary value of a person's consumption against the costs of meeting their minimal needs (for food, shelter, clothing, etc.), and national governments set their own poverty thresholds based on the local costs of essential items. In Cambodia, the national poverty line was set at 10,951 Khmer Riel (\$2.70 USD) per person per day in November 2021 (GIZ, 2022). In contrast to income or consumption-based poverty, this study adopts the concept of 'multi-dimensional poverty', an umbrella term covering a variety of measures which take account of the diverse deprivations people may experience in areas such as nutrition, health, education, and standard of living (e.g., access to clean drinking water and toilets). In addition, multi-dimensional poverty approaches reflect how poor people describe their own poverty and recognise the diversity of barriers that can prevent them from achieving a decent quality of life (UNDP, 2022).

The most recent Cambodian Demographic Health Survey (CDHS, 2022) found 48% of children to be multi-dimensionally poor, experiencing deprivation in at least three

dimensions of well-being. The percentage of Cambodians struggling to afford food has fallen from 72% in 2013 but remains persistently high at 58% (Gallup, 2023). Among the poorest 20% of society, the inability to reliably afford food reached 87% in 2022. In no other country in the world is there greater inequality between the rich and poor in their ability to afford food (Gallup, 2023).

Although references are often made to those ‘living in poverty’, it is only recently that housing conditions have been included in definitions of poverty (Alkire & Kanagaratnam, 2021). Financial measures fail to recognise that many of those experiencing poverty, particularly in the metropolitan cities of low and middle-income countries, live in informal settlements or temporary structures illegally built on public land, where they have no security of tenure and may have missing or limited access to public infrastructure (e.g. roads, toilets, clean water) or services (including schools, health care and law enforcement). In addition, these communities may experience high levels of violence, substance misuse, and other socioeconomic challenges, which present risks to those living there (Jungari et al., 2022; Tacoli et al., 2015).

While poverty is frequently identified in the literature as a core, underlying driver of family separation and orphanage placement, it often coexists with other factors that make families vulnerable to separation and parents more likely to place children in residential care (MoSVY, 2011; Walakira, 2022). The relationship between poverty and other potential contributing factors, such as access to education, disability, and exposure to violence, is complex. Not all low-income families send their children to live in orphanages, and other poverty-constituting factors, particularly the interrelated factors of livelihoods and migration, are highlighted in the literature as compounding the impacts of poverty and placing additional stress on families and contributing to family separation.

2.4.2. Mechanisms linking poverty to family separation and the placement of children in residential care

2.4.2.1. Employment and livelihoods

Cambodia has undergone significant social and economic transformations in the past two decades, with the economy and employment market transitioning from farming to

manufacturing and service sector jobs (Lim, 2020). Cambodia's economy has maintained an average growth rate of 7.7% between 1998 and 2018, positioning it as one of the fastest-

growing economies in Asia (WEF, 2024). Neoliberal policies have been identified as the driving force behind this economic growth (Green, 2019; Springer, 2015), which some international finance institutions have characterised as ‘pro-poor’, indicating the creation of employment opportunities for those in poverty and consequent improvements in income and living standards for broad sections of the population (World Bank, 2022).

The term ‘pro-poor’ growth lacks a clear definition and is contested (Abdala, 2021; Kraay, 2006). Despite Cambodia's poverty rate nearly halving from 2009 to 2019, lifting nearly 2 million people out of poverty (World Bank, 2022), there is debate about whether this growth is truly pro-poor (Seng, 2021; Sok, 2017). While many Cambodians have seen income improvements, increasing income inequality (Hanson & Gjonbalaj, 2019), a widening economic gap between rural and urban areas (Hanson & Gjonbalaj, 2019), labour exploitation, and harsh working conditions (Harvey et al., 2022) persist.

Cambodia's neoliberal processes were initially propelled by the aims and ideals of the international donor community under the UN-sponsored nation-building project to transition post-conflict Cambodia to a democratic and free-market nation during the 1990s and 2000s. Chinese investments and loans have recently played an increasingly significant role (Williamson, 2023). Cambodia's neoliberal approach to the country's economy and development has been readily supported (and adapted) by incumbent local elites as a means of financial enrichment and maintenance of political power (McEvoy & Bryson, 2021). Verver & Wieczorek (2017) highlight the position of Cambodia's entrenched elite comprising card-carrying Cambodian People's Party (CPP) politicians, lawmakers, subnational officials, business tycoons, the military and police who dominate public and business life and characterise Cambodia as a neoliberal, authoritarian, and patrimonial society. The authors argue that the benefits from the marketisation of Cambodia's natural resources, cheap labour, and foreign investment are mainly distributed within this elite network, with most citizens benefitting little from the country's economic growth. This neoliberalism-with-Cambodian-characteristics has been termed ‘violent neoliberalism’ by some scholars (Grundy-War, 2019; Springer, 2015), with Springer producing a body of work describing how this authoritarian approach to development has allowed local elites to co-opt neoliberal policies, resulting in a form of governance characterised by routine corruption, dispossession, and violence, which disproportionately impacts the less wealthy (Springer, 2011; Springer, 2015).

Although Cambodia's economic growth has been remarkable, multiple authors note that its economy is under-diversified and increasingly concentrated in a small number of industries—export-oriented garment manufacturing, tourism, and construction. These three sectors accounted for 70% of growth and 39% of total paid employment in 2019 (World Bank, 2022). However, many people's educational backgrounds remain low, especially those from rural areas, and the garment industry and construction sector offer low-barrier-to-entry opportunities for less-educated migrants to the city to earn a stable income.

2.4.2.2. Employment and gender

In considering the profile of policy and programming that focuses on the intersections of gender, employment, and parenting, it should be noted that Cambodia has relatively high female labour force participation, with more than 75% of women working (World Bank, 2018). Cambodia's garment sector accounts for 75% of the country's merchandise exports and 16% of GDP (ILO, 2019). The capital, Phnom Penh is home to an estimated 600–800 garment factories, which employ nearly 1 million people. Some 80% of these workers are women, for whom the sector presents both opportunities and challenges. While Weimann-Sandig (2021) highlights the potential for economic empowerment and mobility for women, McKay and McKenzie (2020) underscore the difficulties faced by the female garment sector workers who participated in their study. Their findings revealed that women factory workers reported experiencing social isolation and stress. When migrating to the city to work, participants described how they had left their children in the care of grandparents in their home village. Separated from their children, working long hours, and cut off from supportive social networks, many participants reported experiencing isolation and depression. These findings emphasise the need for targeted support and policies to address the needs of this large group of women, children and their extended families.

2.4.2.3. Employment and changes in the farming sector

Despite a significant rural-to-urban population shift, agriculture, particularly cash crops, remains a cornerstone of the Cambodian economy, with globally high prices for rice contributing to the country's economic boom over the past decade. However, while many Cambodian households are engaged in small-scale, family farming, the government's agricultural strategy focuses on foreign investment, modernisation and commercialisation

(RGC, 2022). While the literature reveals that the relationship between farm modernisation and employment patterns is nuanced, context-specific, and complex, the commercialisation of farming usually reduces net agricultural employment opportunities (Nolte & Ostermeier, 2017; Petrick & Zeier, 2010) due to mechanisation and the expansion of non-farm sectors in urban areas (Singh, 2015), and the literature extensively discusses the disruptive effects on family structure and functioning due to the decline in rural livelihoods and the shift of populations from rural to urban areas in Cambodia (Gironde, 2021; McKay & McKenzie, 2020; Shaikh et al., 2021).

2.4.2.4. Labour migration

Cross-border and rural-to-urban migration is a major global phenomenon. According to the *World Migration Report 2022* (IOM, 2022), there were 281 million international migrants in the world in 2021, equivalent to 3.6 per cent of the world population. If each migrant is assumed to have a partner and two children (a reasonable estimate), international labour migration directly impacts over one billion people. In addition, 800 million workers migrate within their countries from rural areas to cities (IOM, 2019). If immediate family members are recognised as being impacted by migration, this *‘constitutes nearly 40% of the world’s population of 7.8 billion [as] directly involved in national and international migration’* (Ness, 2023: Introduction).

Labour migration is a key contributor to Cambodia’s recent economic growth (Bylander, 2017). Often driven by poverty, Cambodia's high levels of domestic and international migration can disrupt family and community structures as individuals seek better economic opportunities in urban areas or abroad (Connell & Connell, 2016; McKay & McKenzie, 2020). Bylander (2015) identifies key factors influencing migration in Cambodia, highlighting rural unemployment, debt, landlessness, and natural disasters. His work draws particular attention to the impacts of climate change on small-scale farming (Bylander, 2015) and over-indebtedness to micro-credit companies (Bylander & Hamilton, 2015) as being closely linked to migration patterns. In Cambodia, rural areas have been reported as experiencing an average annual population loss of 4%, which significantly depletes the labour pools and impacts family life in these regions. The Cambodia Rural Urban Migration Project (CRUMP, 2012) characterises this as *‘a truly astounding rate of population loss’* (CRUMP, 2012: 18).

Internal migrants constitute a significant proportion of the Cambodian population. In 2013, the National Institute of Statistics estimated that nearly one-quarter of the Cambodian population (approximately 4.1 million individuals) had migrated, with most moving from the countryside to the capital (Fujisawa & Shimizu, 2023). In addition to this high level of internal migration, at least 1.3 million Cambodians (Khmer Times, 2024), representing almost 12% of the total working-age population, were working abroad in 2023. These migrants often find themselves in low-paid manufacturing or agricultural positions in more economically developed countries in the region (OECD, 2017). However, as this figure only accounts for formal migration with work permits and visas, it is likely a significant underestimate, as unregistered irregular migration to Thailand and Malaysia is commonplace (IOM, 2019).

In economic terms, studies indicate that migration from rural areas to cities improves income for individuals, families, and communities through money earned in the city and remittances sent back to rural areas (Keopasith & Shen, 2020; Zhu & Luo, 2010). Viewed historically, net rural-urban migration typically accompanies economic growth until a country is predominantly urban, and there is a strong and persistent relationship between urbanisation and improved economic status (Glaeser, 2011). Economic explanations for the benefits of urbanisation have progressed considerably in recent decades and are widely recognised (Bettencourt, 2020; Glaeser, 2011; Krugman, 2011). In brief, while urbanisation brings challenges as well as benefits, it is hard to find examples of sustained economic growth and poverty reduction without urbanisation (World Bank 2009). Numerous studies emphasise labour migration's economic and developmental benefits, primarily due to the remittances sent back to the countries and communities of origin (Ferreira et al., 2018; Smith & Floro, 2021). However, Ness (2023) offers a compelling Marxist critique of this widely accepted perspective. Based on a detailed analysis of global data regarding migration and remittances, he argues that, in practice, *'remittances are sent sporadically and may pay for emergencies, such as medical care for family members [or] rent to prevent eviction . . . [but] they do not contribute to the economic development of most people in poor countries.'* (Ness, 2023: Introduction)

While urbanisation in a rapidly developing country like Cambodia may be inevitable and economically beneficial, the effects on families of cross-border and rural-to-urban migration

are complex. While there is a shortage of literature focused on the Cambodian context, studies undertaken in China highlight some potential consequences of mass

migration on family structure, child well-being and social dynamics. Like China, Cambodia's recent economic growth and poverty reduction have been driven by foreign capital flowing into the country attracted by low land prices, a lightly regulated business environment and affordable, flexible labour. Examining China's experience with migration is potentially helpful in informing the development of policy and programming in Cambodia, given China's more extended experience and more extensive policy-making and research on the topic. While precise data on Chinese migrant populations is not available, it is estimated that there were 245 million internal migrants in China in 2017 (Sin, 2020). This scale of migration has significant demographic implications for family life. For example, approximately 58 million Chinese children are left in the full-time care of relatives while their parents seek work elsewhere (Shi, 2020). Chinese research underscores the potential adverse effects on the children left behind. Fan X. et al. (2017) suggest that children left behind are more prone to dropping out of school and suffering from health and nutritional deficits than their peers. Zhou (2015) found that the impact is particularly severe for girls, as nearly half of the participating household heads viewed girls as better suited for household chores than education. Moreover, children left behind in the care of the extended family by their migrating parents have a 27% higher likelihood of engaging in economic activities to support family income than children from non-migrant families (CDRI, 2014). In the context of this study, parental migration is identified in the literature as a common driver of family separation and the placement of children in residential care (Allen & Nakonechnyi, 2022; Fu et al., 2023; MoSVY, 2018).

2.4.2.5. Children of migrant parents

Fellmeth et al. (2018) employed a health-focused perspective in their meta-analysis of 'left behind' children of migrant parents in low and middle-income countries, which is dominated by studies undertaken in China. Their findings indicated that children left in the care of relatives when their birth parents migrated for work were at a higher risk of malnutrition, stunted growth, and substance misuse compared to their counterparts with non-migrant parents. The authors concluded that although families may benefit economically from remittances sent back home, parental migration has few other benefits for children left behind. In addition to health and behavioural problems, studies have also indicated that children of migrant parents have a higher incidence of depression, anxiety,

loneliness, and other psychological issues due to a lack of adequate care and attention while their parents are away for work (Anita et al., 2020; Tomsa & Jenaro, 2015).

Most research in this area focuses on China. However, recent studies in Cambodia have shifted the focus to the educational impact on children of migrant parents. Marchetta and Sim's (2021) analysis of the relationship between parental migration and Cambodian children's schooling shows that children of migrant parents complete fewer years of schooling than children of non-migrant parents, with the most significant effect on children aged 12 to 17. The authors conclude that this effect appears to be driven by the reduced parental input in children's education rather than by an increase in children working to earn money.

Adopting a broader socio-economic and intergenerational lens, Wickramage et al. (2015) highlight migration impacts that extend beyond individual children and caregivers to the entire community and society and argue that longitudinal studies are needed to assess whether migration enhances families' social and economic capital beyond meeting immediate financial needs. Green and Estes's (2022) ethnographic study in Cambodia describes the effects of mass migration by the working-age rural population from the countryside to the city, leaving the villages primarily inhabited by older people and children. They coin the concept of 'trans-local precarity' to describe the risk that family members' efforts to support one another might fall apart due to the instability of urban labour markets and a lack of sustaining infrastructures in rural areas. In the context of child care, their study describes how precarity is experienced across trans-local relations that connect household members' productive and reproductive labour in urban and rural locations.

In their exploration of the global labour migration phenomenon, Griffith et al. (2018) highlight the shortage of international research on the impact of parental labour migration on the children left behind. Highlighting the scale of the issue, Fellmeth et al. (2018) estimated that economic necessity had resulted in 40% of children in rural South Africa, 27% of children in the Philippines, and 36% of children in Ecuador being left in the care of extended family members when their parents migrate for work. Despite these figures, there is little empirical research on the impact of parental migration on left-behind children in low and middle-income countries other than China. Relevant to this study, parental labour migration is recognised as a driver for placing children in residential care (Allen & Nakonechnyi, 2022; MoSVY, 2011). However, the specific dynamics linking parental migration to children's placement in institutional care remain largely unexplored.

Overall, the literature presents a picture of children of migrant parents in low and middle-income countries as a significant yet under-addressed transnational challenge that cannot be wholly addressed at the national level. Ferraciolo (2021) argues for the importance of, and lack of policy attention to, the effects of parental migration on children ‘left behind’. Jayasuriya (2021) makes similar arguments in the context of the Philippines. However, there is a gap in the literature and knowledge outside of the Chinese context, which may hamper the issue from receiving policy and programming attention in Cambodia and other countries affected. Advocacy for greater policy engagement with this issue should emphasise the scale of the global population impacted by migration-related family separation. This includes the children left behind, their migrating parents, and caregiving extended family members.

2.4.2.6. Gaps in public services: social services and education

Cambodia relies heavily on external aid at the national level, with overseas development assistance constituting approximately half of its annual government budget (Oxfam, 2023). A lack of public service provision and a hitherto minimally regulated third sector (Fechter, 2020) have created conditions for diverse global and local actors to enter social welfare and education spaces. The Ministry of Social Affairs, Veterans and Youth Rehabilitation (MoSVY) provides policy direction and technical support for social welfare services in Cambodia. However, it is one of the government's least-funded departments, and this underfunding is reflected in persistent shortages of financial resources and personnel (Fujimoto, 2009; Taibo, 2018).

The delivery of government social services at the local commune level is managed by Commune Committees for Women and Children, with each local committee appointing a representative to serve as a village or community social worker (hereafter called a ‘CCWC’). While the formal scope of CCWC responsibilities is limited to awareness raising and monitoring issues affecting women and children within their communes, Jordanwood (2016) reports that in practice, CCWCs have expanded their functions to include the delivery of services related to child protection, gender-based violence prevention, school dropout prevention, and safe migration initiatives. While exceeding their formal mandates, this role expansion indicates an adaptive response to local needs, further underscoring government limitations and gaps in social service delivery. The effectiveness of the CCWCs in meeting the needs of children and families is hampered by a self-identified lack of

training and limited technical capacity¹⁹ (Jordanwood, 2016). An additional administrative and organisational barrier to implementing social policies and programmes arises because all commune staff, including CCWCs, fall under the jurisdiction of the Ministry of Interior (MoI) rather than the Ministry of Social Affairs (MoSVY). This disrupted chain of command between social service policymakers (MoSVY) and the policy implementers (MoI) significantly impacts the implementation process.

Operating under the powerful Ministry of Interior, Cambodia's local authorities today are a legacy of the communist state-building strategy of the 1980s when many former Khmer Rouge cadres were recruited into sub-national administrations because of their local knowledge and existing power bases (Eng et al., 2014). Since then, local authorities have played an important role in bolstering the incumbent position of the ruling Cambodian People's Party (CPP), partly by acting as a national system for the surveillance and control of the population (Hughes, 2013). Within this ecosystem, party loyalty is rewarded via the distribution of politicised infrastructure and development projects from higher-ranking patrons to their provincial counterparts (Pak, 2011), and citizens not affiliated with the CPP tend to have difficulty accessing local authorities and public services (Eng et al., 2015). In this political and economic context, the support and funding of social assistance is not prioritised. These financial constraints are exemplified by the funding allocated to CCWCs, who receive approximately \$200 USD annually from the Ministry of Interior for meeting expenses such as stationery and transport (Kim et al., 2020). This low level of funding results in the heavy reliance of government social workers on non-governmental organisations (NGOs) and international NGOs (INGOs) for funding, referrals and support services.

With approximately 3,000 international and domestic NGOs operating within the social services sector, NGOs in Cambodia are better funded than their government counterparts and pivotal in service delivery and policy advocacy, managing about 20% of all aid to the country (Frame, 2022). NGOs are critical in compensating for the shortfall in local government provision (Kim et al., 2020). In this operational environment, the

¹⁹ While MoSVY/ UNICEF Cambodia driven plans for strengthening the social service workforce are centered on professionalisation, with only graduates of social work degree programmes being recognised as 'social workers' (MoSVY, 2021), the reality is that Cambodian social work has developed and is predominantly practiced by a paraprofessional social workforce, trained on the job and primarily employed by NGOs (Kim et al., 2020). While this context has implications for the coverage and coordination of services, it implies no judgement on the motivation or capacity of the existing ('unqualified') social service workforce.

administration and implementation of social policies and programs, which state agencies might usually be expected to carry out, are divided between a kaleidoscope of NGOs and donors with limited coverage and frequent changes regarding their programming priorities. As of December 2022, there were 6,109 NGOs officially registered (Khmer Times, 2023). The international nature and variety of values, models, and approaches within these organisations significantly complicate efforts to coordinate, monitor, and evaluate the sector as a whole. Fujimoto (2009) argues that Cambodian government ministries and departments act more as registration centres for NGOs operating in the country than as drivers of policy-making and implementation.

This literature review revealed critical considerations regarding whether International NGOs deliver necessary services or create further dependencies in some countries where they operate (Ear, 2012; Sahoo, 2016). Further adverse consequences of an over-reliance on external agencies are risked when international donors fund target-driven programmes conceptualised and evaluated on 'SMART'²⁰ goals (Doran, 1981), prioritising quantitative rather than qualitative factors and seeking defined, measurable outcomes within set periods. This approach to framing and designing policy and programming aims and objectives has characterised Cambodia's child care deinstitutionalisation campaign (Fronek et al., 2019; MoSVY, 2016). In the context of health promotion, Swann et al. (2023) critique the (over) use of the SMART heuristic on the grounds of its under-consideration of the type of goal being set, lack of an evidence base, redundancy in criteria and risk of potentially harmful effects. Moreover, globalised social programmes are often funded based on international 'best practice' approaches rather than considering local context, values, or needs (Henley et al., 2021). In his book, *Aid Dependence in Cambodia: How Foreign Assistance Undermines Democracy*, Sophal Ear (2012) argues that decades of dependence on international intervention and foreign aid have had detrimental effects in Cambodia, resulting in high levels of corruption and the undermining of national sovereignty. In this context, he argues that Cambodia's economic growth has occurred without social or democratic development, reflected in the country's high wealth inequality (Hansen & Gjonbalaj, 2019), deteriorating political freedoms (Tat, 2019), and persistently high poverty levels (Karpati, 2020). Ear attributes this situation to decades of generous foreign aid that has hindered the

²⁰ *'In its original version, the acronym stood for Specific, Measurable, Assignable ("specify who will do it"), Realistic, and Time-related, but it is now commonly interpreted as the setting of Specific, Measurable, Achievable, Realistic, and Time-bound goals.'* (Swann, et al., 2023:2).

government's motivation to collect progressive tax and perpetuated weak state accountability and delivery of services to the public.

2.4.2.7. Access to education and residential care

This literature review revealed that one of the most frequently cited causes of children being separated from their families and placed in residential care in Cambodia and other low- and middle-income countries is to facilitate their access to affordable and quality education (Berens & Nelson, 2015; Edmond, 2009; Jordanwood, 2016). While there is evidence of improvements in the Cambodian education system (MoEYS, 2022), the government invested less than any of its regional neighbours in education in 2023²¹ (UNICEF, 2023) and has acknowledged continuing weaknesses (MoEYS, 2022). For example, while school enrolment, attendance, and completion rates are rising overall, there is substantial attrition as students progress through their school careers, with the majority still not completing secondary school education (OECD, 2018). The *Programme for International Student Assessment for Development* (OECD, 2018) found that Cambodian schools are failing to provide quality educational outcomes for the vast majority of children, with 92% and 90% of 15-year-olds failing to reach minimum proficiency in reading and maths respectively (OECD, 2018:30). Describing the Cambodian school system UNICEF Cambodia state:

'There are not enough qualified teachers, and the quality of learning environments is poor. There is a lack of basic infrastructure, such as water, sanitation and . . . violence is a problem in schools, with teachers using corporal punishment . . . and most [parents] cannot afford to send their children to school, particularly in rural and deprived areas.' (UNICEF, 2023).

While public school education is, by law, free of cost in Cambodia, parents must pay for school uniforms, materials, and transportation, which may be challenging for poor households. Although most villages have primary schools nearby, some are far from secondary schools, making attendance difficult. Cambodian state school teachers are paid a relatively low salary (\$292 per month) (Khmer Times, 2023a), and, as a result, state school pupils often have to make daily unofficial payments directly to their teachers to attend

²¹ 2.9% of GDP (UNICEF, 2023:10).

school, as well as extra payments to get school work marked or sit exams (Hammond, 2018).

In a national survey of attitudes to residential care in Cambodia that spoke to both families and those working in the child welfare and children's residential care sectors (MoSVY, 2011), 91.9% of parents interviewed agreed that a low-income family should send their child to an orphanage if they cannot afford these unofficial school fees. Primary school education fees account for 26.5% of non-food spending among the poorest Cambodian households (World Bank, 2005). Faced with this reality, some Cambodian parents place their children in residential care as their best hope of maintaining school attendance and securing a better future for their children. Most residential centres for children in Cambodia ensure that the children in their care attend school. They may also provide extra classes, school materials, and sometimes the opportunity to pursue further education at vocational training centres or universities (Carpenter, 2021).

It has been found that community attitudes towards residential care for children from poor families are relatively positive, including among parents and local government staff working in child welfare. According to the *Study on Attitudes towards Residential Care in Cambodia* (MoSVY, 2011), most caregivers and local authority official participants thought that a low-income family should send a child to an orphanage for education if they cannot afford to pay for it. A government-commissioned survey on community perceptions of residential care found that faced with the financial costs of education, *'with the best intentions, families choose to place their children in residential care, in the hope that it will offer a path out of poverty'* (MoSVY, 2011: 17). The survey also found that missing out on education was perceived by participants as creating a cycle of poverty. Many viewed the educational support offered by residential centres as a way to break out of this trap.

Child care deinstitutionalisation strategies in Cambodia (MoSVY, 2018; MoWA, 2017) emphasise the importance of dispelling the 'myth' (MoSVY, 2011; Coram, 2017) that placing children in residential care is academically beneficial. However, some research suggests that residential children's institutions in Cambodia do meet certain needs of the children. Among the teenage children living in residential care who participated in Stark et al.'s (2017) national estimation of children in residential care institutions in Cambodia, high levels of school attendance and literacy were reported, as well as high levels of reported safety and trust. Although a matched comparison group was not included in the Stark et al.

(2017) study design, the interview data from older children suggested that for some indicators, children in residential care may be doing better than their community peers in the lowest wealth categories, especially in terms of literacy and educational achievement. Findings similar to these were also found in research from India (Whetton et al., 2014), China (Hong et al., 2011) and Kenya (Braitstein et al., 2013), and underscore the need for more research in this area.

In addition to these universal challenges, socioeconomic and ethnic disparities in educational outcomes have been observed. For instance, students who speak a minority language at home (e.g. Vietnamese) are more than twice as likely to have a low performance than students who speak Khmer at home (OECD, 2018), while students from the wealthiest 20% of households are four times more likely than those in the poorest 20% to complete secondary education (UNICEF, 2023:10). As described above, Cambodia lacks social safety nets or a state welfare system that can support children from low-income families, and local and international NGOs often provide residential care for children to fill this gap in children's services. Whilst a range of factors, including re-marriage, migration and substance misuse, contribute to the prevalence of low-income families placing their children in residential care, the most commonly cited reasons are the interlinked factors of access to education and poverty (Bianchi et al., 2021; Ems & Mnjokava, 2022; Romanowski, 2022).

2.4.3. Children's residential care as a response to poverty

Orphanages have historically been used as a response to poverty, with difficulties in meeting children's basic needs often cited as the primary reason for families placing children in orphanages globally (Bilson & Cox, 2007; Ojo et al., 2022). Morton (2000) examined data from the Great Depression in the United States, reporting that over 240,000 children were placed in foster care or orphanages in 1933. The documents analysed in Morton's study highlight that while residential care for children was recognised as sub-optimal over one hundred years ago, it was deemed necessary in the circumstances. The White House Conference on Dependent Children in 1909 stated, *"Except in unusual circumstances, the home should not be broken up for reasons of poverty"* (Morton, 2000:438). Morton's study places today's child care deinstitutionalisation movement historically. It reveals how particular socioeconomic contexts can influence an increased reliance on out-of-family care and orphanages due to pervasive poverty. Despite a policy-

level consensus that family preservation was preferable, the economic turmoil and social dislocation of the period made an increased reliance on orphanages acceptable and even valued for its role in preventing homelessness and destitution among large numbers of children, even as longer-term policy shifts aimed to reduce dependence on institutional care.

Moving forward to the 21st century, Delauney and Germain (2012) examined the circumstances leading to the placement of 764 children across 40 residential centres in Madagascar. One-third of these children were found to have been abandoned or orphaned, while two-thirds of the children were still in contact with a birth parent who had voluntarily placed the children in a residential care centre for economic reasons. Pointing to increases in the number of residential centres in Madagascar, Dunn et al. (2003) argue that philanthropic funding from foundations, private associations, and international donors has led to the emergence of a 'social market' for children's residential care in Madagascar, which is now well-established in a context of poverty and high social demand. They further argue that the existence of this social market has led to residential children's institutions expanding their original mission in child abandonment and orphan care to respond to poverty and family breakdown.

Escaping poverty, meeting basic needs and seeking educational opportunities are consistently reported as the primary reasons families place children in residential care in Cambodia and other low and middle-income countries (Bilson & Cox, 2007; Goldman et al., 2020; MoSVY, 2011; MoSVY, 2016). In the Cambodian context, a mapping study in 2016 found that an estimated 406 children's residential institutions accommodated 16,579 children (MoSVY, 2016). Another national enumeration conducted the following year by Columbia University estimated that 48,775 children were living in RCIs in Cambodia (Stark et al., 2017).²²

²² This is probably an over-estimate resulting from the methodology selected for the survey. The stratified random sampling method used is designed for population-level estimates, but, in the context of residential care in Cambodia fails to take account of the uneven distribution of centres, with most orphanages clustering in just three locations (Phnom Penh, Siem Reap and, to a lesser extent, Battambang). In a supplementary methodological paper describing the methods used to estimate the number of children outside of households (Stark et al., 2016) the authors describe how the statistical model used purposively over-sampled from communes identified as having high numbers of residential children's institutions and then 'assum[ed] that

the trends detected within the 24 sampled communes [were] applicable to all districts [in Cambodia]' (Stark et al., 2016:1). In my view this is an erroneous assumption.

Residential centres for children in Cambodia are diverse in both purpose and operation, making it difficult to generalise about them. For instance, in a context where public services are minimal, some centres are long-established and socially embedded, providing essential, otherwise unavailable support to children with disabilities and sensory impairments and their families (Nishio, 2019). In contrast, other centres may be education-focused, often operated by overseas Christian groups with evangelical aims.

The capacity and quality of these institutions vary significantly; some are well-funded and deliver essential services to a high standard, while others struggle with inadequate resources and expertise, sometimes exposing children to abuse and exploitation (MoSVY, 2011; Miller & Beazley, 2022). While some centres prioritise the welfare of children by offering strong social work support, regular family contact, and strategies for family reintegration, these are generally the exceptions (BCN, 2014). Despite their differences, what all residential centres in Cambodia share is that they rely on overseas donations for funding (Carpenter, 2021; Jordanwoord, 2016a).

Many residential children's centres in Cambodia have been established by well-intentioned but inexperienced foreigners, motivated by the evident poverty they encounter and the belief that establishing a children's home is an appropriate and effective response. Historically, the lack of clear policies and a permissive regulatory environment has facilitated the proliferation of residential children's institutions in Cambodia, making it administratively straightforward to open and operate these centres. Regulatory strengthening as part of the country's deinstitutionalisation campaign (MoSVY, 2016) has, to some extent, addressed this factor, and a moratorium on the opening of new children's residential centres has been in place and enforced since 2018 (MoSVY, 2018).

The motivations of the overseas founders, funders, volunteers and supporters of residential centres in Cambodia are as diverse as the institutions they support. Some donors prefer funding orphanages due to a distrust in the financial integrity of local families. Other motivations include opportunities to perform altruism, address perceived service gaps, seek novel experiences, or support a belief that local families are either unable or unwilling to care for their children (MoSVY, 2011). Additional motivations may include connections to inter-country adoption or religious conversion. Utilising the concept of 'altruistic exploitation' to highlight the complexity of the dynamics at play, Rotabi et al. (2016) describe an iatrogenic dynamic, whereby overseas volunteers and donors are often

exploited in fulfilling their altruistic intentions while at the same time potentially exploiting and harming the very children they seek to help. In addition to fueling the growth of orphanages and potentially provoking unnecessary family separation, other risks associated with this reliance on orphanages as a response to poverty include children's exposure to increased risk of abuse and exploitation and health and developmental deficits (see Section 2.2).

2.4.3.1. The orphanage business

A category of residential centres highlighted in the literature is those established primarily for profit (MoSVY, 2011; Nhep, 2021; Van Doore, 2020). These institutions rely on foreign donations and often integrate international volunteering opportunities as a revenue stream, charging fees for placements and fostering relationships with overseas donors who can offer long-term financial support. This dependency on international support has led many centres to engage in so-called orphanage tourism, which potentially has adverse effects on children, families, communities, and the wider society, as well-documented in research (Butcher & Smith, 2015; Conran, 2011; Guttentag, 2009). Nhep (2021) interviewed twenty-one orphanage Directors in seven countries. In most cases, the Directors reported that the roles filled and activities conducted by international volunteers were largely non-essential and redundant in the operation of the residential care institutions. The primary utility of volunteers highlighted by participants was fundraising. Other studies indicate that some centres maintain poor living conditions deliberately to elicit more sympathy and donations from visitors (Jordanwood, 2016). Furthermore, children sometimes participate in fundraising activities such as performing traditional dances for tourists (Miller & Beazley, 2022; van Doore, 2020). A 2014 survey of 62 registered children's residential centres in the Cambodian tourist town of Siem Reap found that 61% offered volunteer interactions with children, yet only 23% displayed child protection policies or required police background checks for volunteers (BCN, 2014). The debate around volunteer tourism is extensive in the literature. It has its roots in post-colonial studies and the way that colonialism continues to shape relations between the global north and south through explicit and implicit economic and cultural mechanisms, of which unqualified and inexperienced tourists from high-income countries volunteering to 'help' children in low-income countries is an example (Butcher & Smith, 2015). In the context of orphanages run as businesses in popular tourist

destinations such as Cambodia, Kenya (Wang, 2022), and Nepal (Punaks & Feit, 2014), scholars identify commercial volunteer tourism as a vector of neoliberal expansion that

reinforces the representation of low and middle-income countries as underdeveloped and legitimises the intervention of the 'developed world' as a means for the global south to catch up with (Western) modernity (Benali & Oris, 2020).

A recent development in the voluntourism and child care deinstitutionalisation literature is the identification of orphanages in some low and middle-income countries as sites of modern slavery due to the demand for volunteering experiences created by visitors and tourists. From this perspective, the commodification of orphanages constitutes the children placed in orphanages as trafficking victims and calls for volunteering in orphanages to be criminalised (Van Doore, 2020; Nhep, 2021). However, while effective as an advocacy tool, the use of the term 'modern slavery' in this context is seen by some scholars as potentially limiting, as it fails to capture the multiple perspectives, complexities and ambiguities of the issue (Benali & Oris, 2020; Carpenter, 2020). Benali and Oris (2020) researched an orphanage in Nepal from a critical perspective that emphasised the agency of local orphanage owners, parents and children in residential care and education dynamics. Their findings question the assumption that the orphanage business and some use of children as attractions to support fundraising for their education are necessarily negative or representative of a form of modern slavery. Carpenter (2020) argues that *'while the language of modern slavery is effective for advocacy, it fuels the policy pendulum swings of the scandal-reform cycle, leaving little space for non-ideological approaches that encompass a range of available options that are sensitive to local conditions, and that take into account the specific circumstances of individual children and families.'* (Carpenter, 2020: Abstract)

The rapid growth of these kinds of 'orphanages' or residential centres in Cambodia up until 2021 has been linked to what some call the 'orphan-industrial complex', a dynamic where children, usually not orphans, are actively recruited from low-income families by residential care centre staff to attract foreign donations (Cheney & Ucembe, 2019; Miller & Beazley, 2022). This orphanage business model has been notably effective in Cambodia, drawing substantial financial support from international donors and tourists (USAID, 2012; Guiney & Mostafanezhad, 2015), and has been identified as contributing to the growth of orphanages in the country over the past twenty years despite declining numbers of orphans (MoSVY, 2016). This trend continued up until 2021 when the COVID-19 pandemic caused

the collapse of Cambodia's tourism sector. Accounts provided by participants in this study highlight that this collapse was reflected in the sudden and widespread closure of many

residential children's centres. At the time of writing, no post-pandemic assessments or audits of the orphanage sector in Cambodia were available in the public arena.

This review of the literature concerning children's residential care in Cambodia revealed a media and research emphasis on international voluntourism and the extension of that perspective into anti-human trafficking and modern slavery narratives. A disproportionate focus on these topics could potentially divert attention and resources away from drivers of family separation more frequently identified in the empirical research literature, namely, access to education and poverty. Studies worldwide have shown that economic hardship is the most common reason low-income families relinquish children to care institutions (Goldmann et al., 2020; Nelson & Berens, 2015). The relative lack of research on improving family income in the child care reform literature risks undermining the understanding that most children in orphanages are there due to their families' financial inability to care for them. In the following section, I review the literature exploring strategies for preventing family separation and children's admission to residential care.

2.5. Strategies for supporting families and preventing separation

While poverty is not the only factor leading to the separation of children from their families, it frequently serves as a key driver. It interacts with other factors to destabilise families and increase the likelihood of separation. Therefore, prioritising economic interventions in family support programs is crucial. These interventions aim to prevent family separation and facilitate reunification by enhancing family income within the context of individual psychosocial support using a strengths-based case management approach (Brun & Rapp, 2001). The following section reviews the literature on household economic strengthening (HES) interventions and income support cash transfers to support families and keep children living at home.

2.5.1. Household economic strengthening and social protection

Low and middle-income countries have increasingly embraced social protection and cash transfers as key elements of poverty reduction and social protection strategies (Barrientos, 2013; Hanlon et al., 2010; ILO, 2014). This trend has been extensively researched, with

studies indicating that social protection payments can significantly alleviate economic vulnerabilities and mitigate stressors contributing to family pressures and separation (Barrientos & Hulme, 2016; Deveraux & Sabates-Wheeler, 2007; Evans et al., 2020; Fiszbein

& Schady, 2009). Bastagli et al. (2019) analyzed evidence from 165 studies to assess the impact of cash transfers on 35 indicators, such as monetary poverty, education, health, and employment—factors that are closely linked to common causes of family separation (Laumann, 2015). Most studies reviewed showed progress and improved scores against these indicators for participants in cash transfer programs. The evidence consistently shows that cash transfer receipt leads to increased household and food expenditure, decreased poverty measures, and increased school attendance, reinforcing positive impacts at the child and family levels.

Critiques of cash transfer payments for low-income families often focus on program design, implementation features, and the ethics of making payments conditional (Ladhani, 2020). Bastagli's (2019) review found that conditional transfers did not necessarily achieve the desired outputs, such as increased school attendance or healthcare visits, and the evidence on conditionality remains mixed. The effectiveness of cash transfers is influenced by implementation issues, targeting efficiency, and the size of the transfers (Hagen-Zanker et al., 2011; Molyneux et al., 2018). Larger transfer amounts are associated with better educational outcomes, and cash transfers do not discourage parental employment (Bastagli et al., 2019). In Cambodia, the implementation of social protection cash transfers has been relatively recent. Before 2019, Cambodia's spending on social assistance was only 0.3% of GDP, with limited coverage and fragmented provision that largely excluded the fast-growing urban population (Hansen & Gjonbalaj, 2019).

The ID Poor system, driven by the Health Equity Fund programme, has been a key driver in establishing a social protection framework. This system uses a multi-dimensional poverty framework to identify low-income households for inclusion in various social protection programs, which have shown some success in addressing poverty.

The COVID-19 pandemic highlighted the potential of the ID Poor system, allowing for a rapid response to the crisis by extending cash transfers to include the 'near poor' and providing critical support to millions of vulnerable citizens (ADB, 2022). By 2022, 550,000 households were eligible for the program, demonstrating its capacity to deliver aid efficiently during emergencies. Despite the pandemic's end, cash transfer payments have continued, with efforts underway to develop the system into an integrated social protection program known as the Family Package (Narith et al., 2023).

Evidence explicitly addressing the role of social protection and cash payments in preventing family separation is limited. Laumann (2015) argues that social protection cash transfers can help address poverty as a significant driver of family separation, citing evidence that unconditional cash transfers through government-led programs can reduce family separation (Barrientos et al., 2013; Thompson, 2012). However, cash transfers' causal mechanisms and contributory effects on child-level outcomes remain poorly understood.

2.5.1.1. Household economic strengthening

Poverty is widely recognised in the literature as a significant factor driving family separation, highlighting economic interventions aimed at alleviating poverty as critical in strategies to prevent such separations (Chaffin et al., 2014; Wedge, 2013). While some studies were found examining the impact of social protection payments on children's education in households (Adato & Bassett, 2012; Chaffin, 2011), specific evidence on the effects of other household economic strengthening (HES) interventions on the prevention of family separation and other aspects of children's well-being in low and middle-income countries is limited.

The concept of household economic strengthening (HES), while lacking a universally accepted definition (Laumann, 2015), refers to a broad range of interventions designed to enhance the economic stability of households. This diversity in approaches includes financial support mechanisms such as loans and grants, assistance for small business startups, agricultural extension services, vocational skills training, and employment support, including job placement and soft skills training. These interventions are designed to enhance households' economic stability and capacity. According to Markel and Getliffe (2015, in Laumann, 2015), household economic strengthening interventions align with sustainable livelihood approaches and primarily aim to reduce extreme poverty and vulnerability. Unlike systemic, government-led social protection and cash transfer programs, household economic strengthening interventions emphasise income generation and developing economic assets, skills, and capacities. The increasing recognition of the importance of tailoring income-generating interventions to individual household circumstances (Laumann, 2015; Baumann et al., 2019; Namey & Laumann, 2019) further underscores their diverse nature. However, measuring the effects of these interventions on particular outcomes for children remains a challenge (Namey & Laumann, 2019). The

lack of studies linking household economic strengthening activities to reduced family separation highlights the potential value of further research in this area.

USAID's ASPIRES (*Accelerating Strategies for Practical Innovation and Research in Economic Strengthening*) program (Namey et al., 2018) has been instrumental in generating evidence, developing strategies, and disseminating findings that integrate economic strengthening into initiatives aimed at improving child health and well-being among families in extreme poverty. The evidence from studies and evaluations of projects conducted under this program indicates that economic strengthening can positively affect family functioning. Specifically, it has been shown to support the successful reintegration of children back into their birth families and those at risk of separation, enhancing their stability and resilience (Laumann, 2015). For example, as part of the ASPIRES programme, Namey and Laumann (2019) evaluated the impact of two economic strengthening programmes in Uganda. Both programmes used a case management approach to deliver a range of economic strengthening interventions (e.g. financial literacy training, cash transfers, access to village-based lending and savings schemes, business skills training in groups, and one-to-one, small business start-up support) as well as psychosocial interventions (e.g. parenting skills training, community dialogue and recreational activities). Participating households demonstrated an increased ability to pay for food, purchase household items, invest in business, and be resilient to financial shocks. The authors also report that the interventions positively prevented family separation. However, the details and methodologies of these evaluations are not comprehensively presented, and limitations due to the complexity of the causal pathways involved are acknowledged:

‘While it is not possible quantitatively to tease out attribution of specific outcomes to specific activities, the general improvement of at-risk households across indicators of economic status, family and social well-being, and child protection for most categories of participants suggests that economic strengthening activities do have a role to play in preventing family separation. The qualitative data corroborate this finding.’ (Namey & Laumann, 2019:9)

A handful of scholars have sought to consolidate the evidence on the effectiveness of HES interventions in preventing family separation (Chaffin et al., 2014; Laumann, 2015; Namey & Laumann, 2019). Chaffin et al. (2014) examined the impacts of economic strengthening initiatives in the context of the reintegration of children to their birth families after a period

in residential care. Their literature review and key informant interviews highlight several fundamental implementation principles for using household economic strengthening

programmes to prevent family separation and support family reintegration successfully.

These included:

- Assessing the economic condition of the family and the child within the family to identify appropriate strategies to support financial, social and familial goals.
- Conducting a local market analysis before determining the type of skills training to provide or what kinds of small businesses should be supported. Household economic strengthening programmes should build upon economic activities already existing in the community.
- Incorporating children and their caregivers' participation into all stages of the programme cycle, including assessment, programme development, monitoring, and evaluation.

Chaffin et al. (2014) advocate for a contextualised and adaptive approach to household economic strengthening through individualised case planning, ongoing follow-up, and collaboration between families and social workers. This approach underscores the social worker's role in aiding families at risk of separation due to poverty.

Supporting this view, Moret and Ferguson (2018) evaluated a project to prevent family separation in East Africa. They found that the most effective approach, partly evaluated using a '*Progress out of Poverty Index*' score.²³, drew on a package of 'wraparound' services, including case management and home visits for counselling, psychosocial support, assistance resolving conflicts, and referrals to other services delivered in combination with cash transfers to support meeting basic needs such as food and school costs. Participating practitioners reported that family separation was reduced in the intervention communities. However, they were unsure why and, partly due to the low level of cash provided to families, did not agree on whether cash transfer recipients could meet their basic needs either while receiving or after receiving the payments. This finding suggests that the psychosocial elements of the programme may have contributed more to keeping families together than cash transfers.

My reading of the literature on household economic strengthening in the context of child care and support to low-income and marginalised families indicated a potential capacity

²³ Based on the answers to 10 country-specific questions about a household's characteristics, this Grameen

Bank-developed tool calculates the likelihood that the household is living below the poverty line.

gap in providing comprehensive care packages. Typically, child welfare and family issues fall outside the expertise of agencies and practitioners focused on employment and livelihoods. Meanwhile, most child and family social workers possess limited experience or technical capacity to design, advise and support small businesses and other economic interventions, which, by their own accounts, limits their ability to build the economic capacity of families (Chaffin et al., 2014). Except for one study (Katz et al., 2014), none of the reviewed evaluations generated as part of USAID's household economic strengthening- focused knowledge-generating ASPIRES programme included findings exploring the role or experiences of those NGO social work staff who typically deliver household economic strengthening activities. Katz et al. (2014) identified a gap in social workers' self-reported knowledge and skills when investigating the effects of household economic strengthening activities on child well-being and protection in Uganda. Underscoring the need for a holistic approach to family support, their findings also highlighted that while improvements in financial stability and livelihoods might enhance children's physical well-being, these gains do not necessarily translate into better psychosocial well-being. The authors argue that household economic strengthening policies and programs must also address vulnerable children's and their caregivers' social and emotional needs. While improving the economic circumstances of households is crucial for mitigating the effects of poverty, especially among marginalised families, this approach alone is often insufficient to ensure the social and emotional well-being of children.

Drawing together the existing research, Namey and Laumann (2019) concluded that solely economic interventions are often inadequate for ensuring family preservation. Instead, a more holistic approach is necessary, which should include a variety of strategies involving multiple stakeholders. This approach requires comprehensive case analysis and management tailored to individual family circumstances. Laumann (2015) emphasises integrating participatory and psychosocial strategies with economic support measures to enhance family income. She proposes that program intensity should be adjusted based on the particular needs of each family. Adequate support should include a household-level assessment to establish specific objectives and provide targeted support over a sustained yet finite period. Additionally, the involvement of parents and children in planning and decision-making is crucial, along with agreeing on a plan that addresses the family's specific priorities, resources, vulnerabilities and capacities.

In conclusion, while income poverty is widely recognised as a primary factor contributing to family separation and orphanage placement in low—and middle-income countries, limited empirical evidence identifies the mechanisms or demonstrates the effectiveness of various household economic strengthening interventions in preventive strategies. However, existing studies emphasise the importance of integrating income-generating interventions within a broader individual case management framework to enhance their effectiveness.

2.5.2. Social service workforce strengthening and individual case management

The delivery of public services in low- and middle-income countries—including education, health, and social services—is inherently complex and challenging. Effective social service delivery requires adequate financing, robust leadership at the national level, delegation of responsibilities to local authorities and communities, a skilled and motivated workforce, and collaborative partnerships with both international and local non-governmental organisations for funding and implementation. A review of international research on social service delivery in the global south by Ibrahim (2017) highlights the critical role of universal and decentralised public services in improving effectiveness and access for the poorest citizens. The literature frequently highlights poor governance and management as significant barriers to efficient public service delivery in many low- and middle-income countries. These barriers include weak institutions, insufficient funding, patronage and systemic corruption. Studies such as those by Fronek et al. (2019) and Theam (2015) specifically identify these issues in Cambodia. Ghai (2003) emphasises the role of state leadership in overcoming these challenges. He argues that the obstacles to effective welfare service delivery extend beyond financial constraints. Strengthening governmental capacities in planning, organising, implementing, and monitoring social service programs is also required. According to Ghai (2003), strengthening state capabilities is key, as there is no substitute for strong governmental leadership in ensuring effective service delivery.

In their review of the literature on social service systems in low and middle-income countries, Crea et al. (2018) note with concern that while systems strengthening has long been a topic of attention in global health, there has been a lack of academic or policy attention to similarly developing social service systems. The literature review revealed an academic and policy focus on specific areas of social service provision, particularly child protection systems strengthening in Cambodia and other low and middle-income countries

(Ellermeijer et al.; 2023; UNICEF, 2008), with a dearth of literature on other areas of social work provision such as household economic strengthening, counselling and other psychosocial approaches. This highlights the need to strengthen social service systems to provide a comprehensive approach that addresses children and families' multifaceted strengths and vulnerabilities. Noting advances that have been made to conceptualise specific elements of a more comprehensive social service system in low and middle-income countries, most notably in the area of child protection (UNICEF, 2008; Wessells, 2015), Crea et al. (2018) note that *'the field has been slow to articulate an integrated perspective of strengthening social service systems that incorporates related issues such as child protection and social protection into a more holistic framework. The situation is [further] complicated by a lack of consensus on essential [social service] system components and definitions.'* (Crea et al., 2018:305).

The literature review by Crea et al. (2018) underscores the lack of consensus among practitioners and academics regarding the essential elements of social service systems and disagreements about terminology. Some respondents advocate for universal services designed to serve all citizens irrespective of their circumstances. In contrast, others believe that in low-resource settings, social services should be targeted at the most vulnerable and marginalised groups. This division highlights differing service delivery approaches in contexts with limited resources. However, Crea et al. (2018) note broad agreement on the importance of social services being contextualised and that social service systems should reflect the cultures and societies they serve and be, in turn, shaped by those who request and receive services. In the area of safeguarding, the authors also note a move away from informal and indigenous systems of child protection towards an increased professionalisation of the child protection system and workforce and an associated emphasis on monitoring and evaluation, particularly from donors and funding agencies.

Reflecting on my reading of the literature and in the context of providing holistic support targeted at socially or economically disadvantaged individuals and families at risk of separation in low- and middle-income countries, I suggest a basic framework for a holistic social service model should include the following:

1. **Tailored family support** identified and addressed via social worker visits, psychosocial approaches, individual care planning and support to access health, education and other services.

2. **Household economic strengthening** and support to access social protection schemes to bolster economic well-being and resilience.
3. **Child protection** through the prevention of and response to child abuse or exploitation.

Global recognition that social service activity encompasses not only the social work profession but also the broader social service workforce, defined as “*a variety of workers—paid and unpaid, governmental and nongovernmental—who make the social service system function and contribute to promoting the rights and ensuring the care, support, and protection of vulnerable populations*” (Global Social Service Workforce Alliance (GSSWA), 2015:5), has resulted in international mapping exercises to understand better the situation of the social service workforce and a policy focus on social service workforce strengthening initiatives, especially in low- and middle-income countries (Baltruks et al., 2017; Martinez et al., 2018; Schmid, 2018). Akesson and Canavera (2017) spoke to social service researchers and practitioners worldwide. Their study participants identified contextualisation, resource availability, and access to quality training as key factors to consider in the ongoing efforts to strengthen and professionalise social services globally. Supported by major international donors like UNICEF and USAID, the global movement to strengthen the social service workforce underscores several needs. These include enhancing the conceptual clarity of the social workforce and its roles, effectively communicating its value to society, addressing the persistent inadequacy of government funding, and reducing the dependence of many low- and middle-income countries on external donors. To achieve this, the Global Social Service Workforce Alliance recommend providing government decision-makers with a clearer and more compelling case for increased budget allocations. Promoting and prioritising indigenous social work knowledge is also highlighted as necessary to counter professional imperialism (GSSWA, 2023).

These globalised aims are reflected in Cambodia’s *Strategic Plan for Training Social Service Workforce 2021 – 2025 (Focus on Child Protection)* (MoSVY, 2021). In the context of this study, attention is drawn to the child protection focus of both this document and the *Guidelines on the Basic Competencies for the Social Workforce in Cambodia* (MoSVY, 2019). Both documents highlight responding to violence against children, educating and changing the behaviour and attitudes of parents and reintegrating children into their birth families as prioritised social work tasks. Neither of these road maps for shaping the development and delivery of family support services refers to household economic strengthening or

family-level income-enhancing interventions constituting part of Cambodia's social work role.

In their comprehensive review of child care deinstitutionalisation, Goldman et al. (2020) draw upon the key recommendations from the *United Nations General Assembly Resolution on the Rights of the Child* (UNGA, 2019), which focuses on children without parental care. The resolution commits to strengthening family care, addressing the root causes of unnecessary family separation, and ending child institutionalisation by shifting towards family—and community-based care solutions. This includes addressing factors such as orphanage volunteering that support institutionalisation. Goldman et al. (2020) particularly emphasise supporting families to prevent separation. The UNGA (2019) urges member states to fortify family-centred policies, including childcare and parenting support, recognise that the complex process of family reintegration requires preparation and follow-up, and address separation drivers by providing high-quality services (Goldman et al., 2020:607).

Adding operational detail to these overarching goals, Goldman et al. (2020) advocate for a 'case management' approach, also recommended in Cambodia's guidelines for social services and ten-year action plan for strengthening the social workforce and training social workers (MoSVY, 2019; 2021). Case management involves an individualised approach tailored to children and families at risk of separation or those reintegrating a child after residential care. This approach entails trained social workers developing, implementing, and monitoring personalised plans based on thorough assessments of the child and family's circumstances in collaboration with the family.

OSCaR²⁴ is a case management system developed in Cambodia as part of the USAID-funded child care deinstitutionalisation initiative, Family Care First (FCF). This online tool supports case management by centrally storing information such as assessments, care plans, and follow-up recordings. Goldman et al. (2020) highlight the system for its co-design with local social workers, its usefulness in helping social workers '*keep up to date with case notes and . . . tasks*' (Goldman et al., 2020:626) and the ability of OSCaR to aggregate data from all agencies using the system to improve monitoring and evaluation. While the authors report that '*this web-based mobile application is changing how workers in Cambodia monitor*

²⁴ Open-Source Case Management and Record-Keeping) System.

cases' (Goldman et al., 2020:626), my experience working with NGOs using the system invites a more qualified assessment. While OSCaR has been available for over ten years, only 30 Cambodian NGOs are currently using it, a relatively small number in light of the hundreds of child-focused NGOs operating in Cambodia. NGOs pay an annual fee of 2,000 Khmer riels²⁵ per case to use OSCaR,²⁶ making it financially unsustainable for some NGOs, particularly those working with thousands and, in some cases, tens of thousands of families. While NGO and government social workers in Cambodia work closely together on critical tasks such as child protection intervention and family reintegration, OSCaR is incompatible with the government's social service database, resulting in an information-sharing bottleneck. Finally, political analysts have noted the prevalence of complicated, opaque and inefficient bureaucratic systems across Cambodian government departments (Springer, 2015). My own professional experience in Cambodia supports this observation. For example, reintegrating a child from a residential centre to their family involves completing more than ten separate government forms.²⁷ While this in itself is not necessarily a 'bad thing', several researchers have noted that Cambodian social workers' completion of '*onerous reporting requirements*' (Fronck et al., 2019) does not reflect an equally strong commitment or capacity to carry out basic social work tasks such as investigating child protection concerns or conducting welfare checks after reintegrating a child to their family. In this operational environment, there is a risk that social workers may conceptualise 'case management' as a bureaucratic and managerialist practice. This perception and experience can lead to a deprofessionalised form of social work, where routines focus on filling out forms and recording data. Consequently, social work's interpersonal and relational aspects may be undervalued, regarded as lower-level tasks, and either delegated to paraprofessionals or neglected entirely.

2.5.2.1. *Relational social work*

Emerging from psychoanalytic thought of the 1980s and 1990s, the 'relational social work' approach (Borden, 2000; Folgheraiter & Raineri, 2017) draws on various theoretical concepts developed initially by Adler, Jung and Otto Rank (Pozzuto et al., 2009) to develop

²⁵ 50 US cents.

²⁶ OSCaR was developed by the Cambodian NGO Children in Families with technical support from Save the Children International. The development and roll-out of OSCaR was funded by USAID (USAID, 2024). The fees for using OSCaR are paid to the NGO Children in Families (personal correspondence).

²⁷ Personal communication with Cambodia social workers.

an approach to social work that recognises that relationship, interdependence and community are essential to human health and well-being and that the relationship between the psychoanalyst (or social worker) and patient (or client) is instrumental to the helping process.

Folgheraiter and Raineri (2017) argue that technical and professional *'expertise derived from scientific knowledge is only one of the factors - and not the most important - in determining the effectiveness (measurable or otherwise) of professional helping practices. When a social work intervention [has] a certain effectiveness, it has occurred above all because the people involved in the helping relationship have 'taken each other by the hand' and together generated . . . a specific additional human energy . . . which gradually, and unpredictably, alters the situation.'* (Folgheraiter and Raineri, 2017:2)

The relational social work perspective elevates the nature of the helping relationship and emphasises the social workers' ability to establish and maintain this relationship. The psychoanalytic perspective is often characterised as unscientific, sociologically naive, culturally biased and reductive by commentators working outside of the paradigm (Goldstein, 2002; Tolleson, 2009), with social work scholars questioning its relevance to the pragmatic concerns of the profession. Borden (2000) argues that these perspectives are, to some degree, based on outdated understandings that fail to include the diversity of relational and social concerns of contemporary psychoanalytic theory. In addition to highlighting that relational social work is contextually based, Tosone (2004) notes several similarities between social work and psychoanalysis and suggests that the therapeutic relationship is the essential catalyst for client change, and 'success' in the process is predicated on the social worker (and client's) ability to engage in a professional helping relationship based on trust.²⁸ A deficit model of social work practice assumes that because a need for help or support has arisen, the individual, family or community require the assessment of weaknesses to identify the 'root causes' of their 'problem' in order to apply remedial interventions. A relational approach de-emphasises this backward-looking and investigative orientation. Contrary to positivist or clinical traditions, relational social workers *'do not seek technically to repair a disaster that has already happened'* (Folgheraiter and Raineri, 2017: 5). Relational social work suggests instead that a forward-facing emphasis is placed on capacities to achieve change and harness the potential of

²⁸ This is not to suggest that the relationship is the *only* effective element in social work interventions.

social networks and communities (for example, through the therapeutic relationship, friends and family, peer support groups or community-based or led services) to realise that change. While this kind of conceptualisation was not found in the literature associated with social work strengthening or deinstitutionalisation in low and middle-income countries, and the social work literature more broadly rarely considers theoretical or practical overlaps with psychoanalytic theory and practice (Borden, 2000), the elements of a relational approach to social work described above are reflective of the accounts of valued social work experiences provided by Cambodian participants presented later in this study.²⁹

The following sections consider the literature on the effects of migration and the use of childcare and daycare services to prevent family separation.

2.5.3. Employment, migration and family support

2.5.3.1. Labour migration and children of migrant parents

With its high level of cross-border migration from lower-income or conflict-affected countries such as Cambodia and Myanmar to wealthier neighbours such as Malaysia and Thailand, Southeast Asia has become a focal point for global labour migration policy (Molland, 2024). The United Nations *Global Compact for Safe, Orderly and Regular Migration* (United Nations, 2019) emphasises the importance of safety in migration processes and promotes state-sanctioned migration pathways (United Nations, 2019). The document's frequent use of the phrase 'safe, orderly, and regular migration' signals a shift in policy focus. Previously, the global migration policy emphasis was on issues such as human trafficking and criminality (Keo et al., 2014). The new focus aims to formalise and ostensibly enhance both the state-level management and the safety of migrants in cross-border labour flows. In line with this orientation, numerous international and local aid agencies actively promote safe migration through programs that discourage irregular migration and ensure migrants have the correct documentation, such as visas and work permits. Molland (2021) notes that the previous emphasis on anti-trafficking has gradually lost momentum in discourse and practice, reflected in reduced program activity and funding (Molland, 2021). The review of the literature indicated that while current international migration policy and discourse, informed by the 2019 United Nations compact, enjoys a high level of state and public attention, it focuses on the governance and

²⁹ See Section 6.2.3

safety of the migration process and does not concern itself with the broader impacts of migration on communities, family structures, and child welfare (United Nations, 2019). This circumscribed arena suggests the need for a broader, more holistic, cross-cutting approach to migration policies that incorporate these critical social dimensions.

In examining policy responses to internal rural-to-urban migration in China, Wen and Hanley (2015) identified a lack of policy and programming addressing the impacts of high parental migration on families. They concluded that a lack of tailored social support leaves migrant Chinese families vulnerable when coping with the social, cultural, and economic disruption resulting from mass labour migration. With large numbers of children left in the care of grandparents in rural hometowns and villages while their parents migrate to the city for work, research attention in China has focused on the adverse developmental, educational, social and emotional effects of this parental separation on 'children left behind' (Fellmeth et al., 2018; Givauden, 2013). Growing concern about the social costs of migration, particularly its effects on the children of migrant parents, has resulted in the Chinese government calling for '*the strengthening of protective work for rural children left behind*' (State Council 2016 in Guan & Deng, 2019).

Whilst most studies reviewed focused on the challenges children of migrant parents face (Fu et al., 2017; Zhou et al., 2018), several described interventions and programmes to support these children and their families. The Chinese government has enacted policies to improve the overall welfare of left-behind children, including the provision of scholarships, the construction and upgrading of rural schools (Tan & Bodovsky, 2020) and the strengthening of guardianship laws to ensure that the parents and guardians of children of migrant parents meet their responsibilities (Ge, 2019). Adopting a critical lens, Gu et al. (2022) argue that the challenges faced by these children should be viewed in light of the state's neoliberal-authoritarian governance of the migrant population, which perpetuates a parent-blaming stereotype of 'the pathological family' to account for left-behind children's disadvantages while remaining silent on the structural social and economic factors underlying their situation.

Mao (2020) describes '*The Children's Companion Mother's Programme*' as a promising community-based model for supporting children and adolescents of migrant parents, along

with their caregivers, in Southeast China. This programme was implemented in 213 rural villages selected for their high numbers of children left behind. The programme has three

pillars, known in China as ‘One home, one person, one bond’. ‘One home’ refers to establishing a physical space known as a ‘Children’s Club’ in each village with facilities and resources (e.g. books, toys, sports equipment) to host after-school activities. ‘One person’ refers to selecting a paid, full-time, trained community-based worker in each village to manage the Children’s Club and provide child welfare and caregiver support. ‘One bond’ refers to the model’s cross-sectoral nature, with subnational government authorities, the education department, NGOs and other stakeholders working collectively to address the needs of children of migrant parents and their families. Assessing the impacts of this initiative, Guan and Deng (2019) provide empirical evidence of significant positive outcomes associated with this integrated community-based program for children of migrant parents. In contrast to other studies that identify children left behind as a particularly at-risk group (Fellmeth et al., 2018; Lu, 2012), Guan and Deng’s (2019) evaluation of this project found no significant differences between the needs of children left behind and other children in the villages under study. This finding points towards the model's potential for delivering a broader community-based child and family support system in lower resource settings.

2.5.3.2. Childcare services

This study defines childcare or daycare as any short-term, out-of-home care for children while their primary caregivers are at work. The government, private entities, NGOs, the community, or a combination can provide this care. Childcare services range from simply providing a safe and supervised environment to more structured programs that include preschool education, health, nutrition, and educational components.

High levels of migration and rapid urbanisation are leading to a significant childcare gap in many low- and middle-income countries (Devercelli et al., 2020). As families relocate to urban areas, they often lose access to the extended family networks that traditionally provide support. This shift affects parents, especially mothers, who frequently work long hours in unstable and informal jobs (Nampijja et al., 2024). Additionally, caregivers, predominantly women in developing countries, face the challenge of balancing multiple demands on their time. Women are generally tasked with childrearing and other labour-intensive domestic chores. Beyond these duties, they also engage in non-domestic production activities, including formal and informal labour market activities and agricultural work, resulting in unmanageable and unsustainable overall workloads (Engle

et al., 1997). McGuire and Popkin (1989) characterise this scenario as a zero-sum game, where women can only take on new activities by dropping existing ones or increasing their efficiency.

As urbanisation progresses and female labour market participation grows in many low- and middle-income countries, there is an increasing demand for non-parental childcare. This need is particularly pronounced for women, where combining work and childcare is often not feasible (Leroy et al., 2012). This shift underscores the critical need for supportive measures to help caregivers manage their dual roles in the workforce and at home. According to the World Bank (Devercelli et al., 2020), rapid urbanisation and socio-economic changes in low and middle-income countries have triggered a childcare 'crisis'. While the World Bank report (Devercelli et al., 2020) emphasises the potential role of expanded accessible childcare in improving women's participation in the labour market, community-based childcare also has the potential to benefit children, families, and societies by preventing family separation and providing child health and development benefits (Attanassio et al., 2013; Leroy et al., 2012).

Else et al. (2020) conducted a study in low-income communities in Dhaka, Bangladesh, which revealed a significant demand for community-based childcare. The study found that 84% of the caregivers surveyed in slum areas wanted to access such services. Furthermore, the likelihood of reporting a need for childcare was 3.8 times higher among slum households than non-slum households. Interviews with staff from existing childcare centres highlighted that poor parents needed more or less free childcare with food provided, presenting feasibility and sustainability challenges. Qualitative findings highlighted the impact of the immediate living environment on caregiver's child care practices through a high incidence of children left unsupervised due to parents' long working hours, low social capital and fears for child safety in low-income urban communities. The authors concluded that sustainable childcare provision in this context requires subsidy and careful design sensitive to the working lives of low-income families, particularly women, and must respond to the dynamics of the local environment and community values. Several other studies (Bouguen et al., 2014; Else, 2020) also highlighted the need for community childcare services in low-income communities to consider the particular cultural, familial and

employment contexts and challenges parents and caregivers face and the need for participatory approaches to service design and

delivery. De Wit (2010) similarly argues that direct community involvement is necessary for developing childcare services that meet contextual needs in low-income countries.

In light of evidence from both high-income countries (Baker et al., 2019) and Cambodia (Bouguen et al., 2014) that cheap but poor-quality childcare provision may worsen early childhood development outcomes, Bouguen et al. (2014) highlight the need for childcare staff to be trained and services to be adequately supported and regularly monitored to ensure quality standards. A study conducted in Kenya (Oloo et al., 2023) describes a successful collaborative initiative in which local government actors, NGOs and community members co-designed and implemented a project to improve the standards and safety of local childcare providers operating in three informal communities.

The literature review found examples of studies evidencing positive developmental, nutritional and health outcomes for preschool children accessing formal childcare in low and middle-income countries (Attanasio, 2013; Berlinski et al., 2009; Leroy et al., 2012). However, no studies explicitly assessed the potential of community-based childcare and daycare services in preventing family separation and orphanage placement.

2.6. Summary

This literature review provides substantial evidence of the detrimental effects of separating children from their families and placing them in residential care. It documents the adverse impacts of such care on children's development and well-being and outlines the child care reform and deinstitutionalisation movement that has developed as a response. The literature review also highlights several key drivers of family separation, including the use of residential care as a response to poverty, barriers to children from low-income families accessing education, and disruptions to family life caused by mass migration. The literature reviewed also identifies several promising pathways to prevent family separation, such as social protection payments, household economic strengthening, psychosocial support, individual case management and care planning, and accessible, good-quality childcare services.

Understanding the economic and social factors contributing to family separation in Cambodia is essential for addressing the issue. The literature review underscores the dynamics of a financially driven orphanage sector, underfunded public services, and the perception of education as crucial in helping children from low-income families escape

severe poverty in the context of systemic weaknesses in the public-school system. These elements combine to drive the placement of children in residential children's institutions.

Turning now to the limitations of the current knowledge base regarding the prevention of family separation and children's residential care placement, the literature review reveals a policy and programming bias towards interventions drawn from the transnational child care deinstitutionalisation policy framework.³⁰ This emphasises reducing the number of children living in residential centres and strengthening family-based alternative care services, such as foster care and adoption often through a child protection lens. Reflecting this focus on deinstitutionalisation and reintegration into family-based care, there has been less research, policy and practice attention on preventative family support measures despite widespread agreement on the common drivers of family separation in low and middle-income countries.

The global emphasis on reducing violence against children and changing parental attitudes and behaviours regarding residential care placement does not align with the recognition in the literature that poverty-related issues are the primary factors driving such placements in low and middle-income countries. This discrepancy highlights a significant gap in addressing the root causes of family separation.

2.7. Gaps in the literature

The literature review identifies studies that draw attention to potential strategies to keep families together. However, it also exposes gaps in the evidence base. The diversity and breadth of factors that potentially drive family separation and the placement of children in residential children's institutions present challenges in identifying gaps across all of the relevant literature. Therefore, this section restricts itself to identifying key gaps that align with this study's rationale and aims (see Section 1.4).

Voices of parents and family caregivers

Various African and Asian studies have explored children's experiences in orphanages and residential care settings (Boadu et al., 2020; Chiu & Charnley, 2021; Khoo et al., 2015). Roche (2019) and Morantz (2010) found that while children living in residential care valued the material benefits and educational opportunities of orphanage placement, they missed

³⁰ For example, orphanage closure, family reintegration, parenting programmes.

their birth families and communities. However, there are few studies on the experiences of family separation and orphanage placement from the perspective of parents and other family caregivers. Given the role of parents and caregivers as family decision-makers and the current policy focus on changing parental attitudes towards residential care, further research is needed to understand their lived experiences.

Voices of social workers

While some studies have explored the experiences and views of orphanage-based care workers (Carpenter, 2021), high-level policy stakeholders, and child welfare experts (Shawar & Schiffman, 2020), there is a lack of research on deinstitutionalisation and family separation prevention from the perspective of field social workers. This omission is significant because street-level social workers are crucial to policy implementation. Expanding research to include their insights could contribute to designing targeted, practical programs that support family unity.

Analysis of impacts of child care deinstitutionalisation policy and programming

Studies have highlighted the negative impact of institutional care on children's well-being and development (Berens & Nelson, 2015; Van Ijzendoorn et al., 2020). However, the effectiveness of deinstitutionalisation and orphanage closure in improving outcomes for children from impoverished and marginalised families is less clear. While improved outcomes for children in family-based care have been reported (Bakermans-Kranenburg et al., 2008; Berens & Nelson, 2015), these studies focus on Central and Eastern Europe, not on countries which are the current focus of international deinstitutionalisation efforts such as Cambodia, Nepal, and Uganda. Some research, such as Whetton (2014), suggests minimal differences in outcomes between institutional care and family-based alternatives.

Additionally, cultural and socioeconomic factors hinder the development of family-based alternative care in some contexts (Buchler, 2018; Rogers & Karunan, 2020), and closing institutions in the global south may not necessarily free up funds for family support and foster care (Islam, 2022). More empirical investigation into the systemic and family-level impacts of child care deinstitutionalisation initiatives in the global south is needed to inform future policy and programming, particularly regarding longer-term family reintegration outcomes.

Identifying the relationships and mechanisms linking migration to family separation and orphanage placement

The literature review reveals that neoliberal economic and labour policies have led to a growth in parental migration, impacting an increasing number of children in many countries of the global south (Jan et al., 2017). However, research on this phenomenon has, to date, predominantly focused on China. Expanding this research to include other countries experiencing high rates of children left behind by migrating parents could be helpful. This broader investigation would help identify country-specific intervention points that could mitigate or sever any causal links between parental migration and the subsequent placement of children in residential care facilities.

Research into household economic strengthening to reduce family separation, residential care placement and violence against children

The literature review consistently identifies family-level income poverty as the primary driver of family separation and the subsequent placement of children in residential care in low- and middle-income countries. Despite this, research, policy, and practice focus on promoting orphanage closure, parental behaviour and attitude change, and enhancing child protection and alternative care solutions. Meanwhile, the potential of household economic strengthening strategies as a core component of the deinstitutionalisation agenda receives less attention.

To bridge the gap between policy intentions and practical outcomes, it would help to develop a research agenda that examines how and in what contexts family-level economic strengthening can prevent family separation. Additionally, in alignment with current global policy priorities identified in the literature review, such research could also investigate the effects of household economic strengthening interventions on reducing violence against children. Such an exploration could provide a broader understanding of how economic interventions may improve both child safety and family stability.

Research into community-based childcare to improve household income and prevent family separation

The literature review uncovered several studies focused on childcare (daycare) in low- and middle-income countries. Research by Behbehani et al. (2019) and Hojman (2019)

highlights the positive effects of high-quality childcare in resource-limited settings on children's development and mothers' participation in the workforce. Additionally, these and other studies identified a significant shortfall in the availability of childcare and the difficulties low-income families face in accessing these services. However, the review found no studies examining childcare's potential role in reducing poverty and preventing family separation. This gap suggests a need for further research to explore how childcare services could potentially contribute to keeping families together.

2.8. Research questions

Considering the strengths and limitations of the existing knowledge base and aligning with the study's aims through a problem-structuring approach to policy and program analysis (Hoppe, 2010), the research questions to be addressed are:

- What is the problem of family separation and orphanage placement represented to be in Cambodian policy and programming?
- Which problems leading to family separation and orphanage placement are highlighted by social workers and caregivers with lived experience of family separation?
- To what extent do the problems represented at the policy and programming level reflect those identified by social workers and caregivers?
- What implications do the findings have for child care deinstitutionalisation and family preservation policy and programming?

In the next chapter, I outline the methodology and methods used to address these questions.

Chapter 3. Methodology

3.1. Introduction

This study acknowledges that 'family separation' is both a socially constructed phenomenon and a lived experience. The qualitative methodological approach used in this research focuses on understanding how individuals describe and make sense of their experiences and also considers the influence of the wider social and economic context.

The underpinning epistemology of this study is rooted in constructivism and interpretivism. Constructivism (Berger & Luckmann, 1966) views knowledge as being constructed by individuals through their experiences and interpretations of the world, whilst the interpretative approach (Benner, 1994) to inquiry emphasises understanding the social world from the perspective of those being studied. Constructivism and interpretivism both acknowledge the complexity of social phenomena and that the researcher and participants bring their subjective understandings to the research process. However, the methodological goal is to draw out and present the meanings that participants give to their own experiences.

Several methods were employed to address the research questions. In order to make an initial identification of policy and programming priorities, a qualitative document analysis (QDA) of selected Cambodian policy and programming documents was conducted (Altheide, 2000). While this indicated the main priorities and gaps in child care deinstitutionalisation policy and programming in Cambodia, it did not allow for a deeper analysis of the theoretical, institutional or political factors that had shaped those policy and programming choices. Therefore, an interpretative and critical analysis was also undertaken using the '*What's the problem represented to be?*' approach (Bacchi, 2009). This study also explores social workers' and caregivers' subjective experiences of these policy and programming priorities. It develops an interpretation of their accounts of the circumstances and factors contributing to family separation in Cambodia and their suggested solutions for addressing those issues. Therefore, much of the data presented in the thesis was generated from semi-structured interviews and focus group discussions with parents, caregivers, NGO and government social workers.

I begin this chapter with an overview of the research design before describing the methods used for analysing policy and programming documents relating to interventions to prevent family separation and the placement of children in residential care. After considering the ethical aspects of this research, I will describe my approach to sampling, collecting, and analysing semi-structured interviews and focus group discussion data from social work practitioners, local NGO managers, parents, and caregivers. Finally, I discuss factors relating to the robustness of the research, paying particular attention to cross-cultural and translation issues.

3.2. Research design

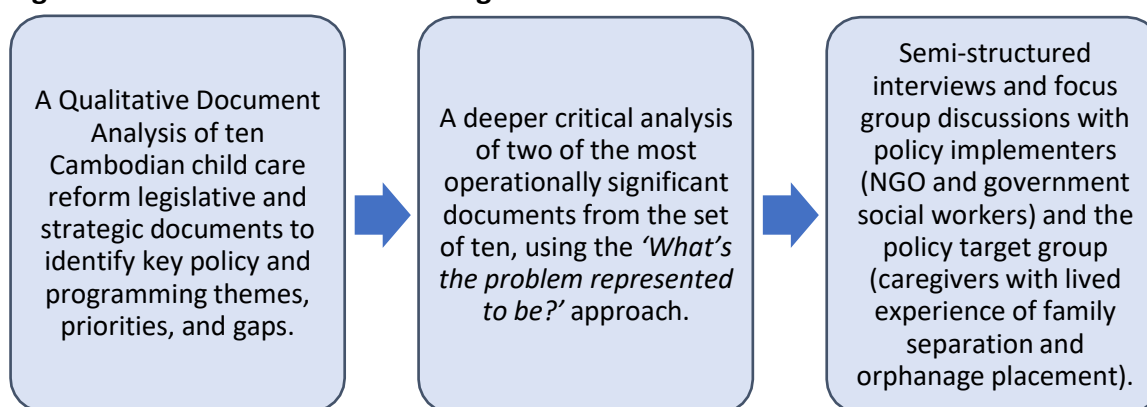
This research was designed to generate data from different levels of the child care reform and deinstitutionalisation policy network in Cambodia in order to develop a multi-faceted account that incorporates the views and experiences of social workers and families with experience of family separation whilst also considering the strategic priorities and perspectives of the national and international agencies that shape policy formation and the allocation of resources for programme delivery.

Two approaches were used to address the research questions:

- 1) Analyses of selected policy and programming documents to develop a ‘top-down’ identification of policy-level priorities and an interpretation of factors shaping the policy and programming space.
- 2) A thematic analysis of ‘bottom-up’ data generated from semi-structured interviews and focus group discussions with policy implementers and family caregivers from the policy target group.

The figure below summarises the data generating steps taken.

Figure 5. Overview of research design



The following section describes the ethical aspects of carrying out the research.

3.3. Ethical considerations

The ethical implications and process for conducting the study were assessed and approved through Durham University's internal ethical approval system. This process included the completion of risk assessments, obtaining in-country research approvals, and approval of research tools and supporting documents by the ethics committee of the Department of Sociology at Durham University. These documents were also presented to the primary research partner (Friends-International) for their input and approval. Full ethical and overseas fieldwork approval of the design, data plan and accompanying materials was obtained from Durham University and shared with the primary research partner in Cambodia for agreement in September 2020. Copies of the research information sheet and consent forms used can be found in Appendices B and C.

Key ethical considerations related to this study included issues of informed consent, confidentiality, and anonymity, avoiding harm or distress to participants, secure storage of data, and meeting the research aim of producing new knowledge that could result in policy and programming development with some tangible benefit at the policy design, implementation, and service delivery levels.

Conducting and publishing policy-related research in authoritarian countries such as Cambodia has the potential to touch on politically sensitive issues. To safeguard all participants, I confirmed that the authority for the primary research partner in Cambodia (Friends-International/3PC) to commission, conduct and disseminate operational research on the topics of family support and children's residential care was mandated under Articles

6 and 32 of the Memorandum of Understanding between MoSVY, UNICEF Cambodia and Friends-International and that no further approvals were necessary for me to undertake this research. Data for both professional and family participants was anonymised. No identifiers were shared, and participants' anonymity was maintained in the final dissertation. The only exception to promising anonymity and confidentiality would have been to respond to any cases of child abuse or need for emergency support disclosed or observed during the research process. This anonymity caveat regarding child protection was explained to all participants before interviews and before gaining final informed consent to proceed.

Paying research participants is a common, long-standing, ethically acceptable, and yet '*perennially fraught practice*' (Grady, 2019:1), and this proved to be the case during my two months of collecting data in Cambodia. No payments were made to professional participants (i.e. social workers and government staff), as this would have been against the policy and procedure of their employing agencies. However, in recognition of the time and resource costs incurred from facilitating data collection for this research, I donated \$100 - \$200 to each of the five participating NGOs as a token of appreciation.

The situation around payments for participating family caregivers was more complicated. Four of the five participating NGOs had a 'no cash hand-outs' policy, which I adhered to when interviewing caregivers at the NGO offices. All of the participating NGOs gave caregiver research participants some material (e.g. food, hygiene and school items) in recognition of their time and participation. The fifth NGO had a more 'open-handed' approach to cash payments for service users and actively encouraged me to pay the participants for their time, which I did.

Interview data for this study was collected during November and December 2020, when the social and economic impacts of COVID-19-related lockdowns, border closures and economic shut-down were severe. The research assistant and I conducted two interviews in family homes where caregivers reported relying on eating leaves for sustenance, and children were crying inconsolably from hunger. In these cases, the research assistant and I provided emergency cash payments to these families to help them meet immediate needs. The research assistant and myself personally funded these payments. Following these interviews, we also alerted the supporting local NGOs that these families appeared in need of emergency support so that action could be taken. Having previous professional

experience with these NGOs and their practice, I was confident that action would be taken. I was concerned that conducting research interviews during such trying times may exacerbate participants' stress. I expressed these concerns to the participants, emphasising the option to leave the interviews for another time. However, all participants wished to continue as arranged and share their experiences.

Having worked in child protection for over thirty years, I am familiar with encountering difficult and distressing situations and have developed my own coping strategies. However, the circumstances of many Cambodian families we met during data collection were an emotionally challenging aspect of the research for me, and likely even more so for the research assistant, who did not have a social work background.³¹

Cambodia, in common with most of Southeast Asia in late 2020 and early 2021, was reporting exceptionally low rates of COVID-19 infection. At that time, the UK FCDO³² had classified Cambodia as a destination that did not pose a risk for British travellers. However, levels of community concern and anxiety were high and stringent lockdowns had been in place before I arrived in the country in November 2020. While in Cambodia, I kept up-to-date with advice from the World Health Organisation (WHO), the Cambodian Government, and the research partners. I also adhered to all social distancing and other preventative measures.

The following section describes the approaches to documentary analysis used in this study.

3.4. Analysis of policy and programming documents

Efforts to improve service provision for children and families at risk of separation in Cambodia are currently focussed on operationalising existing policy by creating guidelines, procedures, and strategic plans. As the lead ministry for child welfare, the Ministry of Social Affairs, Veterans and Youth Rehabilitation (MoSVY) works in partnership with the Ministry of Women's Affairs (MoWA), UNICEF, USAID, Save the Children and national-level NGO networks such as Family Care First (FCF) and The Partnership Programme for the Protection of Children (3PC) in the implementation of its child care reform agenda. Key documents from across this policy and programming network were selected for analysis.

³¹ See Section 3.5.3 for further reflection.

³² United Kingdom Foreign, Commonwealth & Development Office.

3.4.1. Document sampling criteria

The sampled policy and programming documents all referenced interventions targeting commonly identified drivers of family separation in Cambodia,³³ and the programmes and interventions set out in these documents are actively implemented by government and NGO staff in the country. The document chain analysed in this study passes down from national legislation to the strategic action plans of the Cambodian government, its line ministries, and their international and domestic development partners.

Documents designed to monitor policy implementation are represented by examples of performance management tools (i.e. performance indicators) used by in-country implementing agencies. Only those parts of the policy and programming documents dealing specifically with commonly identified drivers of family separation³⁴ or services to mitigate those risks were included in the final analysis. Therefore, the findings presented in this study do not allow for the analysis or assessment of individual agencies or programmes, and the results should be considered in that context. Following my inclusion criteria, I examined three pieces of legislation, three strategic plans and four sets of performance indicators. The sampled document set is presented in the table below.

³³ See Table 1, Section 3.4.1 for a full list of the documents.

³⁴ See Table 2, Section 3.4.2.

Table 1. Policy and programming documents sampled

CATEGORY	DOCUMENT	LEAD AGENCIES	BRIEF DESCRIPTION
Legislation	Policy on Alternative Care for Children (2006)	MoSVY	Establishes principle that <i>'family care [is] the best option for alternative care'</i> and <i>'family solutions . . . should be preferred to institutional placement'</i> (MoSVY, 2006:IV)
Legislation	Prakas on Procedures to Implement the Policy on Alternative Care of Children (2011)	MoSVY	It sets out a hierarchy of care, according to which efforts at family preservation must be exhausted before alternative care is considered.
Legislation	Sub-Decree on The Management of Residential Care Centers (2015)	MoSVY	Contains commitment that MoSVY will work to reduce the number of children in RCIs, and placement of children outside of family care will be a <i>'last and temporary option'</i> (MoSVY, 2015:Article 11)
Strategic Plans	Action Plan for Improving Child Care (2016 -2018)	MoSVY/UNICEF Cambodia	It sets the goal of reintegrating 30% of children living in RCIs and articulates the formalisation of alternative care options.
Strategic Plans	Action Plan to Prevent & Respond to Violence Against Children 2017 – 2021	MoSVY/MoWA/UNICEF Cambodia	Addresses all forms of child abuse via actions across the areas of coordination, prevention, response, policy and monitoring
Strategic Plans	Capacity Development Plan for Family Support, Foster Care and Adoption in Cambodia 2018 - 2023	MoSVY/UNICEF/USAID/HCCH/ISS	This includes actionable goals to strengthen social work capacity by promoting family-based care and preventing family separation.
Performance Indicators	Partnership Program for the Protection of Children (3PC) Performance Indicators 2019	3PC/Friends International	Fourteen core indicators for data collection across the 11 3PC implementing partner NGOs.
Performance Indicators	3PC UNICEF Project Indicators 2019/2020	3PC/Friends International/UNICEF Cambodia	Thirty-six output indicators for data collection across the 11 3PC implementing partners (focused on activities funded by UNICEF).
Performance Indicators	EU Responsive & Effective Child Welfare Systems Transformation (REACT): <i>Indicator Guide</i> 2019	USAID/Save the Children/FCF/3PC / UNICEF	31 indicators for data collection across the new partnership coalition between 3PC, FCF and MoSVY
Performance Indicators	Cambodia Child Protection Monitoring Framework (Draft) (2019)	UNICEF Cambodia	Fifty-five indicators guide establishing a national child protection information management system.

Two methods of documentary analysis were used. Firstly, the selected policy and programming documents were analysed using qualitative document analysis (QDA) (Altheide, 1996), before two key documents from the sample were subjected to a further, more interpretative and critical analysis using the '*What's the problem represented to be?*' approach (Bacchi, 2009).

3.4.2. Qualitative document analysis (QDA) of the selected policy and programming documents

The collection of policy and policy-related documents ran to several hundred pages of diverse material in various formats. To identify the policy and programming priorities inherent in the documents, I conducted an analysis using qualitative document analysis (Altheide, 1996). Qualitative document analysis (QDA) is a means for systematically analysing policy documents (Altheide, 1996; Bowen, 2009; Wesley, 2014), and in the context of this study, was selected as a systematic and transparent way of identifying the key policy and programming priorities present within such a large and disparate corpus of material.

Researchers are key instruments in this type of interpretative analysis, filtering the documents through their personal lenses to produce 'data'. Potential biases were countered through critical self-reflection and adherence to methodological guidelines to maximise the reliability of the findings (Guba & Lincoln, 1989). To that end, the process by which the qualitative document analysis results were obtained is provided below.

While there has been limited empirical research into the structural and proximal circumstances leading to family separation and the placement of children in residential care in Cambodia, the evidence that does exist identifies a set of interrelated factors which are reported consistently across the academic and grey literature. The nine commonly identified drivers of family separation presented in the box below feature *verbatim* across the Cambodian legislation, policy and research literature.

Table 2. Commonly identified drivers of family separation in Cambodia

Poverty	Access to education	Family crisis ³⁵
Migration	Violence Against Children	Child with disabilities
Parental substance misuse	Positive community attitudes towards residential care	Children in conflict with the law

(Csaky, 2009; Coram International, 2018; DaSilva and Punchihewa, 2011; Milligan et al., 2017; MoSVY, 2006; MoSVY, 2011; MoSVY, 2011a).

These nine factors were used as predefined thematic codes, forming the framework for analysing the policy and programming documents reviewed in this study. Relevant content from each document was assigned to these codes. Subsequently, the extent to which each of the nine commonly identified drivers was addressed within the documents was categorised into one of four levels: ‘Strong consideration,’ ‘Consideration,’ ‘Weak consideration,’ or ‘None/Unclear.’

An example of ‘Strong Consideration’ includes consistent references relating to a commonly identified risk factor with clear implementation plans supported by allocated resources. A categorisation of ‘Consideration’ indicates explicit references to policies and practices relating to a factor but lacks enough supporting information for a ‘Strong Consideration’ assessment. Policy elements categorised as receiving ‘Weak Consideration’ make only brief or cursory references to a factor with no corroborative or contextual detail at the level of implementation. Finally, the categorisation ‘None/Unclear’ indicates that no information related to a factor was included in the document.³⁶

While helpful in identifying central themes and priorities within a documentary corpus, the approach has limitations. QDA is a relatively blunt methodological tool³⁷, and an additional

³⁵ For example, parental death, illness or divorce.

³⁶ ‘The combination of ‘unclear’ and ‘none’ serves as a reference to the fact that this analysis does not on its own represent a definitive verdict on practices but is a reference to the level of detail in the document.’ (IRC, 2012:7).

³⁷ See Section 7.3 for further discussion.

method was required to generate a more discursive and critical analysis. To this end, I further interrogated the representation of the 'problem' of family separation found in the policy and programming documents using the '*What's the Problem Represented to be?*' (WPR) approach (Bacchi, 2009). This approach builds on the 'problematism' orientation of Michel Foucault (Foucault, 2008), which has been operationalised for policy analysis by the Australian academic Carol Bacchi (Bacchi, 2009; 2015).

3.4.3. 'What's the problem represented to be?' (WPR) approach

Central to the WPR approach is the idea of 'problematism' (Foucault, 2008), which is concerned with how and why certain phenomena are identified as 'problems' at specific times and under particular circumstances. WPR is an interpretive and critical approach to policy and discourse analysis that emphasises and questions the ways in which 'problems' requiring policy 'solutions' are represented within the policy-related literature and discourse more broadly.

Applying six questions to the policy texts under analysis, the WPR approach guides the identification and analysis of the problem representations embedded in policy documents, which can be used to either '*signal a form of critical analysis, putting something into question, or to refer to the products of governmental practices, that is, how issues are problematized*' (Bacchi and Goodwin, 2016:16).

Bacchi's six guiding questions are:

1. What's the 'problem' represented to be in specific policy texts?
2. What presuppositions or assumptions underlie this representation of the 'problem'?
3. How has this representation of the problem come about?
4. What is left unproblematic in this problem representation? Where are the silences?
Can this problem be thought about differently?
5. What effects are produced by this representation of the problem?
6. How/where has this representation of the 'problem' been produced, disseminated and defended? How could it be questioned, disrupted and replaced?

(Bacchi, 2012:21)

These questions can be applied systematically or adapted to suit the analysis's needs (Bacchi, 2015; Sebeelo, 2021). For this study, I changed the ordering of the questions and combined questions three and six. These adaptations were made to better fit the research design and the limited detail of existing policy texts related to family preservation in Cambodia. The questions used in this study were:

1. What's the problem of family separation and orphanage placement represented to be in child care reform policy in Cambodia?
2. What presuppositions or assumptions underlie this representation of the problem?
3. How has this representation of the problem of family separation come about and been disseminated in Cambodia?
4. What effects are produced by this representation of the problem?
5. What is left unproblematic in this problem representation?

To uncover how family separation has been represented as a policy problem, I focussed the WPR analysis on two key documents. Namely, the *Action Plan for Improving Child Care 2016-2018* (MoSVY, 2016) and the *Capacity Development Plan for Family Support, Foster Care and Adoption 2018-2023* (MoSVY, 2018). These two documents have shaped current child and family services in Cambodia and contain the most considered and detailed coverage of strategies and activities to prevent family separation. They were selected as best placed to provide insights about funding priorities, governance mechanisms, programming and the conceptualisation of family separation and its prevention in Cambodia.

Using my adaptation of Bacchi's guiding questions to open up the problem representations embedded in these two documents, the WPR analysis presents two significant interpretations. The first constitutes what is represented to be the essence of 'the problem' (or 'root cause') of family separation in the documents, whilst the second relates to how this particular problem representation came about and is sustained through identifiable structural, institutional and power relations. These findings are presented and discussed in Chapter 4. Some of the policy silences that result from the privileging of these particular problem representations are revealed in the findings from the semi-structured interviews and focus group discussions with the policy implementers and policy target group presented in Chapter 5 and Chapter 6.

3.5. Semi-structured interviews and focus group discussions with policy implementers and the policy target group

In addition to the QDA and WPR documentary analyses, data was also generated from semi-structured interviews and focus group discussions with child care reform and deinstitutionalisation policy stakeholders, including family caregivers, government and NGO social work practitioners and managers with experience of family separation and the placement of children in residential care. Semi-structured interviews and focus group discussions align with an interpretive and constructivist approach as the researcher does not adhere to predefined questions but engages in a flexible and open conversation, allowing participants to express their own views and interpretations. The data from the semi-structured interviews and focus group discussions contributed a more 'bottom-up' perspective derived from the policy implementation and policy target-group levels of the policy network (Shdaimah et al., 2009).

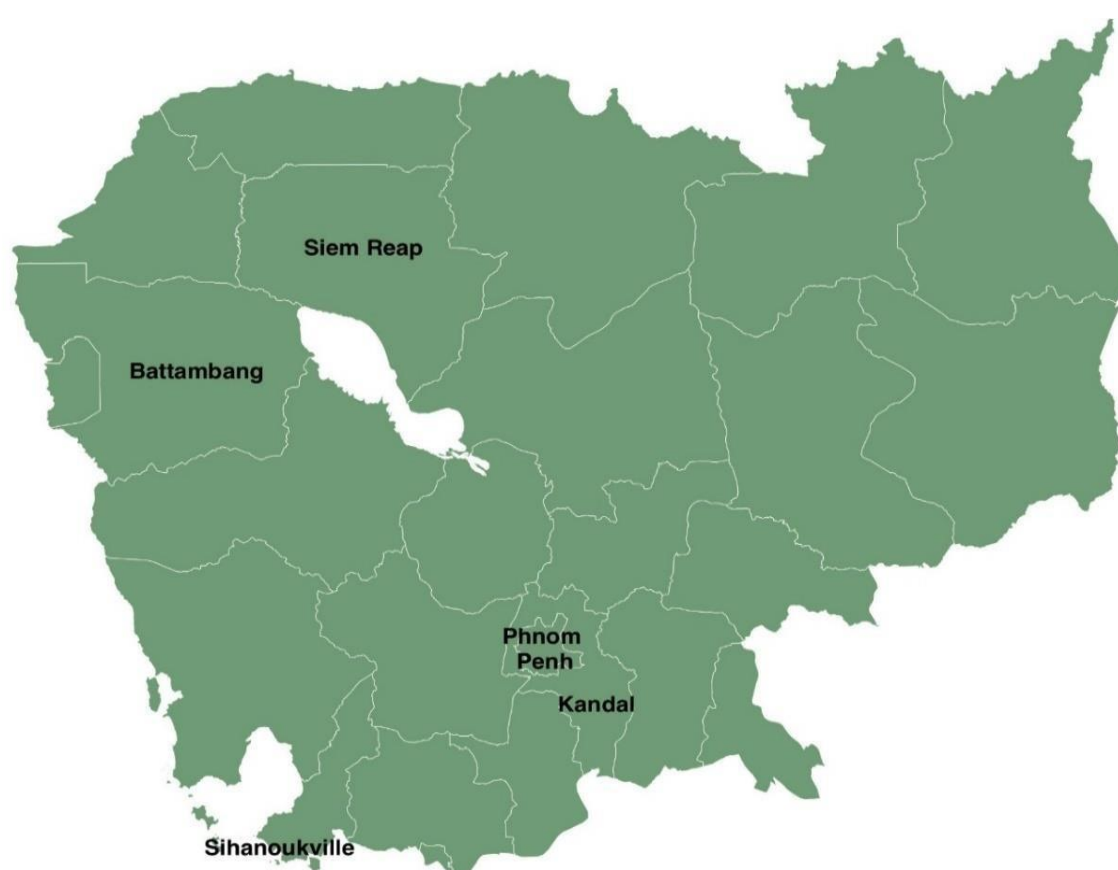
3.5.1. Sampling and sample of semi-structured interview and focus group discussion participants

I used a purposive sampling strategy to select participants. Purposive sampling involves intentionally selecting participants based on their ability to elucidate a specific theme, concept, or phenomenon (Saldana, 2011). It is not intended to offer a sample that statistically represents a population (Mason, 2002) but rather to zero in on the focus of the empirical inquiry and throw light on aspects of the research questions. This sampling technique was selected as it is useful when studying the lives of marginalised populations or exploring social phenomena that may be uncommon or infrequently occurring (Bryman, 2016).

Participants were selected based on their experience (either personally or professionally) of family separation and the placement of children in residential care. In total, 55 professionals and caregivers participated. Twenty local NGO managers joined focus group discussions, while 35 social workers, parents, and other family caregivers participated in one-to-one semi-structured interviews. Of these 35, twelve parents or caregivers who had experience placing a child in residential care, seventeen social workers working for Cambodian-registered NGOs, and six government-employed social workers were interviewed.

Social and economic circumstances and the distribution of children living in residential care in Cambodia are not geographically even, with orphanages tending to cluster in larger urban and tourist centres. To capture some of this diversity, interview data for this study was collected from social workers and caregivers in the five target provinces³⁸ identified in the government's *Action Plan for Improving Childcare* as having 'the highest number of children in residential care institutions' (MoSVY, 2016:7). The map below shows the locations of the five data collection sites

Figure 6. Data collection sites



This study did not include children in the sample in part due to methodological and ethical considerations involved in working with children, particularly those with experiences of family separation and placement in an orphanage. Engaging children in research requires particular approaches to ensure their understanding, participation, and ethical safeguards to protect their well-being. Moreover, including children in the sample would not have significantly contributed to the research aims of this study. Although interviewing children could have provided interesting and valuable insights into their experiences, wishes, and

³⁸ Phnom Penh, Battambang, Kandal, Sihanoukville and Siem Reap.

feelings, the complexity of these requirements exceeded the scope of this study. If the research aims had necessitated understanding children's perspectives, a dedicated study focusing exclusively on interviewing children would have been pursued.

Four focus group discussions were conducted with managers from four participating local NGOs.³⁹ There were 20 focus group discussion participants in total, including NGO senior managers and technical advisors, four of whom were not Cambodian nationals. Many focus group discussion participants had decades of professional experience, and their discussions allowed for data collection that enriched the perspectives provided by front-line social workers in semi-structured interviews. All focus group discussions were audio recorded. They were then transcribed, and the data was included in the analysis.

Table 3. Policy implementation and policy target group participants

Participant Group	No. of participants	Location	Method
NGO senior managers	7	Phnom Penh	Focus group discussion
	4	Kandal	
	4	Sihanoukville	
	5	Siem Reap	
NGO social workers	6	Phnom Penh	Semi-structured interview
	3	Kandal	
	2	Sihanoukville	
	3	Battambang ⁴⁰	
	3	Siem Reap	
Government social workers	1	Phnom Penh	Semi-structured interview
	1	Kandal	
	2	Sihanoukville	
	1	Battambang	
	1	Siem Reap	
Caregivers	2	Phnom Penh	Semi-structured interview
	2	Kandal	
	4	Sihanoukville	
	2	Battambang	
	2	Siem Reap	

³⁹ Focus Group Discussions were conducted in four of the five locations. A focus group discussion was not conducted in one location (Battambang) due to COVID-19 restrictions.

⁴⁰ All Battambang interviews were conducted online due to COVID-19 restrictions.

The decision to interview thirty-five participants was based on three criteria. First, to facilitate the coordination and organisation of dual-language interviews with a diverse sample group in five geographically dispersed locations, a quota sampling approach was used to estimate the number of people meeting which criteria to include as participants before data collection. Second, although this study did not use grounded theory as such, sampling ceased when no significant new information seemed to emerge during the interviews, suggesting a richness of data had been achieved, which adequately captured the significant dimensions of the talk generated by the interview schedules. Finally, the data collected allowed sufficiently detailed thematic analysis within the time and resource constraints of doctoral study but without compromising the quality of the research.

At the policy target-group level, the study sampled family caregivers of children who had previously been placed in residential care but had now had their children reintegrated to live in the family home. These selection criteria were made on both ethical and methodological grounds. As both a foreigner and someone unfamiliar with the participating families and their circumstances, interviewing parents or other family caregivers about a current or recent placement of a child in an orphanage had the potential to distress the participants and was unlikely to have afforded them the temporal or emotional distance to reflect on the circumstances and events around the placement. In line with this, a further criterion for selecting caregiver participants was that their child or grandchild should have been reintegrated home for at least one year before the interview. In the event, two mothers we met with still had their children living in residential care at the time of the interview. However, following discussion, both of these mothers were keen to participate in the research and share their experiences, so they were included in the sample.

Of the twelve caregivers interviewed, eight were birth mothers, and four were grandparent couples who took primary care of their grandchildren.⁴¹ Local NGO research partners identified all parent and caregiver participants. Invitations to participate in the research were made to caregivers by their social workers. Ultimately, family caregiver interviews were attended by ten women and two men (both grandfathers). Seven of the eight birth mothers interviewed said that their children's birth father was either dead or absent. The

⁴¹ In both of these cases the kinship care arrangement was as a result of the children's parents' labour-related migration to Thailand, where salaries, work opportunities and labour conditions (particularly for the low-skilled) are often better than in Cambodia.

role of gender in both family separation and the delivery of family preservation services in Cambodia is discussed in greater detail in Chapter 6.

At the policy implementation level, the sample was drawn from practising social workers, social work managers and technical advisors from the government and national NGO sectors in the five target provinces. As members of the government-led Partnership Program for the Protection of Children (3PC), all agencies participating in this study had received funding, training and capacity-building support from international donors to conduct activities that *'promote family preservation . . . deinstitutionalisation, and the reintegration of children [from institutions] to their families and communities.'* (MoSVY, 2016:8). The study sampled practitioners with recent experience⁴² of child care deinstitutionalisation, family preservation and the reintegration of children from residential care centres to their birth families.

Twenty-three practitioner interviews were conducted with eleven male and twelve female social workers. All but one were Cambodian nationals (the exception being a registered Australian social worker with a deinstitutionalisation coordination and training role at the national level).

The participating government and social work staff were all from the provincial and communal sub-national levels, meeting the criteria of having experience directly implementing deinstitutionalisation and family preservation policies. Three of these government social workers (1 male and two female) were based within the Department of Social Affairs, Veterans and Youth Rehabilitation (DoSVY) with statutory responsibility for implementing government action plans within their district and reviewing and approving recommendations for children to be placed in residential care institutions. The other three government staff (all female) were front-line community/village-based social workers working directly with marginalised and at-risk families as the social work lead within their local Commune Committee for Women and Children (CCWC).⁴³

⁴² Within the past 3 years.

⁴³ Formal social work training is relatively new in Cambodia with formally qualified social workers only being deployed to each of Cambodia's twenty provinces in 2020 (UNICEF, 2019). While recognising the potential benefits of strengthening formal training and professional development in the Cambodian social service workforce, it should be acknowledged that good quality in-house training programmes do exist and the evidenced achievement of social policy outcomes indicates the commitment and skill of an often highly

experienced state and NGO social workforce predominantly consisting of staff who have been trained on-the-job.

A table summarising the study's participants is presented below.

Table 4. Summary of participants

Semi-structured interviews	
Government social workers	6 (Female:5 Male: 1)
NGO social workers	17 (Female:7 Male: 10)
Caregivers	12 (Female:10 Male:2)
Focus group discussions	
NGO senior managers	20 (Female:12 Male:8)

3.5.2. Recruitment of participants

All participating government agencies and NGOs are members of the implementation network, the Partnership Programme for the Protection of Children (3PC). This national initiative is a collaborative partnership between MoSVY, UNICEF, the NGO Friends-International, and over fifty Cambodian NGOs and community-based organisations. The network's government and NGO members are the primary implementers of Cambodia's deinstitutionalisation policy. In the first instance, I approached Friends-International⁴⁴ (the network coordinator) to explain the study and its aims and secure their support as a research partner. Subsequently, eleven 3PC implementing NGOs were provided with a Research Information Sheet (See Appendix C) describing the study and what their potential participation would involve. This led to five NGOs contacting me and agreeing to take part. Having facilitated these introductions, Friends-International stepped back, and I communicated directly with a key contact person at each NGO. This allowed for some relationship-building and further discussion of the study and its aims and was essential for organising the practicalities of collecting data in contextually quite different locations as well as identifying and recruiting NGO social workers, caregivers and local government staff that met the criteria for participation.

The key contact people at the NGOs identified potential participants, provided them with verbal or written information about the study, and arranged interview times for those interested in participating. Parents and caregivers were recruited from families receiving

⁴⁴ With whom I had previously been employed 2011-2017.

services from the participating NGOs. Social work practitioner participants were selected from both local government and NGO social work teams.

All participants were provided with a letter of invitation to participate in the research (See Appendix B and Appendix C) and a research information sheet describing the study, what their participation would involve, and confidentiality aspects. The partnering NGO staff then followed up with a face-to-face or telephone discussion to answer any questions that participating social workers or caregivers might have. On the interview day, each interviewee completed a consent form (see Appendix A). All written research information and forms for participants and verbal explanations were provided in Khmer.

3.5.3. Cross-cultural and translation issues

This study adopts a social constructionist approach to knowledge and how it is produced, recognising that objectivity in the social sciences is not possible and that people's position in the social world affects how that world is perceived (Hammersley, 1990). From this perspective, there is no neutral position from which to translate and interpret the words of others, and the power relationships within the research process need to be acknowledged and made explicit. Whilst the possibility for miscommunication exists in all qualitative research (Bryman, 2016; Cicourel, 1964), this potentially increases when the researcher moves out of their native language and culture, and cross-cultural research poses powerful threats to validity - with language barriers and the processes of translation and interpretation having the potential to produce flawed data.⁴⁵

Care needs to be taken during all phases of a cross-cultural study. Research instruments (e.g. interview schedules, participant information sheets, consent forms) were carefully translated and reviewed by Cambodian research partners to ensure that they best conveyed the meanings of the source material and that the research aims and methods were communicated to research partners and participants in a form that was understandable across linguistic and cultural barriers.

Roth (2013) argues that although researchers are aware of the difficulties of accurately conveying scholarly information in another language, the fundamental nature of language as a culturally embedded and contextually embodied *process* is rarely articulated in cross-

⁴⁵ Navarro and Barnes (1996) found that 77% of translated *titles* in academic journals contained errors, and

34% had mistakes that changed the meaning significantly (Navarro & Barnes, 1996: 300).

cultural research. Instead, the idealised notion that the same ‘meanings’ can be rendered using translation is often taken as an ontological and epistemological given. The temptation for both qualitative and quantitative researchers to gloss over some of the issues raised by the use of interpretation is perhaps understandable, given the profundity of the methodological and epistemological challenges that arise from a recognition that people from different cultures using different languages will often construct very different ways of perceiving, understanding and communicating social phenomenon. Philips (1960 in Adams & Priess, 1961) describes the position of conceptual equivalence across languages as: *‘in absolute terms, an insoluble problem’* (Philips, 1960 in Adams & Priess, 1961:78) as almost every utterance in any language carries with it assumptions, feelings and values that outsiders are unlikely to be aware of.

Despite these challenges, cross-cultural and cross-language studies are needed in a globalised research world. The task is to acknowledge the complexity of such endeavours, employ methods that seek to minimise potential threats to validity, and transparently report on those methods.

All interviews with Cambodian nationals were conducted in Khmer via an interpreter. I have lived and worked in Cambodia for over fifteen years. Although I can converse in Khmer, which helps in building rapport and following the flow of conversations with participants, I worked with a research assistant throughout the data collection in Cambodia to act as an interpreter during interviews, assist me in picking up on cultural cues, help negotiate the politics of my outsider status, and aid mutual learning and reciprocity.

The research assistant was a Khmer national fluent in English. Before beginning data collection, we spent three days training together on the aims and methods of the research, with particular attention paid to the open and flexible nature of conducting semi-structured qualitative interviews. In addition to facilitating interviews, the research assistant was able to alert me to participants’ non-verbal cues that, as an outsider, I may have missed. Data collection for this study involved the research assistant and me being ‘on the road’ for seven weeks, and he was paid commensurately. Interviewing street-living and impoverished parents about their experiences of family separation and orphanage placement was emotionally intense. The ultimate quality and thickness of the interview data generated for this study was largely due to the research assistant's skill, sensitivity and commitment.

Data collection for this study was conducted in 2020/21 when the impacts of responses to COVID-19 on the socio-economic situation of already vulnerable households were exacerbated by the closure of businesses, the mass repatriation to Cambodia of external migrants from Thailand (with the concomitant loss of their financial remittances to their families), increased unemployment/underemployment and disruption and lay-offs in key economic sectors (e.g. tourism and the garment industry). Despite working as a social worker with families in need for over thirty years, I found the experience distressing. Following the completion of the interviews, the research assistant informed me that he, too, had been emotionally affected by the research process and suffered from a low mood for several months afterwards. During this period, I remained available and in contact with him to discuss any issues he wished to share. For similar projects in the future, I would try to recruit research assistants with prior experience working with disadvantaged groups. I would also incorporate regular emotional de-briefs into the research schedule.

3.5.4. Semi-structured interviews with social workers, parents and caregivers

Semi-structured interviews were used to gain insight into social workers' and caregivers' experiences and their framings and understandings of the proximal and structural circumstances that contribute to family separation and the placement of children in orphanages. The interviews were designed to generate accounts of participants' experiences and elicit their understanding of the factors driving family separation and their suggested solutions for mitigating those problems.

Interview schedules (See Appendix D and Appendix E) reflected themes identified in the literature (for example, the nine commonly identified drivers of family separation), and their design was informed by the policy analysis methods of problem structuring (Hoppe, 2010) and frame reflection (Rein & Schon, 1996). The interview schedules allowed participants to talk about their own experiences of family separation and the placement of children in residential care and to reflect on the contributing factors and context of those experiences. This approach was considered preferable to participant observation of social workers or gathering information from social work case files because it allowed for greater interaction and flexibility through face-to-face dialogue among the participants, the research assistant, and me. This method resulted in richer data.

During the interviews, I asked the questions in English, which the research assistant then translated into Khmer. The social worker and caregiver participants responded in Khmer, and the research assistant translated their responses into English for me. My proficiency in Khmer allowed me to follow most of the conversation.

I am accustomed to working with interpreters in a professional context, mainly when delivering training or running workshops. This experience has shown me that using interpreters offers several benefits that are also applicable to research interviews. One key advantage is that the process of translating between languages slows the pace of communication, providing space for reflection.

Social workers were interviewed at local government social work or NGO offices. The participant, research assistant, and I were present during the interviews. Parents and caregivers were interviewed at the local NGO office or the participant's home. The participant, research assistant, and I were present. All interviews lasted approximately one hour, apart from the handful conducted online, which were shorter.

The contrast between the majority of the interviews conducted face-to-face and the caregiver and social worker interviews conducted online was striking. The four online⁴⁶ interviews were conducted via Zoom, and I felt they lacked the rapport possible in a face-to-face meeting, which resulted in stilted discussions, monosyllabic responses to questions and noticeably thinner data. This may have been partly due to rural Cambodians being unused to online communication via a laptop and the more limited scope for the research assistant to fulfil his customary rapport-building function during online interviews. My experience conducting interviews online raised questions about the quality and type of qualitative data (particularly about sensitive or complex topics) that can be effectively and ethically generated through participant-researcher communication via online and social media tools. The ethical and methodological challenges raised by online research interviews are recognised in the literature (Newman et al., 2021; Roberts et al., 2021). While acknowledging drawbacks, Meherali and Louie-Poon (2021) and Saarijarvi and Bratt (2021) identified techniques for improving interviews online, and more time for planning could mitigate some of the challenges I encountered. However, most of the techniques I found suggested in the literature are practical (for example, *'make sure all participants*

⁴⁶ These four interviews were conducted online due high levels of COVID-19-related restrictions in place in one of the research locations (Battambang).

have video switched on', 'Use of headphones is preferably [sic] to enhance audio quality experience' (Saarijarvi & Bratt, 2021:395), and fail to address interpersonal and relational aspects.

3.5.5. Focus group discussions with NGO managers

All participants in the focus group discussions spoke professional-level English and opted to conduct the discussion in English. At each of the four focus groups, I first presented the aims and methods of the research to the participants, as well as initial themes and findings from my literature review. Following this, participants were invited to comment and reflect on these initial findings and understandings of family separation in the Cambodian context. The largest group comprised six people, and members of each focus group discussion were already known to each other as they worked in the same organisations. Mitigating the effects of group dynamics is important when conducting focus group discussions to ensure that the data collected is reliable and reflects individual perspectives (Packer-Muti, 2010). To minimise the potentially distorting effects of social psychological processes and other group dynamics, I maintained a neutral position in moderating the discussions and established simple but clear ground rules. I made sure that everyone had the chance to express their thoughts and experiences to prevent dominant individuals from monopolising the discussion.

3.5.6. Recording and transcription of interviews and focus group discussions

All interviews and focus group discussions were audio recorded and later transcribed. I transcribed the English translations of group discussions and questions and responses produced during the interviews. Researchers have highlighted the complexity of transforming talk into text for the purposes of qualitative analysis (Kvale, 2012; Riessman, 1993). Elliott (2005) presents three broad approaches to transcription: detailed transcription using a precise and specialised notation system for close conversational analysis ('naturalised approach' Oliver et al., 2005), transcription using units of discourse which seek to preserve the rhythm and structure of speech without the use of technical notations and 'cleaned up' transcription which prioritises accessibility and the rhythm and content of speech ('denaturalised approach') (Oliver et al., 2005).

I adopted a denaturalised approach to transcription to facilitate the content analysis process needed to answer my research questions. The usual conventions of punctuation

were used, and in prioritising accessibility, I decided to omit non-lexicals such as ‘umm’. Whilst recognising that this approach precludes the more linguistically orientated speech analysis suitable for those researchers interested in oral language intricacies, the use of such a fine-grained ‘naturalised’ approach would be inappropriate for generating data in the context of this study - not least as the majority of participants spoke via an interpreter.

The transcription conventions acknowledged the importance of all parties involved in the co-construction of the interview talk. In addition to the participants’ talk, the contributions of the interviewer and research assistant were also considered elements of the analysis. Hence, my questions or interventions, as well as those of the research assistant, were transcribed.

3.5.7. Analysis of semi-structured interview and focus group discussion data

The interviews and focus group discussions generated rich textual data, which was initially analysed using both an inductive and grounded approach to identifying and developing themes and a theoretically derived *a priori* template reflecting key elements of the problem-structuring and frame-reflective approaches (Hoppe, 2010; Rein & Schon, 1996). This dual approach to the analysis tried to balance exploring the possibilities of applying theory to the analysis with the potential for inductively surfacing new interpretations by participants.

However, my attempt to use theoretical frame-reflective elements⁴⁷ as a deductive analytic frame was largely unsuccessful. Whilst some elements of problem frames are common across the interpretive framing literature, other elements are less well-defined and subject to differing interpretations. The framing elements of ‘Problem Definition’ and ‘Suggested Solutions’ are readily understandable and common to all versions of interpretive framing that I reviewed and informed the design of the interview schedules used in this study. However, the interpretive or problem frame elements of ‘Ultimate Preference’ and ‘Background Theory’ (Hoppe, 2010) are less clearly formulated in the literature. ‘Background Theory’ (Hoppe, 2010), for example, is alternatively termed ‘Implicit Theory’ (Mathur et al., 2013), ‘Theory of Change’ (Watson et al., 2020) and ‘Action Theory’ (Van Hulst & Yannow, 2016) by different scholars. The lack of consensus on terminology and

⁴⁷ For example, ‘Problem Definition’, ‘Suggested Solution’, ‘Ultimate Preference’ and ‘Background Theory’

(Hoppe, 2010).

meaning suggests a contested and incomplete theorising of the interpretive framing approach. This lack of clarity made it difficult to operationalise the model as a qualitative data analysis frame, and I selected thematic analysis as a more workable method.

Thematic analysis of the interview data was managed and supported by using a combination of paper-based techniques and qualitative data analysis software (Nvivo 12). The stages of thematic analysis suggested by Braun and Clarke (2006) were used as a framework, namely:

1. Familiarisation with the body of data.
2. Generating initial codes.
3. Identifying themes.
4. Reviewing the themes.
5. Defining, refining and naming themes and sub-themes.
6. Producing the report.

(Adapted from Braun and Clarke, 2006:87)

Braun and Clarke (2006) and Saldana and Omasta (2016) recommend that these stages are not followed sequentially but rather that an iterative approach to analysing the data is taken, shifting backwards and forwards through the stages as necessary. Following the completion of data collection in Cambodia and my return to the UK, I began by transcribing all of the recorded interview data. Once the transcriptions were complete, I read through the data several times and consulted written notes I had made during the interviews. I then developed an initial thematic coding frame in order to begin interrogating the complete interview dataset using Nvivo 12 software. A small number of codes were predetermined by the research questions, although most were developed inductively from the data. I used Nvivo 12 to collate excerpts from the data illustrative of each identified code. All of these codes were 'descriptive' in nature.⁴⁸ I then developed summaries of codes and organised these spatially and visually, often using index cards and paper, to cluster individual descriptive codes into broader themes. As the analysis developed, some themes were adjusted or combined with others, and some new themes and sub-themes emerged,

⁴⁸ That is, a label that simply describes the basic topic of a segment of talk without interpreting its meaning or underlying implications. For example, 'debt', 'substance misuse', 'childcare'.

and more interpretive themes⁴⁹ were also developed. The final thematic analysis was produced through the ongoing and iterative process of coding, reading the literature, and reflecting on the data.

3.6. Research validity, reliability and generalisability

In the final section of this chapter, I discuss epistemological issues related to assessing the overall quality of the research and its findings. While research quality concepts such as validity, reliability, and generalisability are familiar and well-operationalised in the natural sciences, transferring these same cross-checking and quality assurance procedures and techniques over to qualitative research presents some epistemological problems (Mason, 2002).

Validity refers to the accuracy with which ‘reality’ is captured within the research (Kvale, 1989). Whilst quantitative research often seeks to establish validity through the ‘operationalisation’ of concepts, Mason (2002) argues that approaches to validating qualitative research are more varied and dependent on the epistemological position adopted in the research. For example, whilst some elements of participants’ accounts could be cross-checked against public or media records to establish or bolster their validity (or ‘truth’), such an approach presupposes that there is one external reality that can be objectively ascertained, a claim that social constructionists and many post-modern theorists reject. Plummer (1995 in Jones, 2009) suggests that validity in qualitative research is not to be judged by the ‘historical’ or ‘factual’ truth of an account but instead through the ‘narrative truth’ that the account and its analysis reveal about *‘why this story is told in this way at this time and what historical conditions’*⁵⁰ and socioeconomic contexts make this possible. This study views caregivers’ and social workers’ perceptions of family separation and the placement of children in orphanages as socially constituted and social realities as multiple. Hence, the chosen research design of collecting and analysing data at different levels of the policy network. Therefore, the validity of the research rests on facilitating participants’ free and open discussion of their experiences, the explication to

⁴⁹ For example, the overarching descriptive code of ‘migration’ ultimately included sub-themes such as ‘children-left-behind’, ‘kinship/grandmother care’ and ‘rural livelihoods’.

⁵⁰ (Jones, 2009:85).

the reader of the historical, cultural, social and economic context from which these accounts emerge and a transparent presentation of the methods of analysis.

Reliability is another concept traditionally associated with quantitative research (Bryman, 2016) and refers to the possibility for the same results of an experiment or analysis to be obtained using the same methods and tools, even if the research is conducted by different researchers, with different participants at a different time. The concept of reliability is problematic within social-constructionist qualitative research as it contradicts a basic tenet of most qualitative epistemology: lived experience is fluid and socially produced in different ways, at different times, and in different contexts for different audiences and purposes. However, this does not mean that qualitative researchers need not pay attention to the accuracy, reliability and transparency of their methods (Mason, 2002), and to this end, the data collection and analysis methods used in this study have been described in detail in this chapter. Additionally, the presentation of interview excerpts in direct quotations in this dissertation provides evidence of the source of my interpretations. It also allows readers to develop complementary or alternative analyses of their own.

Qualitative research acknowledges the researcher's role in producing knowledge and recognises that the research process can never be wholly value-free and objective. Positionality in qualitative research includes reporting the process of self-reflection to make visible to the reader the relationship between the researcher's own biography and position *vis a vis* the research topic. Personal reflections on the process of developing this dissertation are presented in Sections 1.3 and 7.7.

Generalisability refers to the extent to which findings can be applied within a broader context: *'going beyond anecdotalism and instead developing an argument about 'something in particular'* (Jones, 2009:86). Unlike quantitative research, the purpose of most qualitative research is not to produce statistically representative results but instead to provide new theoretical insights, question orthodoxies and develop testable hypotheses. While this research focuses on Cambodia as a case study, the findings offer broader insights into family separation and the placement of children from impoverished and marginalised families into residential care. These insights have implications for child care deinstitutionalisation and family preservation policies and programs in other low- and middle-income countries.

3.7. Summary and conclusion

This chapter has described the methodology and methods used for this research and set out the rationale and procedures of the adopted approaches to policy-related research. It has addressed issues relating to the quality of the research and also described some epistemological, cross-cultural and ethical aspects as they relate to this study.

In the following chapter, I present and discuss my findings from the analysis of policy-related documents on family separation and the placement of children in residential care. Chapters 5 and 6 will then explore findings and analyses from interviews and focus group discussions with social work practitioners and family caregivers.

Chapter 4. Findings and discussion:

The representation of family separation and orphanage placement in Cambodian policy and programming documents

4.1. Introduction

This chapter focuses on the analysis of policy and programming documents and addresses the first research question:

What is the problem of family separation and orphanage placement represented to be in Cambodian policy and programming?

The research question was approached using a qualitative document analysis (QDA) (Altheide, 2000) of ten policy and programming documents. These documents were selected based on their influence on implementation across the government and NGO child welfare sectors. The QDA identified the relative weight accorded to addressing different drivers of family separation contained in the documentary sample to indicate government and development partner priorities. However, it did not allow for a detailed or critical analysis of the policy and programming documents reviewed. Therefore, to provide a more comprehensive analysis, two key documents that set the policy and programming framework for child care deinstitutionalisation in Cambodia⁵¹ were further subjected to interpretive and critical analysis using an adaptation of the questions proposed by Carol Bacchi in her '*What's the Problem Represented to be?*' (WPR) approach (Bacchi, 2009). This WPR analysis aims to delve deeper into these documents' underlying context and representations of family separation and orphanage placement.

4.2. Findings of the qualitative document analysis (QDA) of selected Cambodian policy and programming documents

The sample included ten documents related to child care reform and deinstitutionalisation to offer a comprehensive perspective. These documents encompassed various types of national legislation, strategic policy implementation plans, guidelines, and programme-

⁵¹ The *Action Plan for Improving Child Care 2016-2018* (MoSVY, 2016) and *The Capacity Development Plan for*

level performance indicators. The documents were sourced from both the government and international and national development partners. Nine commonly identified and widely cited risk factors for family separation and children’s residential care placement (see Section 3.4.2) were used as thematic codes in the analysis, allowing for an assessment of the type and level of attention given to interventions targeting children and families at risk of separation set out in the documents. The table below summarises the results, indicating the relative degree of consideration given to each of the nine commonly identified drivers of family separation across the documents reviewed.

Table 5. Summary of results of the qualitative document analysis

	Strong Consideration ⁵²	Consideration	Weak consideration	None/unclear
Violence Against Children (VAC)	4	2	3	1
Community attitudes	2	1	0	7
Education support	2	1	5	2
Substance abuse	1	4	4	1
Family crisis	1	1	4	4
Children with disabilities	0	3	2	5
Poverty	0	1	5	4
Migration	0	1	3	6
Children in conflict with the law	0	4	1	5

The findings of the qualitative document analysis (QDA) disaggregated at the legislative, strategic and performance indicator levels are described below.

The most frequently cited drivers of family separation that were assessed as receiving either ‘strong consideration’ or ‘consideration’ within the legislative documents reviewed⁵³ were ‘Violence Against Children (VAC)’, ‘education support’, ‘poverty’ and ‘substance

⁵² For a reminder of the definitions of these terms see Section 3.4.2.

⁵³ *Policy on Alternative Care of Children* (MoSVY, 2006), *Prakas on Procedures to Implement the Policy on Alternative Care of Children* (MoSVY, 2011a), *Sub-decree on the Management of Residential Care Centres* (MoSVY, 2015).

abuse', although none of the legislation reviewed was rated above 'weak' in its consideration of any of the risk factors, and the most frequent score across the legislative set was 'None/unclear'. There was no evidence within the legislative documents recognising positive community attitudes towards children's residential care as a risk factor, and all other risk factors were classified as either weakly considered or not referenced at all.

Turning to the strategic planning documents⁵⁴, unsurprisingly, the *Violence Against Children Action Plan* (MoSVY, 2017) gave 'strong consideration' in the area of violence against children, and contained some level of detail for strengthening child protection systems. *The Capacity Development Plan for Family Support, Foster Care and Adoption* (MoSVY, 2018) was also rated as giving 'strong consideration' in its recommendations to 'encourage and support parents to care for their children so that families can remain together' (MoSVY, 2018:30) through activities including national media campaigns and behaviour change training initiatives focussed on 'positive parenting' and the promotion of family-based care at the community level. Proposed actions for improving access to education and supporting children with disabilities and children in conflict with the law were limited. They lacked detail across all of the strategic plans reviewed, whilst the risk factors of 'migration', 'substance abuse', 'family crisis' and poverty were not explicitly referenced in any of the national-level strategic planning documents reviewed.

Finally, with three ratings of 'strong consideration', the most thoroughly treated driver across the performance indicator group of documents⁵⁵ was 'violence against children'. This was also the only risk factor for family separation, which was considered in all four of the programme performance indicator documents reviewed. Behaviour change activities to influence 'community attitudes' towards children's residential care were strongly considered in the EU/REACT programme performance indicators but were not featured in any other documents reviewed. There was limited reference to program activities related

⁵⁴ *Action Plan for Improving Child Care* (2016-2018) (MoSVY, 2016), *Action Plan to Prevent and Respond to Violence Against Children 2017 -2021* (MoSVY, 2017), *Capacity Development Plan for Family Support, Foster Care and Adoption in Cambodia 2018 – 2023* (MoSVY, 2018).

⁵⁵ Partnership Programme for the Protection of Children (3PC) Performance Indicators 2019 (Friends-International, 2019, internal document). EU Responsiveness & Effective child Welfare Systems

Transformation (REACT) Indicator Guide 2019 (USAID, 2019, internal document), Cambodian Child Protection Monitoring Framework (UNICEF Cambodia, 2019b, internal document).

to ‘children in conflict with the law’ or that specifically addressed issues related to ‘children with disabilities’, ‘family crisis’, ‘migration’ or ‘poverty’.

In summary, the main findings of the qualitative document analysis were that, with the most frequent rating across the document set being ‘None/unclear’, measures to prevent family separation and the placement of children in residential care through family support services targeting commonly identified drivers of family separation have received limited policy and programming attention to date. Instead, the analysis revealed an emphasis on activities to reduce violence against children, conduct behaviour change campaigns to improve parenting skills, counter positive community attitudes towards children’s residential care, and improve access to education. At the other end of the spectrum, measures to address the inter-related effects of poverty and migration on families at risk of separation received the least attention.

4.2.1. Issues arising from the Qualitative Document Analysis (QDA)

4.2.1.1. Reflections on the QDA approach

The purpose of conducting a QDA was to identify any trends in the documents that might contribute to answering the first research question: What is the problem of family separation and orphanage placement represented to be in Cambodian policy and programming?

The qualitative document analysis approach was, to some extent, successful in achieving this aim. It revealed that current Cambodian child care reform policy and programming prioritise strengthening child protection systems to reduce violence against children, delivering parenting programmes and behaviour change campaigns, and improving access to education. In addition, the qualitative document analysis revealed a lack of policy and programming attention to preventing family separation through recognising and mitigating poverty and income-related factors that contribute to parents and caregivers placing their children in residential care.

While helpful in making an initial identification of patterns and trends within a corpus of disparate policy documents, my review of other studies using QDA (Wach et al., 2013; Wood et al., 2020) and my own experience with the method found it to be a blunt methodological tool. One limitation in the context of this study was the lack of detail in the

sampled documents. Hence, the quality and relevance of the material were insufficient to support claims for robust and valid findings from the QDA. Without supplementing the QDA with other methods, it was impossible to assess whether officially stated policy remained at the level of rhetoric or whether the agencies had mechanisms and resources to implement the documented plans and strategies effectively. The implications of missing or sparsely detailed descriptions of themes are unclear, suggesting a need to triangulate the QDA results with other data sources to develop a deeper understanding of the diverse and interrelated factors associated with the placement of children in residential care in Cambodia. Given these limitations, the implications of the QDA results should not be overstated, and the following section restricts itself to considering only the most obvious trends identified. Below, I discuss poverty and violence against children, which the QDA found to have respectively received the lowest and highest levels of attention in the documents.

4.2.1.2. Poverty

Whilst the QDA found none of the policy or programming documents to contain detailed consideration of the effects of poverty and low-income on Cambodian families at risk of placing their children in care, it is a truth, universally acknowledged that *‘poverty is a core driver of family separation in Cambodia’* (Coram International, 2018:19). Among older children interviewed for a mapping study conducted in Cambodia by Columbia University, 75% of children spoken to said that they were living in residential care to escape poverty and gain access to education (Stark et al., 2017). A survey of residential care institutions in the Northern province of Battambang similarly found that nine out of ten participating orphanage Directors cited poverty as the reason given by parents when placing their children in the orphanage (Fiss & Mathews, 2016).

The QDA revealed that the measures aimed at addressing the impacts of low family income and poverty were only superficially addressed in the reviewed policy and programming documents. There was no corroborating contextual or operational detail at the programming or implementation levels. This is despite robust evidence that household economic strengthening (HES) interventions (for example, emergency relief assistance, grants, loans, vocational training and other supports for employment and income-

generating activities) can have a positive impact on the capacity of caregivers to meet the needs of their children and reduce the risk of family separation (Boothby et al., 2012;

Chaffin & Kalyanpur, 2014; Laumann, 2015). Although some household economic strengthening interventions are implemented BY ngoS in Cambodia,⁵⁶ their low profile in policy and programming documents aimed at reducing the number of children living in residential care and keeping them living with their families reflects neoliberal capitalism's tendency to leave individuals, families, and communities to find their own solutions to structural socioeconomic forces. It also suggests a lack of institutional interest or enthusiasm to develop and support such approaches at scale.

While the qualitative document analysis included only those sections of the documents relating directly to activities aiming to address commonly identified drivers of family separation, considered in their entirety, the documents paid limited attention to family preservation or poverty alleviating services overall, instead prioritising regulatory frameworks and procedures for the closure of residential children's institutions and the reintegration of children to family-based care, the strengthening of non-residential alternative care options,⁵⁷ and the delivery of programmes aimed at improving 'parenting capacity' and reducing violence against children.

4.2.1.3. Violence Against Children

Most children in residential care in Cambodia are placed there voluntarily by their parents, with access to food and education cited as the major benefits (MoSVY, 2011; Fronek et. al., 2019; Stark et al., 2017). This dynamic is in contrast to high-income countries where the most common reason for children being out-of-home care is due to child protection concerns such as sexual abuse, exploitation and mental health issues (Ofsted, 2022). Despite this, violence against children received significant attention in the documents analysed, with six documents assessed as giving 'strong consideration' or 'consideration' to

⁵⁶ For example, M'lop Tapang's Family Strengthening Programme in Sihanoukville focuses on on economic strengthening through small business trainings and grants. The types of business supported vary, but have included liVestock raising, fishing, laundry services and market stalls (MoSVY, 2019a).

⁵⁷ The prioritising of interventions for children already out-of-family-care, with a relative dearth of research, policy or practice looking at preventing family separation in the first place can also be seen in the focus on child care deinstitutionalisation and alternative care in the available and forthcoming practice guidance in Cambodia (e.g. *Study on Alternative Care Community Practices* (MoSVY, 2018a); *Draft Guidelines for the Reunification and Reintegration of Children from Residential Care in Cambodia* (MoSVY, 2018a); *Draft National Guidelines on the Procedures for Kinship Care, Foster Care & Domestic Adoption* (MoSVY, 2018b),

and the apparent absence of any plans to produce similar documents to guide the delivery of family support and family preservation services.

this issue. Among potential drivers of family separation, it was the one that received the highest level of policy focus.

This finding is surprising in the context of this study's focus on interventions to reduce or prevent family separation and the placement of children in residential care.

Foregrounding interventions to reduce violence against children, the *Action Plan for Improving Child Care* (MoSVY, 2016) describes its strategy to:

'Provide basic positive parenting information and advice . . . for families at risk of violence or unnecessary family separation' (MoSVY, 2017:15)

While the Violence Against Children Action Plan (MoSVY, 2017) seeks to:

'Implement a national behavioural change campaign to prevent and respond to violence against children and unnecessary family separation' (MoSVY, 2016:11)

Similarly, the *UNICEF in Cambodia Country Programme 2019 - 2023* (UNICEF, 2019) sets out to:

'[Run] campaigns to change people's behaviour and their perceptions of discipline—campaigns that champion positive discipline and challenge existing thinking that perpetuates unnecessary family separation.' (UNICEF, 2019: 8)

The yoking together of 'violence against children' (and in particular physical abuse and harsh and abusive forms of discipline) with the risk of 'unnecessary family separation' is common across the child care reform policy documents (MoSVY, 2016; MoSVY, 2017; MoWA, 2017; UNICEF, 2019) and conflates two separate issues. Thus, while violence against children was the most thoroughly considered risk factor identified by the QDA, protection from abuse is *not* identified as a significant driver of orphanage placement in the literature on family separation and orphanage care in Cambodia. Neither was it identified in the accounts of residential care placement provided by the social workers and family caregivers who participated in this study.

The qualitative document analysis revealed a strong focus on reducing violence against children and changing parental attitudes and behaviours, with limited measures aimed at providing household economic strengthening (HES) or other financial support. This suggests a policy and programming preference for interventions that individualise family problems

and emphasise parental attitudes and behaviours as leading drivers of family separation and high numbers of children placed in residential care. This orientation

towards parental behaviour change and statutory child protection responses at the expense of providing more holistic and preventative services has also been noted as a feature of contemporary social work policy and practice in Western countries, with some scholars challenging its outcomes and effectiveness. For example, in analysing child protection trends in high-income countries, Gilbert et al. (2012) concluded that there was *'no clear evidence for an overall decrease in child maltreatment despite decades of policies designed to achieve such reductions'* (Gilbert et al., 2012:770). More recent studies in the UK (Bilson & Martin, 2017) and Australia (Bunting et al., 2018) also found no reduction in child protection referrals or harm over twenty years and concluded that the increase in the number of child protection investigations⁵⁸ and children separated from their families in English-speaking countries in recent years was in part due to a prevailing policy and practice orientation in which:

'Children are seen in individualistic ways as vulnerable victims requiring intervention, whilst parents are viewed as to blame for difficulties their families face . . . [an] individualisation [which] hides the impact of poverty and other social trends.' (Bilson in Boudrie, 2020:16)

Asked about lessons that low- and middle-income countries should consider when reforming their child care policies and practices, Bilson suggests that:

'The starting point is to avoid the individualisation of family difficulties seen in many high-income countries and work to reduce the full range of stresses that families face.' (Bilson in Boudrie, 2020:19).

The primacy of child protection-related activities revealed by the QDA may also be linked to violence against children enjoying a higher global profile and policy and funding priority than child care reform and deinstitutionalisation. Momentum for concerted global action to reduce violence against children has increased over the last decade. Importantly, national governments approved a Sustainable Developmental Goal (SDG 16.2) to end the *'abuse, exploitation, trafficking and all forms of violence and torture against children'* (United Nations, 2016). As a result of this heightened attention and associated funding streams, an increasing number of governments, including the Cambodian government, have, with the financial and technical help and support of their international partners,

⁵⁸ Child protection investigations have increased sharply. In Australia (42% between 2012 and 2016), Canada

(74% between 1998 and 2008) and England (122% between 2010 and 2018)' (Bilson in Boudrie, 2020:16).

developed national strategies, action plans, and road maps dedicated to combatting violence against children.

4.2.1.4. Summary

The commonly identified drivers of family separation that received the highest level of consideration across the complete set of selected policy and programming documents concerned issues related to violence against children, followed by ‘community attitudes’. The drivers that received the least attention in the documents were ‘migration’ and ‘poverty’. These findings suggest that current child care reform policy and programming in Cambodia pays limited attention to preventative family support services overall and prioritises individualised responses to violence against children and parental attitudes and capacity at the expense of engaging with more structural socio-economic and psycho-social issues such as under-investment in public services or the impacts of poverty on family life in Cambodia.

Considering the Cambodian government’s high-profile objective of reducing the number of children living in orphanages and preventing family separation, and in light of the evidence identifying poverty as the most common reason for parents and caregivers placing children in residential care in Cambodia (MoSVY, 2011), the QDA’s findings of limited policy and programming attention on household economic strengthening (HES) measures and the dominant focus on reducing violence and delivering parenting programs is an apparent anomaly requiring further exploration and explanation.

The following section extends our understanding by using the ‘*What’s the Problem Represented to be?*’ approach (Bacchi, 2009) to identify and critically analyse the implicit representations of family separation and children’s residential care in key policy and programming documents.

4.3. What’s the Problem Represented to be?

In this section, I employ the ‘*What’s the Problem Represented to be?*’ (WPR) approach (Bacchi, 2009) to disclose the institutional and political meaning-making practices inherent in the presentation of family separation and orphanage placement in two of the most influential policy and programming documents from the ten-document sample analysed in the qualitative document analysis. The remainder of this chapter uses adaptations of

questions taken from the WPR approach to identify and analyse the problem representations implicit within the documents, the assumptions that constitute their conceptual logic and the effects they produce.

The WPR questions considered in this chapter are:

1. What's the problem of family separation and orphanage placement represented to be in child care reform policy in Cambodia?
2. What presuppositions or assumptions underlie this representation of the problem?
3. How has this representation of the problem of family separation and orphanage placement come about and been disseminated in Cambodia?
4. What effects are produced by this representation of the problem?

The remaining WPR question addressed in this study is:

5. What is left unproblematic in this problem representation?

This final question is addressed in Chapter 5 and Chapter 6 using data from semi-structured interviews and focus group discussions with social workers and caregivers who have lived experiences of family separation and orphanage placement.

4.3.1. Selection of the WPR analysis policy texts

The two documents selected for the WPR analysis are the *Action Plan for Improving Child Care 2016-2018* (MoSVY, 2016) (hereafter referred to as the *Action Plan* (MoSVY, 2016), and the *Capacity Development Plan for Family Support, Foster Care and Adoption in Cambodia 2018 - 2023* (MoSVY, 2018) (hereafter referred to as the *Capacity Development Plan 2018-2023* (MoSVY, 2018)). Within an interpretative methodological approach, the selection of policy and programming texts for analysis is a subjective exercise reflecting the research questions and overall aims of the research. The *Action Plan* (MoSVY, 2016) and the *Capacity Development Plan 2018-2023* (MoSVY, 2018) were selected as they have provided the underpinning strategic and operational framework shaping child care reform in Cambodia from 2017 to 2024. Their closer analysis is potentially valuable for generating insights about the conceptualisation and problematisation of family separation and its prevention.

The *Action Plan* (MoSVY, 2016) committed the Cambodian government and its development partners to the ambitious target of reintegrating 30% of institutionalised children into family-based care within a two-year timeframe.⁵⁹ The *Action Plan* (MoSVY, 2016) resulted in significant injections of donor funds and a national mobilisation and coordination between government and NGO child care reform actors to restrict admission to residential children's institutions and reintegrate children living in them to their families. In 2018, the timescales for achieving the target were extended until 2020. While the number of children in residential care in Cambodia is now estimated to have reduced by more than 10,000 children since 2017 (MoSVY, 2020), much of this reduction has been due to factors external to formal policy, such as the impacts of COVID-19 and the mass closure of orphanages due to a lack of funding and support from donors.⁶⁰

The *Capacity Development Plan 2018-2023* (MoSVY, 2018) makes practical recommendations structured as a work plan for building capacity in the areas of family support, foster care and adoption. To achieve the aims of this study, which focus on generating new knowledge to inform preventative strategies for keeping families together, I concentrate on Section 2 of the document titled '*Family Support: Findings and Capacity Development Recommendations*' (MoSVY, 2018, pp. 27-43). Consequently, less attention is paid to the foster care and adoption sections.

4.4. WPR question 1: What's the problem of family separation represented to be in child care reform policy in Cambodia?

The recommendations and actions advanced in both the *Action Plan* (MoSVY, 2016) and the *Capacity Development Plan 2018-2023* (MoSVY, 2018) reflect the priorities identified by the qualitative document analysis and are underscored and justified by reference to their underpinning international standards, '*in particular the UN Convention on the Rights of the Child (UNCRC, 1989), the UN Guidelines for the Alternative Care of Children (UNGAC, 2011-) and the 1993 Hague Convention on Protection of Children and Co-operation in respect of Intercountry Adoption (HCCH, 1993)*' (MoSVY, 2018:8). These three international frameworks are briefly described below:

⁵⁹ According to government estimates this represents around 3,500 children (MoSVY, 2020)

⁶⁰ See Section 6.2.1 for more detailed discussion.

The United Nations Convention on the Rights of the Child (UNCRC, 1989) is a set of basic standards - termed 'rights'- that articulate minimum entitlements related to children that signatory governments pledge to uphold. In considering the prevention of family separation, the most pertinent articles of the convention are:

- Article 9: '*A child should only be separated from their parents if there is a decision that it is in their best interests.*' (UNCRC, 1989: 5).
- Article 18: '*Both parents, where possible, share responsibility for bringing up their child and . . . governments should help parents and legal guardians by providing services to support them.*' (UNCRC, 1989: 6).

Signposting the Cambodian government's deinstitutionalisation policy and programming as being consistent with international child rights standards, the Preface to the *Action Plan* (MoSVY, 2016) states:

'The objective of the reintegration of children from residential care institutions to families is fully in line with the guiding principles of the UN Convention on the Rights of the Child (UNCRC), to which Cambodia is a signatory' (MoSVY, 2016:5)

A UN Committee monitors the implementation of the *United Nations Convention on the Rights of the Child* (UNCRC, 1989) by signatory governments of the convention and reviews progress and issues guidance based on reports submitted by governments and civil society organisations (CSOs). Article 9 violations linked to Cambodia's over-reliance on children's residential care have been repeatedly highlighted in the UN Committee reports and guidance (Chaney, 2022). While policy developments such as the *Action Plan* (MoSVY, 2016) and *Capacity Development Plan 2018-2023* (MoSVY, 2018) have been designed to respond to these concerns, the Cambodian government's 2018 submission to the Committee reported that just 549 children had been reintegrated to their birth families or other family-based care between 2015 and 2017 (GoC, 2018 in Chaney, 2022). Three years later, this figure had risen to 1,419 children, as reported by the government, as having been supported for family reintegration in their *Report on the Results of the Action Plan for Improving Child Care* (MoSVY, 2020).

The *United Nations Guidelines for the Alternative Care of Children* (UNGAC, 2010) states the overall purpose of the guidelines as being to '*enhance the implementation of the*

Convention of the Rights of the Child regarding the protection and well-being of children who are deprived of parental care or who are at risk of being so' (UNGAC, 2009: 1). In terms

of this study's focus on policy and programming aimed at *preventing* unnecessary family separation, we should note that the guidelines seek '*to support efforts to keep children in, or return them to, the care of their family*' (UNGAC, 2009:12).

Finally, the *Hague Convention on Protection of Children and Co-operation in respect of Intercountry Adoption* (HCCH, 1993) provides a framework for the process of inter-country adoption, which is aimed at protecting the best interests of the child and establishing a system of cooperation between contracting countries to prevent the abduction, sale, or trafficking of children. The intersections of child care reform, deinstitutionalisation, alternative care and inter-country adoption in Cambodia are complicated and contested, and the policy-level treatment of alternative care and adoption in the *Capacity Development Plan 2018-2023* (2018) will be discussed in more detail in response to WPR question three.⁶¹

Under these three international frameworks, the *Action Plan* (MoSVY, 2016) sets its aim of '*returning 30% of children in residential care to their families*' (MoSVY, 2016:3) within a child rights framing, recognising the government's need to uphold '*the inalienable right of every child to remain safely with the mother and father whenever possible*' (MoSVY, 2016:13). The *Action Plan* (MoSVY, 2016) further recognises that its purpose and scope is limited to the task of reducing the total number of children living in residential care by 30% through reducing the overall number of residential children's institutions, restricting admission to such facilities and reintegrating a significant number of children and young people living in residential care to their families.

However, the literature review revealed weaknesses in the evidence base that make accurately assessing the results of the family reintegration campaign in Cambodia difficult. For example, enumerations of the total number of children living in Cambodian residential care in 2016 range from the government's figure of 16,579 (MoSVY, 2020) to Stark et al. (2017) estimate of 48,775. Assessing the accuracy of either figure is challenging. Whilst the methodology used by Stark et al. (2017) looks to be unsuited to the Cambodian context

⁶¹ WPR Question 3: 'How has this representation of the 'problem' of family separation and orphanage

placement come about and been produced and disseminated in Cambodia’?

and likely to result in an overestimate,⁶² the government reports provide no details on how the data they present was obtained.

While the *Action Plan* (MoSVY, 2016) primarily focuses on establishing procedures for family reunification, the sections dealing with ‘Better Gatekeeping’ and ‘Prevention and Family Preservation’ provide some detail on actions to prevent family separation. Below, I have synthesised information from various sections of the policy document (MoSVY, 2016).

- No new residential care institutions to be opened;
- Existing residential care institutions should not increase the number of beds;
- No new placement of a child in residential care to proceed without approval at local, district and ministerial levels;
- Positive Parenting programmes for parents and caregivers;
- Behaviour change campaigns to prevent unnecessary family separation and orphanage placement; and
- Development and dissemination of communication materials promoting family preservation to various local actors, including commune and village-level authorities, Village Health Support Groups, monks and other religious leaders.

(MoSVY, 2016:13-14)

Thus, the preventative interventions proposed in the *Action Plan* (MoSVY, 2016) centre on strengthening the regulatory framework of the children’s residential care sector and attitude and behaviour change programmes targeted at parents, caregivers, and local-level decision-makers. While parenting programmes deliver training on topics such as child development, family communication styles, and positive discipline, behaviour change campaigns promote the importance of keeping families together and the negative consequences of placing children in residential care.

‘Several initiatives will be implemented to ensure prevention of unnecessary family separation and family preservation. They include:

- *A behavioural change campaign to prevent unnecessary family separation.*
- *Development of information and communication materials on unnecessary family separation integrated into the village commune safety policy.*

Parenting programmes for vulnerable parents and caregivers. (MoSVY, 2016:13)

⁶² See Section 2.4.3.

Below is an example of deinstitutionalisation media materials used by MoSVY, UNICEF Cambodia, USAID and the 3PC network of NGOs. The poster was part of a behaviour change campaign targeting Cambodian parents and caregivers. The message at the top of the image reads: "Orphanages tear families apart".

Figure 7. Orphanages tear families apart (Friends-International, 2016)



A similar set of interventions to those featured in the *Action Plan* (MoSVY, 2016) is found in the family support-related proposals outlined in the *Capacity Development Plan 2018-*

2023 (MoSVY, 2018: 27-43). Below, I present information collated and synthesised from

several sections of this policy document (MoSVY, 2018), including specific recommendations. Most points are drawn from Section 2, 'Family Support: Findings and Capacity Development Recommendations' (MoSVY, 2018, pp. 27-43), supplemented by relevant points from other sections.

Table 6. Family Support: Findings and capacity development recommendations

'Family Support: Findings and capacity development recommendations' <i>Capacity Development Plan 2018-2023</i>	
Encourage and support parents to care for their children so that families can remain together.	• Centralise and disseminate information on existing family support services (services inventory/matrix and smartphone app). • Inventory of all hotlines. • Matrix of all hotlines. • Create a national hotline for referrals. • Universal birth registration.
Develop safety net measures to protect children at risk when primary prevention has not worked	• Create an inventory of all alternative care/adoption providers. • Create a matrix of all service providers. • Create a national directory of services. • Develop an online case management system. • Set up respite care (for infants and children with disabilities). • Set up community centres. • Roll out a national behaviour change campaign on deinstitutionalisation.
When entry into the alternative care system is unavoidable, efforts should focus on a 're-start.'	• Promote kinship care. • Train RCI staff on reintegrating children into biological families. • Create a database for registering abandoned children.
Introduce effective gatekeeping mechanisms	• Train local-level stakeholders on their 'gatekeeping' responsibilities. • Harmonise admission procedures for all RCI. • Roll out national behaviour change campaign on de-institutionalisation.

(MoSVY, 2018: 27 - 43)

Many of these activities to develop the capacity of family support services emphasise technical and system-level information and data-related measures (for example, collating and disseminating service provider information and developing online case management tools), strengthening regulation and oversight of the children's residential care sector (for example, through harmonised and enhanced admissions procedures) and behaviour

change approaches aimed at aligning caregivers and the social workforce with the principles underlying child care reform and deinstitutionalisation.

The WPR approach challenges the tendency to think of policy primarily as a neutral ‘problem solving’ activity, applying common-sense solutions to ‘really existing problems’ that sit outside of the policy process waiting to be ‘fixed’. Instead, it draws attention to the ways in which policy and programming documents constitute and shape the representations of the problems they purport to solve. WPR Question 1 seeks to identify the fundamental problem representation implicit in specific policy and policy-related material, and in line with the approach’s critical orientation ‘*sets the researcher up to move beyond face value assessments of social problems in order to unearth deeper ideational logics at play in the discourse at hand*’ (Pringle, 2019:6). Question 1 of the WPR approach posits that underlying problem representations are latent within the policy texts themselves, and ‘*recommends ‘working backwards’ from concrete proposals to reveal what is represented to be the ‘problem’ within those proposals*’ (Bacchi, 2009:3). Following this line, the family support recommendations of the *Action Plan* (MoSVY, 2016) and the *Capacity Development Plan 2018-2023* (MoSVY, 2018) represent the problem of family separation in a deficit frame that foregrounds the role of weak regulation of residential care institutions (particularly regarding ease of admission) and the perceived positive attitudes and behaviours of parents and sub-national child welfare practitioners towards placing children from poor families into residential care. The proposed interventions outlined in the documents emphasise the expedited return of children living in residential centres to their families, systems-level information and data-related measures, regulatory strengthening and behaviour change approaches aimed at aligning caregivers and social work practitioners with the principles underpinning child care deinstitutionalisation.

Both documents frame their activities as the solution to the ‘problem’ spelt out by the UN Committee on the Rights of the Child (UNCRC, 2011:10). Namely, Cambodia’s failure to meet internationally endorsed child rights standards by having too many children living in orphanages. The proposed solution to this representation of the problem involves conducting a two-year campaign to return 30% of all children living in residential care to their families. This effort will be supported by supply-side measures, including a moratorium on opening new residential children’s institutions and stricter regulations for

the sector. Meanwhile, activities to reduce the demand for children's residential placements focus on educating caregivers and other stakeholders on the negative impacts

of residential care and the importance of biological families living together via parenting programmes and behaviour change campaigns. Proposed interventions to provide psychosocial, household economic strengthening or material support to families at risk of separation are conspicuous by their absence.

In summary, the *Action Plan* (MoSVY, 2016) and the *Capacity Development Plan 2018 -2023* (MoSVY, 2018) represent the problem of family separation as being *a failure to meet internationally endorsed child rights standards manifested as too many children living in residential care due to weak regulation and positive community attitudes towards children's residential care*.

4.5. WPR question 2: What presuppositions or assumptions underlie this representation of the problem?

Answering this question requires identifying and analysing some assumptions underpinning the above-mentioned problem representation. These logics validate the problem representation and provide the conceptual foundations for the policy framework. This WPR question invites us to think about the understandings that underlie the problem representation and to ask, 'What is presupposed and taken for granted in the representation of the problem as *'a failure to meet internationally-endorsed child rights standards manifested as too many children living in residential care due to weak regulation and positive community attitudes towards children's residential care'*?

The documents' representation of the problem of family separation highlights international child care norms and centres on the role of children's residential care, signalling the global child care deinstitutionalisation policy framework as an underlying assumption.

In a globalised world in which transnational agencies and actors exert influence across national boundaries, many social policies are more-or-less international, and the child care deinstitutionalisation policy model, with its global expansion described in several studies (Huseynli, 2018; An and Kulmala, 2021), is a good example of this phenomenon. The representation of family found in the *Action Plan* (MoSVY, 2016) and the *Capacity Development Plan 2018-2023* (MoSVY, 2018) and their associated parenting skills curricula (MoWA, 2017) is that of an independent, two-parent family emotionally centred on the

child, in whom the parents invest time and resources, for example through play, parent-child discussion and educational activities. This model of family life is far from universal in

many settings, where, for example, families subsist on low and precarious wages and one or both parents may have demanding income-generating or employment conditions or migrate for work, leaving children in the care of grandparents. Many parents and caregivers may not 'play' with their children (as children play with their peers). Families may struggle to cope with additional issues associated with multi-dimensional poverty, such as poor health, disability, substance misuse, domestic violence or debt. They may not have the resources, leisure or capacity to provide home-based educational support. These really-existing parenting norms fall short of the 'positive parenting' ideal of the family circulated as parenting 'best practices' by international child protection and welfare agencies (McCoy et al., 2020; MoWA, 2017), and solving this parent-blaming representation of the problem of family separation invites the type of policy and programming responses proposed in the strategic plans (for example, behaviour and attitude change training for parents and caregivers).

The focus on residential children's institutions in the representation of the problem (WPR Question 1), as well as the emphasis on the closure of residential care centres, family reintegration and alternative care found in the *Action Plan* (MoSVY, 2016) and the *Capacity Development Plan 2018-2023* (MoSVY, 2018), identifies the core principles and policy prescriptions of child care deinstitutionalisation as a key assumption underlying the problem representation embedded in the Cambodian policy documents. Whilst the harms to young children and infants associated with residential care placement are well documented (Browne, 2009; Schoenmaker et al., 2014; Berens & Nelson, 2015), most of the evidence underpinning the global movement to deinstitutionalise children's care is based on findings of the effects of residential care on children who experienced extreme levels of early deprivation in state-run institutions in the former Soviet bloc. The move to global DI policies was accelerated by the work of NGOs and agencies such as LUMOS, Hope and Homes for Children, Save the Children and UNICEF in Romania and other East and Central European countries in the 1990s and 2000s (Ulybina, 2020; 2023). However, due to the differing circumstances and experiences between the former Soviet states and the African and Asian countries where the majority of children and youth now living in residential children's institutions are found (UNICEF, 2017), caution is needed when extrapolating research findings to these diverse countries and contexts.

Children and youth in Southeast Asia often enter different types of residential care centres at an older age and in different social, economic and cultural contexts than in the former

Soviet states (MoSVY, 2011; Shawar & Schiffman, 2020). For example, a typical residential children's 'institution' in Cambodia tends to be staffed by live-in carers accommodating a small number of children, often in a location close to the children's families. This contrasts with accounts of the situation historically pertaining to Eastern Europe and other post-Soviet contexts where many children placed in orphanages had been abandoned, had no contact with their birth families and were cared for by shift-working staff primarily concerned with the practicalities of managing high numbers of children in large, impoverished institutions (Nelson et al., 2014). The photograph below represents a residential care context familiar to me from my professional experience in Cambodian residential children's institutions.

Figure 8. Photograph from a Cambodian residential children's institution (Hong Wu, Getty Images)



Whilst the acceptability of large-scale institutions focused on meeting children's physical rather than developmental and emotional needs is now outdated, the debate and evidence around the role of residential care for children is not as settled or clear as the literature or

advocacy associated with the global promotion of deinstitutionalisation might suggest. The role of residential care for children outside of family care remains contested, with significant international differences remaining. For example, English-speaking countries tend to place only a small proportion of their out-of-home children in residential care compared with mainland Europe (6% in Australia v. 54% in Germany) and East Asia (14% in England v. 92% in Japan) (Ainsworth & Thoburn, 2014:18). These variations suggest significant differences in assumptions and attitudes towards residential care between different high-income countries and call into question the common perception that the continued use of children's residential care is primarily a 'problem' associated with 'under-development' in low- and middle-income countries requiring the expertise and support of Western development partners to modernise their children's services.

Both the *Action Plan* (MoSVY, 2016) and the *Capacity Development Plan 2018-2023* (MoSVY, 2018) cite the UNCRC (1989), UNGAC (2010) and other global agreements to position their national strategic plans as contributing towards upholding internationally endorsed child rights and child care deinstitutionalisation principles and policy models. Reflecting on the child rights framing of child care reform, Ulybina (2023) argues that DI is a '*typical product of modern world culture. It is underpinned by the sanctity of the individual, with their own individual . . . rights*' (Ulybina, 2023). Viewed through a Modernisation Theory lens (Rostow, 1960), both children's rights and deinstitutionalisation can be seen as global policy trends that advance individualising Western conceptualisations of childhood, family life and society.

Contextually, the assumption that children should ideally live with their birth family found in the representation of child care in the UNCRC (1989), UNGAC (2010), the *Action Plan* (MoSVY, 2016), and the *Capacity Development Plan 2018-2023* (MoSVY, 2018) fails to recognise, or engage with substantively, the more-or-less strong collectivist cultural traditions of extended family solidarity, support within patronage networks and informal fostering of children that is common in Cambodia and other low and middle-income countries. (MoSVY, 2011; Hoffman, 2021). This really-existing approach to 'doing family' in resource-constrained settings does not insist on keeping children at home with their birth parents but accepts - even welcomes – the placement of children with other families and households. For example, Hoffman's study of orphanage placement in Haiti notes:

‘Parents commonly place children with relatives or non-relatives who are marginally better off than they are, particularly if the new household is perceived to offer more opportunities for children such as schooling.’ (Hoffman, 2021:584).

While few people would disagree that all-things-being-equal *‘[children] should grow up in a family environment’* (UNCRC, 1989: 1), that agreement is neither categorical nor unconditional. The reference to accessing opportunities cited above raises questions about assessing and judging the motivations and needs of those opting to place their children in residential care. The proposed programming interventions seeking to change the behaviour and attitudes of parents and caregivers presuppose that the placement of a child in residential care is an elective ‘choice’ made by parents and caregivers and, therefore, amenable to media messaging and parenting programmes aimed at changing so-called ‘positive community attitudes’ towards children’s residential care.

‘DI discourse . . . contains a theory of action that assumes that children, families, relatives and community are empowered to make choices and capable of taking care and responsibility.’ (Ulybina, 2023: 267)

Similarly, the *Action Plan* (MoSVY, 2016) and the *Capacity Development Plan 2018-2023* (MoSVY, 2018) represent ideals of family and parenting that are *‘at odds with local cultural realities and constraints’* (Hoffman, 2021:578) and remain largely silent on the role played by poverty in family separation and orphanage placement. Nested within the overarching representation of the problem as an over-reliance on children’s residential care is the assumption that families should be independent and that the very poorest Cambodian parents and caregivers can meet their children’s basic needs for food, health care, education and safety within their communities. This assumption is not supported by the literature (Fronek et al., 2019; MoSVY, 2011; MoSVY, 2018) or by the accounts of family separation provided by social workers and caregivers presented later in this study. Those accounts reveal that the decision to place a child in residential care is often a painful and emotionally conflicted one, made when caregivers feel that they have few or no other options for meeting their children’s basic needs or accessing the quality of education they believe can help them escape poverty.

Finally, analysis and interpretation of the assumptions embedded within the representation of the problem of family separation and residential care placement found in these

documents indicate how the idea of family can be politically and ideologically deployed, suggesting that globalised child care reform and deinstitutionalisation policy,

programming and discourse, while ostensibly being about ensuring children their rights, can also be a vector for opening up or maintaining channels for Western intervention and neoliberal governmentality in geopolitically strategic aid-dependent countries like Cambodia.

Recent trends in thinking about disadvantaged childhoods point to the role of neoliberalism in the framing of globalised child care reform models (Cooper, 2017; Cheney & Ucembe, 2019; Cheney & Sinervo, 2019) as family and childhood are *'key arenas for [the] enactment of neoliberal policies via responsabilisation, standardisation, surveillance, monitoring for compliance and positioning children as human capital investments for national economic development'* (Balagopalan, 2008:376).

The prevailing and 'replicable' global deinstitutionalisation policy model (Herczog et al., 2001) inadequately considers local structural, social and economic factors that lead to orphanage placement. It also overlooks the diversity of families' needs and capabilities, the potential benefits of investing in improving residential care provision, and the possible advantages of residential care for some children and youth.

The neoliberal process of parental responsabilisation also shifts state responsibility in the areas of child care and family support back to families and communities⁶³ and valorises the stable, bounded nuclear family model, which can be more easily subjected to surveillance, accountability and other internal and external social control mechanisms.

'The 'vulnerable' [child] discourse and its related concepts are refracted through a neoliberal responsabilisation agenda aimed at their parents.' Keddell & Davie (2018:94)

These governmentality and subjectification effects of particular ways of representing the 'problem' of family separation are further discussed in answer to WPR Question 4 (see Section 3.5).

⁶³ Here one can consider Western countries' deinstitutionalisation of adult psychiatric care in the 1980s and 1990s. Whilst the process of closing residential psychiatric hospitals was similarly framed as a modernising one, adult DI was criticised for being too-strongly driven by neoliberal cost-saving considerations, an over-reliance on 'imagined communities', and simply replacing an enforced collectivism for care recipients with *'an enforced individualism characteristic of neoliberal constructions of economic life.'* (Roulstone and Morgan,

2009:333).

In summary, the Cambodian government's adoption of the strategic priorities set out in the *Action Plan* (MoSVY, 2016) and the *Capacity Development Plan 2018 - 2023* (MoSVY, 2018) indicates the current position of child care reform and deinstitutionalisation as a global social policy and invites consideration of the role of global and transnational actors in shaping national policies in this area. By advocating an essentially global deinstitutionalisation policy framework, the Cambodian strategic plans implicitly adopt the anglophone child care reform and deinstitutionalisation paradigm that assumes all forms of children's residential care are inherently harmful and the existence of a universal process and, hence, of a single model for development in this area of social policy, global deinstitutionalisation policy models presuppose Western conceptualisations about family and childhood, prioritising the nuclear family and individualism. These ideas are not necessarily in sync with local social, economic and cultural realities. To date, Cambodia's child care reform program has been almost wholly funded and driven by Western donors and international NGOs.⁶⁴ Analysis of the documents uncovers presuppositions and assumptions of globalised DI policy models, modernisation theory, and neoliberalism as underpinning logics of Cambodian child care reform policies.

4.6. WPR question 3: How has this representation of the problem of family separation and orphanage placement come about and been disseminated in Cambodia?

This question offers the opportunity for '*consideration of the contingent practices and processes through which this understanding of the 'problem' has emerged*' (Bacchi, 2021:22). As a critical approach to policy analysis, WPR seeks to surface the power relationships at play within policy networks by considering which actors have shaped the discourse or policy area under study, and how that involvement has contributed to the ultimate policy formulation of the 'problem'. This question invites the researcher to make explicit knowledge-making practices involved in producing and disseminating the policies and critically examine the key influencers within policy networks by identifying which actors were involved in agenda-setting, policy production and its surrounding discourse.

Following this line, the problem representation identified in the *Action Plan* (MoSVY, 2016) and the *Capacity Development Plan 2018-2023* (MoSVY, 2018) can be further interrogated

⁶⁴ For example, UNICEF Cambodia, USAID, European Union, Save the Children Cambodia.

by considering the strategic priorities of the international development partners supporting and funding the child care reform agenda in Cambodia. For example, to what extent does the pre-eminence of measures addressing violence against children in these two documents reflect the momentum behind international initiatives to end violence against children and the role of the United Nations and its agencies in shaping and coordinating that movement?⁶⁵

In 2016, UNICEF, a significant donor and influential actor within the Cambodian child care reform network, adopted a *'more cohesive global strategy'* (UNICEF, 2017:12) for prioritising its work on combating violence against children around the world, including the completion of national violence against children surveys, financially supporting parental behaviour change programmes and assisting governments with the development and implementation of violence against children policy frameworks. These global strategies all feature prominently in the Cambodian child welfare policy and practice landscape (RGC, 2013; MoWA, 2017; RGC, 2017).

As in many countries, it is common practice for policy development and drafting in Cambodia to be outsourced by government ministries to international agencies and policy consultants (Bakir & Gunduz, 2020; Fyson, 2009). Thus, the policy and programming problem representation identified in WPR question one has, I argue, been produced most directly by the authors and funders of the two documents under analysis. As the principal government ministry leading efforts in child care reform, formal authorship and ownership of the *Action Plan* (MoSVY, 2016) rests with the responsible line ministry - MoSVY. However, UNICEF Cambodia was instrumental in both the drafting of the plan and the coordination and funding of its implementation. The allocation of roles and responsibilities in the document assigns substantive responsibilities to UNICEF Cambodia accordingly.

'The role of UNICEF is to:

- Provide technical assistance and contribute financial support for the implementation, monitoring and review of the action plan and provincial operational plans;*

⁶⁵ For example, through the 2013 *Global Survey on Violence Against Children* (UN, 2013), the inclusion of VAC specific Sustainable Development Goals (UN, 2016), and the World Health Organization's *Inspire: 7 Strategies for Ending violence against children* (WHO, 2016)).

- *Participate in the quarterly provincial meetings with 3PC partners, DoSVY⁶⁶ and WCCC⁶⁷s to discuss challenges and promote cooperation and coordination between relevant institutions and development partners, and*
- *Conduct joint field monitoring and reviews of the programme activities with partners and assess the quality of case management and reintegration support provided.'*

(MoSVY, 2016:17)

Thus, whilst not discounting the role of partnership working between UNICEF, MoSVY and implementing NGOs, UNICEF Cambodia can be identified as the lead actor in producing and disseminating the *Action Plan* (MoSVY, 2016). The launch of this action plan galvanised government and civil society collaborative action around the 30% reduction target, changing the landscape and operating context for stakeholders, as resources were purposively targeted towards identifying children living in residential care and facilitating their return to the family home. The *Action Plan* (MoSVY, 2016) impacted, indeed dominated, practice by the government and NGO social workforce in its five target provinces⁶⁸ from 2017 to date. The *Action Plan* (MoSVY, 2016) received additional financial and policy-level support via UNICEF Cambodia's *Country Programme Action Plan 2016-2018* (UNICEF, 2016). UNICEF also contributed to the drafting, funding, and implementation of the *[MoSVY] Work Platform 2014-2018* (MoSVY, 2014), particularly its goal of progressing the child care reform agenda.

Overall, the frameworks and theories of change (ToC) set out in the strategic planning documents and associated implementation tools indicate an appeal to global frameworks (often produced by the United Nations) and a 'top-down' approach to designing and implementing child care reform, with little evidence of policy and programming being informed by the Cambodian context or the views and experiences of local policy implementers or the policy target group. For example, the preface to the Cambodian Ministry of Women's Affairs *'Positive Parenting Toolkit'* (MoWA, 2017) states:

'In developing interventions . . . the [theory of change] referenced existing best practices in violence against children prevention and response, including the UN Study on Violence Against Children, UNICEF's Six Strategies for Action, and The Global Partnership's INSPIRE: Seven Strategies for Ending VAC. The priorities and

⁶⁶ District Office of Social Affairs, Veterans and Youth (Sub-national level).

⁶⁷ Women and Children's Commune Council (Sub-national level).

⁶⁸ Phnom Penh, Siem Reap, Battambang, Kampong Som and Banteay Meanchey.

initiatives included in the [parenting programme curriculum] are articulated in a way consistent with UNICEF's global theory of change for its 2014-2017 Strategic Plan.' (MoWA, 2017:7)

UN agencies have produced all of the documents cited in the above quotation.

The benefits of widening the range of participants involved in forming and designing policy and programming are highlighted by both Bilson and Martin (2017) and Hoppe (2010). In the case of family separation and children's residential care placement in Cambodia, developing a more inclusive descriptive map of the situation would allow comparisons to be made between the political and professional frames of global and transnational organisations and donors, national politicians and policy entrepreneurs,⁶⁹ and the experiences of street-level social workers and families. Such a policy design dynamic, in which forward mapping ('top-down') from institutional and political aspirations and backward mapping ('bottom-up') from policy implementers and citizens' perspectives are both considered, would potentially allow for more balanced policy design and more viable and relevant programming (Grin & Van de Graaf, 1996).

Turning to the *Capacity Development Plan 2018-2023* (MoSVY, 2018), this document is also published under the Royal Government of Cambodia logo via MoSVY. It is sub-titled '*Building on the Momentum of Existing Reforms*'. The plan was jointly commissioned by MoSVY, UNICEF and USAID and focuses on practical recommendations structured as a child care reform capacity development plan. By 2018, the bulk of funding for UNICEF Cambodia's Child Protection Section was being provided by USAID, and the agency had consolidated its influence in the sector via its leadership and funding of the child care reform and deinstitutionalisation-focussed Cambodian NGO network - Family Care First (FCF). Thus, whilst again not discounting the role of collaborative and partnership working, USAID can be identified as the primary actor in producing and disseminating the *Capacity Development Plan 2018-2023* (MoSVY, 2018).

USAID's focus on child care deinstitutionalisation as a global social policy dates back to the US government's adoption of the *US Assistance for Orphans and Other Vulnerable Children*

⁶⁹ Most research on policy entrepreneurs in low- and middle-income countries considers policy entrepreneurs to be political actors from either governmental or NGO non-profit sectors that promote particular policy ideas that they favour as policy advocates. Their job-titles, professional identities, and the level at which they operate (i.e. local, national or international), vary depending on the context and the policy area. Examples of

some of the roles policy entrepreneurs may play in advancing their preferred policy ideas include advancing discursive change, agenda setting and issue brokering (Bakir & Gunduz, 2020).

in Developing Countries Act in 2005, which directed US international development programmes towards family-based care and community-level programming (US Government, 2005:2113 in Ulybina, 2020). From 2009, USAID's Displaced Children and Orphans Fund (DCOF) also began providing funding for child care reform in Cambodia, both through UNICEF Cambodia and later through establishing 'Family Care First', a deinstitutionalisation-focussed network of local NGOs coordinated on the ground by Save the Children Cambodia. USAID institutionalised its support for DI reform in developing countries following the US government's '*Evidence Summit: Protecting Children Outside of Family Care*' with the publication of the *US Government Action Plan on Children in Adversity* (US, 2012), '*the first-ever whole-of-government strategic guidance for US government assistance to families and prevention of unnecessary family separation*' (US, 2019:25). In 2013, to coordinate the implementation of USAID's *Action Plan on Children in Adversity* (US, 2012) in low-and-middle-income-countries, a public-private partnership (Global Alliance for Children) was established,⁷⁰ although this global initiative foundered after a few years and USAID pivoted to alternative child care reform coordination mechanisms (e.g. Save the Children/Family Care First in Cambodia and ChildFund International/ASPIRES in Uganda).

In practice, the *Capacity Development Plan 2018-2023* (MoSVY, 2018) was written and produced by two organisations commissioned by USAID: the Hague Conference on Private International Law and International Social Service (MoSVY, 2018). The latter describes itself as an international NGO focused on cross-border child protection issues, including trafficking, child abduction, and inter-country adoption (ISS, 2021).

Attention to issues of powering and participation in the policy formation space can enhance our understanding of both the overall weakness of policy-level support for programming focussed on household economic strengthening and other material and psychosocial family support services and the strong prioritising of activities developing post-family separation alternative care responses such as foster care and adoption. For example, the Hague Conference on Private International Law was the lead agency commissioned by USAID to support the development and production of the government's *Capacity Development Plan*

⁷⁰ On the 17th November 2017, the leadership of Global Alliance for Children announced that it was closing down all operations. In Cambodia all assets of the Global Alliance for Children (Cambodia) were transferred

to Save the Children Cambodia who continued to coordinate deinstitutionalisation-orientated interventions via the USAID-funded NGO network Family Care First.

for Family Support, Foster Care and Adoption 2018-2023 (MoSVY, 2018). This is an international legal organisation primarily concerned with the protection of children who are the subject of inter-country adoption (MoSVY, 2018), an area of interest and expertise which may, in part, explain the relative attention paid to each of the three components of the plan, which concludes by making 43 general recommendations for strengthening family support, 82 in relation to foster care and 130 (institutionally and legally detailed) recommendations concerning domestic and international adoption.

Cambodia's history of inter-country adoption has been marred by fraudulent adoptions, trafficking, and corruption (Nhep et al., 2024; Rotabi & Broomfield, 2017), which led to the 2009 ban on inter-country adoptions. In response to these international concerns, the Cambodian government implemented the *Capacity Development Plan 2018-2023* (MoSVY, 2018). The plan's recommendations dealing with adoption aim to address the concerns about corruption, surrogacy, and child trafficking. Following the targeted and determined implementation of the adoption-related recommendations driven by the document's authors (MoSVY, USAID, HCCH, UNICEF and ISS), inter-country adoptions from Cambodia were legally and formally restarted in March 2022. However, some international and Cambodian NGOs met this decision with wariness, citing concerns over the poor enforcement of safeguarding standards (Khmer Times, 2022).

However, while the prominent role of the US, the UN and other Western agencies in the production of Cambodian child care reform policy and programming can, to some degree, be seen as reflective of a '*discourse of hegemonic essentialisation of Western models of development as universal*' (Nadeem, 2016:211), pulling back to take account of the bigger geopolitical picture suggests that, whilst to some extent valid regarding child care reform in Cambodia to date, this view should not be over-generalised, and may now be something of an over-assertion, with a more qualified and tentative assessment in order.

There has been a transformation in the global politics of overseas development assistance since 2000 as China has moved from being a recipient of aid to being the second-largest economy in the world, one of its largest donor states and the most credible challenger to the dominance of the United States in the international system (Regilme & Parisot, 2017). In this context, Western and multilateral powers have increasingly limited social and economic geopolitical mechanisms available to them. Influence over the shaping and funding of social policy and programming (of which child care reform and

deinstitutionalisation are examples that attract international media and institutions' attention (for example, via the United Nations Committee of the Rights of the Child (UNCRC, 2011) is one of these mechanisms. The geopolitical context described in Section 1.2 indicates the importance of Western powers maintaining their influence and ability to exert political pressure within Cambodia as part of their broader strategy to balance the influence of other major powers, such as China, in the region. However, within a changing global geopolitical environment, the US and other donor countries will struggle to balance China's waxing influence in Cambodia unless they can come up with a better offer that supplants China, which is now Cambodia's top donor, with contributions of US\$3.1 billion, followed by US\$2.8 billion from Japan and US\$1.3 billion from the US (ASEAN Today, 2021).

To summarise, the above account identifies USAID and UNICEF as lead actors in producing and disseminating the prevailing representations of the 'problem' of family separation in Cambodia. These agencies have driven the production of this representation through their commissioning, funding and selection of the authors of the *Action Plan* (MoSVY, 2016) and the *Capacity Development Plan 2018-2023* (MoSVY, 2018). The dissemination of this representation has been driven by these agencies primarily through operationalising the plans by MoSVY, the UNICEF Cambodia-funded NGO network, the Partnership Programme for the Protection of Children (3PC) and the USAID-funded NGO network Family Care First (FCF).

4.7. WPR question 4: What effects are produced by this representation of the problem?

The critical stance of this WPR question '*starts from the presumption that some problem representations create difficulties (forms of harm) for members of some social groups more so than for members of other groups*' (Bacchi, 2009:15). However, in line with the post-structural orientation of the approach there is no suggestion that these harms or difficulties form a predictable pattern. Hence, this question aims to identify some of the effects of the problem representations identified in WPR question 1⁷¹ so that they can be critically assessed.

⁷¹ Namely, a failure to meet internationally endorsed child rights standards manifested as too many children living in residential care due to weak regulation and positive community attitudes towards children's residential care.

The use of interpretive approaches to policy analysis potentially results in a multitude of layers of inquiry with '*seemingly endless possibilities to such analysis*' (Chan, 2018:24). The phrasing of the guiding questions of the WPR approach are therefore '*productively bounded*' (Pringle, 2019: 7), in that they limit the scope of inquiry to the historical and conceptual precursors of the specific problematisation identified by question one. Cousins and Hussein (1984) argue that '*in accounts of governmentality, intelligibility not exhaustiveness is the key. What is sought is not an exhaustiveness of evidence but an intelligibility of problematizations*' (Cousins and Hussein, 1984:4 in Pringle, 2019: 24). Restricting the analysis to only those assumptions that underlie the representation of the problem identified by WPR Question 1 helps maintain the focus on *some* of the ways in which populations are governed through problematisations embedded in policies.

Drawing directly from Foucault's concept of 'governmentality', Bacchi (2009) identifies three interconnected and overlapping types of policy effects for consideration: subjectification effects, discursive effects and lived effects. I shall now consider each of these as they relate to the problem representation identified in the *Action Plan* (MoSVY, 2016) and the *Capacity Development Plan 2018-2023* (MoSVY, 2018) in order to discuss some of the governmentality effects produced by these policy and programming representations.

4.7.1. Subjectification effects

WPR's Foucauldian approach directs attention to the ways in which populations are governed and invites a broader-than-usual understanding of governing and politics. Foucault (2008) described this perspective in the concept of 'governmentality'. This approach emphasises not only formal political structures and mechanisms but also the various technical, institutional and discursive techniques and strategies involved in the governance of populations. Subjectification effects are those elements within a policy that structure the ways in which policy subjects/citizens (which in the context of this study includes both policy implementers (social workers) and the policy target group (family caregivers)) are constituted within particular problem representations. Whilst Foucault himself used the term governmentality in two ways, for the purposes of this study, we are interested in the sense in which it describes a form of political organisation in contemporary

societies that is both 'totalising' and 'individualising' (Gordon, 1991:3 in Raffnsoo et al., 2019). 'Totalising' in that it positions its task in terms of populations as a

whole as a kind of '*species body*' (Foucault, 2008); 'Individualising' in that its methods of social control seek '*to discipline the bodies of individual 'citizens' often through targeting their behaviours*' (Bacchi, 2015:132). Analysis in this tradition often emphasises how neoliberal modes of governmentality seek to produce citizens as self-regulating individuals whilst paying little attention to the structural shaping circumstances of their lives (Rose, 2000), leading to social and public health policies that highlight the 'risks' in people's lives whilst leaving them responsible to individually adapt their lives to meet those risks (Peterson & Lupton, 1996).

The problem representation of an over-reliance on children's residential care in Cambodia is presented in the *Action Plan* (MoSVY, 2016) and *Capacity Development Plan 2018-2023* (MoSVY, 2018) as having both demand and supply-side aspects and highlights 'solutions' aimed at changing the behaviours and attitudes of parents, caregivers, residential care staff and local authority actors.

On the supply side, responsibility for the problem is conferred on the residential care institutions themselves, the laxity of government oversight of the sector, and the faulty knowledge and attitudes of the local-level authorities who formally approve the placement of children in these institutions. Policy and programming measures to counter these failings and 'positive community attitudes' *vis a vis* a perceived wide-spread social acceptance and support for referring children from low-income families into children's residential care can be found across the documents, frequently couched in terms that suggest that parents and local authority actors are unaware of the importance of family life for children's wellbeing and development. In addition to recommendations clarifying roles and responsibilities within and between the different levels of the state child welfare system, sub-national-level child and family welfare staff (for example, Commune Chiefs, CCWCs⁷² and Village Health Support Groups) are also identified in the documents as requiring similar kinds of attitudinal and behaviour change as parents and caregivers, with recommendations for ongoing training on deinstitutionalisation for '*all actors*' (MoSVY, 2016: 6), the development and dissemination of deinstitutionalisation campaign messages and the production of a new Child Protection Handbook highlighting the centrality of deinstitutionalisation (MoSVY, 2016:13).

Turning to the 'demand side', responsibility and blame are placed on parents and caregivers themselves. Thus, within the policy discourse, they are constituted as holding misguided views concerning the relative benefits of residential care versus family-based care, lacking the parenting capacity and 'skills' needed to keep their families together, and placing their children in orphanages 'unnecessarily'.

'In order to combat the myth that children receive a better education in RCIs⁷³, we encourage the design of awareness-raising campaigns among the general population that highlight the importance of families remaining together and the harmful effects of RCIs . . . this should be linked to the ongoing behavioural change work.' (Capacity Development Plan 2018-2023, 2018:42)

In effect, low-income parents and caregivers are represented as the 'problem' in these examples, with their 'vulnerability' conceptualised as behaviour and attitude defects that can be corrected through professionalised parenting education and skills training.

4.7.2. Discursive effects

Both documents explicitly identify their strategic goal of deinstitutionalising child care in Cambodia. A discourse shaped by the global child care *deinstitutionalisation* policy model inevitably (and by definition) emphasises *institutional* change (e.g. the closure of residential care facilities, family reintegration of children, enhanced gatekeeping mechanisms) with this study finding less attention paid to developing policies and programmes that improve access to community-based services and material and psychosocial supports for families at risk of family separation. As reflected in the policy documents, the discursive construction of deinstitutionalisation nominates individual actors as a primary locus of the 'problem' due to their lack of knowledge and abilities (i.e. 'community attitudes' and 'parenting skills'). This framing is reflected in the prominence given to developing and delivering attitude and behaviour change training and education to both parents and local authority actors on the harms caused by residential care placement and the benefits to children living with their birth family.

The representation of 'problems' to be addressed by policy and programming in particular ways can make it difficult to think of the situation differently from that advanced within the dominant problematisations put forward, thereby limiting (or silencing) the kinds of

⁷³ Robust data on educational outcomes for Cambodian children in residential care does not appear to exist, and future work on this would be helpful in establishing whether these reported community attitudes are well founded or not.

analysis and policy produced. If some options for social intervention are closed off by the ways in which a problem is represented, then implicit limits are discursively placed on what can be thought about a particular issue and considered critically.

The discourse around family separation in Cambodia, as revealed in the policy documents, is characterised by a normative position on family life and child care reform discursively presented as universal, for example, through internationally-endorsed standards such as the UNCRC (1989) and the UNGAC (2010), both of which take a children's rights-based approach to advising that residential care for children should only be considered as an option of last resort and vigorously promoting family-based alternative care. These two principles can be considered the pillars of the DI paradigm.

This child rights-orientated discourse that centres the '*right to family life*' (UNCRC, 1989: 4) limits the opportunity at both international and national levels to discuss with equal force parents' and caregivers' right to '*be afforded the necessary protection and assistance so that [they] can assume [their] responsibilities within the community*' (UNCRC, 1989:Preamble), for example through income-generating and employment services, psychosocial support and access to community-level services such as childcare (daycare) and school support.

It is widely recognised that poverty and access to education are major push factors for vulnerable families to send their children to live in orphanages, but could residential care sometimes be a rational choice on the part of parents? Might this even be part of the solution for the most vulnerable children, or those with additional needs, to realise their right to quality education? In low- and middle-income countries, it is not uncommon to meet successful career individuals, members of government, or, more simply, colleagues and friends who have had the chance to pursue an education thanks to the institutions in which they were placed as children. In countries where the public system fails to reach and support the poorest to access or sustain an education, it may be misleading and lack credibility at policy and community levels to boldly state that institutional care is a barrier to quality education.

The discursive dominance of the child care deinstitutionalisation paradigm makes it difficult for contemporary child care research, policy and programming to consider *any* potentially helpful role for residential child care provision, despite some circumstances where

arguments for making a cost-benefit analysis of a residential placement can (and are) made (for example, to facilitate access to higher quality education). In the case of family separation and residential care in the global south, the idea that, in some cases, residential care for certain children could have some benefits has, for the time being, been placed beyond the discursive pale. For example, programming and guidance regularly refer to the ‘myth’ (Coram International, 2017; MoSVY, 2011; MoSVY, 2018) that residential placement can improve children's educational outcomes. However, research comparing the academic outcomes of those placed in residential care vs. those supported at home does not appear to exist. The literature review of this study found examples of international research from other low and middle-income countries suggesting that in some cases, residential placement can improve the educational outcomes for children from marginalised backgrounds (see Section 2.4.2).

Finally, identifying problem representations that individualise and place responsibility on parental attitudes and behaviour within the child care reform landscape has significant implications for policy, funding, and implementation practices. This focus makes it difficult to highlight or secure resources for family support services aimed at addressing structural issues beyond the control of individual caregivers and practitioners, such as migration, debt, and inequality.

4.7.3. Lived effects

In the context of this study, ‘lived effects’ describe the effects of particular problem representations on people’s embodied experiences and explore how problematisations at the policy level work through real-world practices, procedures and programmes that affect the day-to-day lives of both the policy target group and policy implementers. The lived effects of current approaches to child care reform in Cambodia will be further discussed in the findings from semi-structured interviews with caregivers and social work practitioners presented in Chapters 5 and 6. For now, I highlight one significant policy and programming effect that provides some context for those accounts—namely, the rapid reintegration of children from residential children’s institutions into their birth families.

Responding to the global deinstitutionalisation movement, and propelled by an underlying problem representation of a failure to ‘meet international standards’ concerning the rights of the child, the Cambodian government and its development partners moved swiftly

forward in implementing the DI initiative presented in the *Action Plan* (MoSVY, 2017), which set the ambitious target of reintegrating 30% children living in residential care (approximately 3,500 children in total) in five target provinces within two years.

The potentially negative consequences of the rushed or under-considered roll-out of large-scale child-care deinstitutionalisation programmes in environments where social services for children, families and communities are significantly under-resourced and national child protection systems are not yet in place have been documented in other middle-and low-income countries (Greenwell, 2006⁷⁴; Frimpong-Manso, 2014⁷⁵; Ismayilova et al., 2014; Huseynli, 2018⁷⁶). These negative consequences include inconsistent approaches and some unwise and premature reintegration of children back into high-risk family situations without proper assessment or the provision of either adequate planning, material support, or social work follow-up visits (Hamilton et al., 2019).

In the case of Cambodia, Fronek et al. (2019) highlight some of the risks associated with implementation haste, a quantitative, target-driven policy design with outcomes measured in numbers and unrealistic timeframes. Such a context for carrying out the rapid reintegration of thousands of children from residential care back to their birth families within a two-year time frame in order to meet government-set targets risked a rushed, administratively focussed policy implementation with emphasis on meeting quantitative targets rather than the standard of work needed. The authors argue that these policies were implemented before the real needs of the policy target group were either properly understood or supported by appropriate family strengthening or social protection measures.

‘Some families have been pressured to accept a child when reluctant to do so for a diverse range of reasons including financial stress and health status.’ (Fronek et. al, 2019:142)

The historical reality is that Cambodia’s existing formal structures for the care of children in need have primarily developed via the importation of Western charity models, namely donor-funded services delivered by a plethora of (usually foreign) NGOs, with an emphasis on orphanage care and volunteer and orphanage-tourism. While the number of children

⁷⁴ Romania.

⁷⁵ Ghana.

⁷⁶ Azerbaijan.

living in residential care in Cambodia has reduced since the publication of the *Action Plan* (MoSVY, 2026) and the *Capacity Development Plan 2018-2023* (MoSVY, 2018), in practice, much of that reduction has been, as a result of factors external to official policy and programming (for example, the Covid-19 pandemic and the collapse of the country's tourism sector). In addition, government figures indicate that most children returning home from residential care did so without social work support or oversight (MoSVY, 2020). Much of the task of returning these children to their families has been carried out in an informal, undocumented and *ad hoc* manner by orphanage staff themselves, almost none of whom are trained social workers. Overlaying these factors is the fact that many families receiving their children back will likely require tangible and material support to ensure the children's safety and well-being and keep their families intact.

While the medium- and long-term impacts of this period of rapid family reunification have yet to be fully assessed, accounts from families and social workers in this study suggest that the effects of Cambodia's child care reform campaign, initiated in 2017, have been mixed. Although there are exceptions, many children and families involved have not received integrated packages of professional and practical support tailored to their individual needs. Additionally, as discussed in the following chapters, some accounts from parents and caregivers who have had their children returned from orphanage care indicate that certain reintegrations may have increased risks for children. These decisions may not have been adequately assessed to ensure they were in the child's best interests.

4.8. Chapter summary and conclusions

This chapter addressed the first research question in two ways. First, ten key policy and programming documents were analysed qualitatively to identify the main priorities and trends. Second, two of the most operationally influential documents were subjected to an interpretive and critical analysis using the '*What's the problem represented to be?*' approach (Bacchi, 2009). The findings from these two analyses are summarised in the table below.

Table 7. What is the problem of family separation and orphanage placement represented to be in Cambodian policy and programming?

Qualitative Document Analysis (QDA)	
The QDA of ten selected documents identified policy and programming aiming to prevent family separation as giving most attention to interventions to address Violence Against Children (VAC) and counter ‘community attitudes’ supportive of children’s residential care through behaviour change campaigns and parenting classes. The least amount of attention was directed towards mitigating the effects of migration and poverty on family life. Overall, the QDA found the policy documents to prioritise individualised responses to reducing violence against children and parenting at the expense of engaging with more structural social and economic issues.	
What’s the Problem Represented to be? (WPR)	
In this chapter, the WPR analysis selected two key policy documents from the QDA and subjected them to closer analysis using four questions adapted from the WPR Approach (Bacchi, 2009)	
1: What’s the problem of family separation and orphanage placement represented to be in child care reform policy in Cambodia?	The problem is represented as a failure to meet internationally endorsed child rights standards manifested as too many children living in residential care due to weak regulation and positive community attitudes towards children’s residential care.
2: What presuppositions or assumptions underlie this representation of the ‘problem’?	This representation of the problem is based on assumptions and presuppositions drawn from children’s rights and the globalised deinstitutionalisation policy model.
3: How has this representation of child care reform and the ‘problem’ of family separation come about and been produced and disseminated in Cambodia?	Western DI actors, most notably UNICEF and USAID, have produced and disseminated this representation of the problem in Cambodia. However, this instance of Western influence and its implications should be viewed within a complex and changing geopolitical and national context.
4: What effects are produced by this representation of the problem?	This representation of the problem produces discursively limiting effects on the types of policy and programming ‘solutions’ that can be considered by advancing individualised responses to family separation, making it difficult for policy and programming designers, donors and practitioners to consider other approaches. It has also produced lived effects on low-income families by reducing the availability of residential care provision through the closure of residential children’s institutions and the rapid reintegration of large numbers of children from orphanages back into their families in a context of constrained capacity to support affected children and families.

The fifth WPR question asks the researcher to ‘problematise the problematisations’ embedded in the representations of family separation at the policy and programming level by asking, ‘*Where are the silences?*’ and ‘*Can this ‘problem’ be thought about differently?*’. Chapter 5 and Chapter 6 will provide some of those ‘different’ accounts of the problem of family separation by presenting and discussing the findings from focus group discussions

and semi-structured interviews with Cambodian caregivers with lived experience of placing their children in orphanages as well as government and NGO social workers with experience of implementing deinstitutionalisation and family support policies and programming in Cambodia.

Chapter 5. Findings and discussion:

Social and economic drivers of family separation and orphanage placement in Cambodia

5.1. Introduction

In the preceding chapter, I explored the initial research question⁷⁷ by identifying the priorities and gaps in selected policy and programming documents and analysing the representation of the problem of family separation and orphanage placement found in those documents. In this chapter, I present and discuss findings collected through semi-structured interviews and focus group discussions with policy implementers (social workers and social work managers) and the policy target group (family caregivers) in order to answer the second research question:

Which problems leading to family separation and orphanage placement are highlighted by social workers and caregivers with lived experience of family separation?

Participants' accounts drew attention to different 'problems', 'root causes' and 'drivers' of family separation compared to those at the policy and programming level, revealing a mismatch between the policy-level representations and those identified by those with responsibility for implementing deinstitutionalisation policies and those with direct experience of family separation and the placement of children in residential care. Three underpinning and interlinked socioeconomic themes emerged from these interviews and discussions, which are addressed in turn:

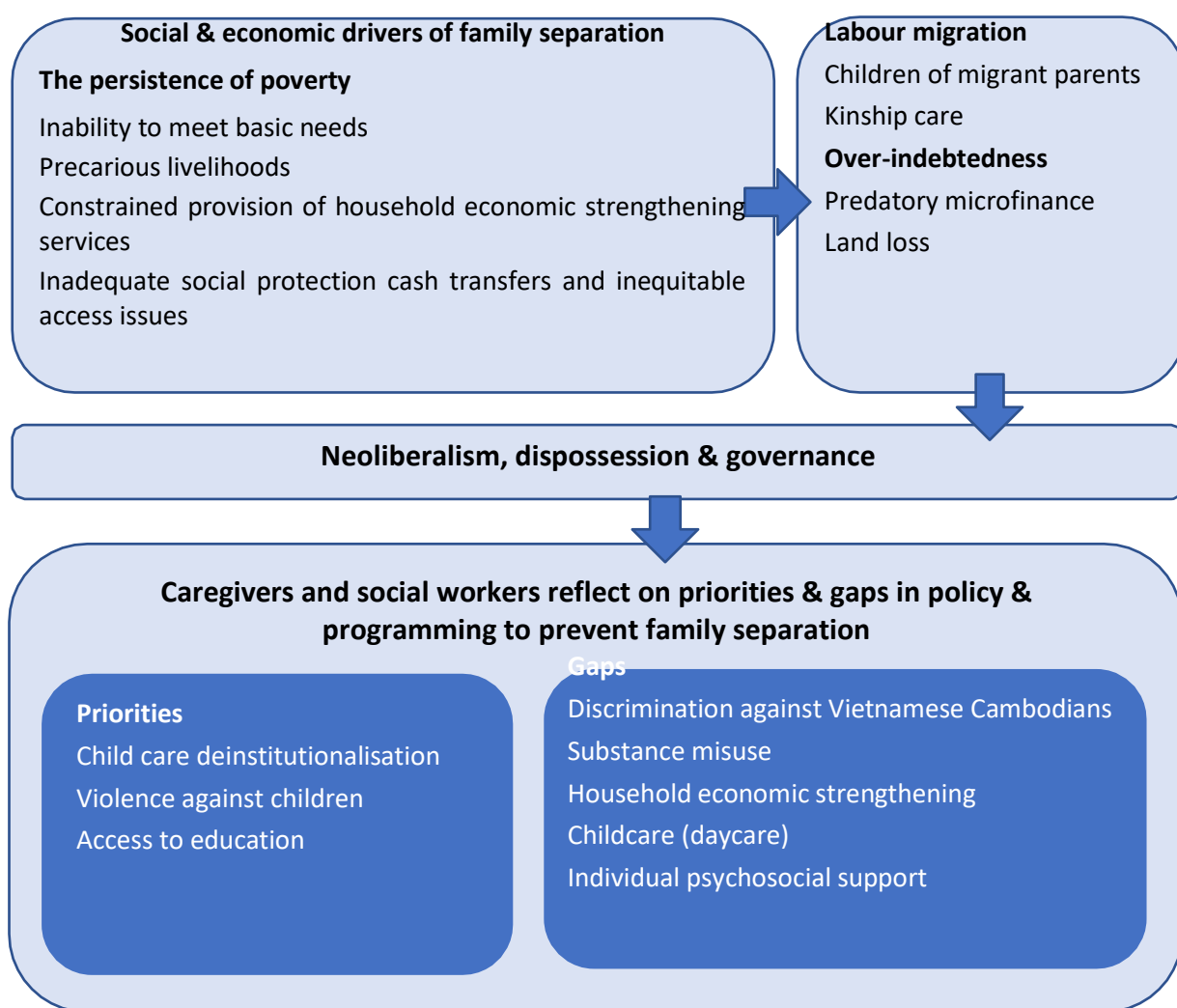
- Poverty
- Migration
- Over-indebtedness

The chapter discusses how these factors reflect a neoliberal approach to development and governing. A common feature of the accounts provided by social workers and caregivers was the dense description of the disruptive effects of rapid socio-economic changes on family life in Cambodia. These impacts can be seen at multiple levels. At the level of family,

⁷⁷ WPR question 1: What's the problem of family separation and orphanage placement represented to be in Cambodian policy and programming?

caregivers described challenges to keeping their children living at home in circumstances characterised by poverty, precarious livelihoods, labour migration and excessive debt. At the implementation level, social work practitioners outlined difficulties in delivering family support services in an environment of under-resourced public services, limited social safety nets and systemic and everyday corruption (Ear, 2012; Feinberg, 2009). Social work participants also recognised weaknesses in their effectiveness in supporting families to improve their income due to their lack of expertise in this area. Finally, at the national and structural levels, social workers reported that the persistence of poverty and the harmful effects of neoliberal development approaches on families was under-recognised at the policy level. Social work participants believed that the government considered these effects an acceptable cost when weighed against the benefits of Cambodia's economic growth. Additionally, there were suggestions that poverty-related problems were deliberately downplayed for domestic political reasons.

Figure 9. Overview of the key themes developed in Chapter 5 and Chapter 6



5.2. The persistence of poverty

Caregiver participants in this study identified family impoverishment as underpinning family separation, and government and NGO social workers confirmed that it tends to be the very poorest, often rural, families that place children in residential care. Caregivers' stories had much in common; with poverty,⁷⁸ hunger and food insecurity frequently identified as contributing to the decision to place children in residential care. Although some of the policy documents reviewed referred to poverty as a driver of family separation, this was not reflected in the programming prescriptions, few of which proposed activities to improve family income or access to social protection.

⁷⁸ The usual Cambodian phrasing of this was '*art loi*' ('no money'), an expression synonymous with income poverty.

The findings presented and discussed in this section highlight that, despite economic figures promoting Cambodia as a neoliberal success story with one of the fastest-growing economies in the world (ADB, 2023), a significant proportion of Cambodian families remain dependent on precarious and exploitative labour conditions, lack social safety nets and are unable to meet basic needs such as food and shelter. As one Cambodian NGO social worker noted:

‘Cambodia is still a poor country.’ NGO social worker 10

5.2.1. Inability to meet basic needs

This section focuses on the most fundamental needs Maslow (1954) identified in his hierarchy of needs, specifically, the physiological need for food, shelter and safety. While noting that most families affected by poverty in Cambodia do not use residential children’s care as a coping strategy, absolute poverty, referring to an economic threshold below which individuals or households sometimes lack the bare necessities of life, was the most widely cited push factor when caregivers described the circumstances that led to them placing their child in an orphanage. For example, this mother living in the capital had recently placed two children in an orphanage and identified a lack of food as a critical factor in the decision.⁷⁹

‘I only sent the two younger ones to the [residential care] centre one month ago. Before that, they lived with me. But, I am so poor - I did not have enough to feed them.’ Caregiver 4

Several participants whose children had recently been reintegrated from orphanages to live in the family home also reported difficulty affording food. For example, a mother whose 13-year-old son had been returned to live with her one year previously said:

‘He wants something to eat, but I cannot provide [for] him.’ Caregiver 3

Another mother whose two children had been reintegrated into her care following the government-directed closure of the orphanage⁸⁰ they had been living at, stated:

⁷⁹ One of the criteria for caregiver participants was that their child should have been reintegrated home for at least one year prior to the interview. In the event, two mothers we met with still had children living in residential care. Following discussion both of these mothers were keen to participate in the research and share their experiences, so they were included in the sample. See Section 3.5.1. for further detail.

⁸⁰ The risks associated with Cambodia’s rapidly executed DI campaign are discussed in Section 2.3 and

'I still do not have enough food to eat.' Caregiver 2

Practitioners confirmed the centrality of meeting basic needs in preventing family separation. Social work staff from an NGO with a policy of providing long-term material support to families confirmed that the inability to afford food remains a key driver of family separation and residential care placement.

'It is not just about money . . . food is also important - they are so hungry.' NGO social worker 8

In contrast to these findings, emergency or food support was not prominently featured in the policy and programming documents reviewed. Whilst those documents, and child care deinstitutionalisation discourse more broadly, commonly use the term 'unnecessary family separation' to describe the placement of children in residential care (Coram International, 2018; MoSVY, 2016; MoSVY, 2018), I have chosen not to use the prefix 'unnecessary' in this dissertation as it implies a value judgement on the caregiver's decision that participants' accounts expose as misleading. The routine deployment of the adjective 'unnecessary' in relation to family separation in Cambodia can be seen as illustrative of the 'responsibilising' or 'parent-blaming' (Siagian et al., 2019) representation identified in Section 4.7. Whilst this framing supports individualising solutions such as parenting programmes and media campaigns to counter 'positive community attitudes' towards orphanages, caregivers' accounts of struggling to feed their children suggest both a sense of moral obligation and survival considerations driving them to seek a residential placement for their child. A mother in Phnom Penh whose son had been reintegrated to live with her explained that whilst she had missed her son when he was living in the orphanage and knew that for his emotional well-being he would prefer to live at home with her rather than in residential care, her impoverished circumstances left her wishing that he could again return to the care of an orphanage:

'I want someone to help the boy . . . – I cannot provide him enough - \$12⁸¹ does not really help - . . . I would still want . . . some NGO [to] take him to live with them.' Caregiver 3

⁸¹ Reference to a \$12 per month stipend received from an NGO.

This participant cried during the interview.⁸² This affective response was common among the caregiver participants and indicated the emotional distress, ambivalence, and guilt many of them expressed when describing the predicaments that had led to their decision to place their children in an orphanage.

Adequate and safe shelter was another basic need that emerged as contributing to caregivers' decisions to place a child in residential care. For example, this caregiver from a rural district in northern Cambodia reported over-crowded, inadequate housing and living conditions as a push factor:

'Our house is too small. There are six of us in this house. Me, my husband, my three children and my grand-daughter.⁸³ It is only one room. We have no toilet.' Caregiver 5

Another mother from Phnom Penh cited homelessness as one of the reasons for the placement of her two daughters in an orphanage:

'I am so poor. I am homeless. [Before they went to the orphanage], the children lived on the street with me. And worked with me.' Caregiver 4

This mother identifies income poverty, homelessness and the need for the children to work alongside her as reasons she felt residential care placement would be in their best interests. Her account also revealed that, in her experience, childcare responsibilities can exacerbate income poverty associated with low earnings and informal labour. While the issue of child labour enjoys a relatively prominent academic and policy profile (Alem & Laha, 2016; Davis & Miles, 2014), and the discursive trope of poor parents relying on their children to earn money for the family is common, street working caregivers who participated in this study reported that their children were, in practice, more of a hindrance than a help in terms of getting work done and contributing to the family income. Several participants who were single mothers reported that having to combine income-generating activities⁸⁴ with child-minding was stressful, distracted them from work, and resulted in reduced income.

⁸² Measures in place to minimise harm or distress during interviews included informed consent, voluntary participation, and referral to support services. Participants were informed of their right to pause or stop the interview at any time if they felt uncomfortable or distressed. See Section 3.3. for further detail.

⁸³ Note that, in addition to caring for her own children, this participant was also taking care of her grand-daughter. Challenges in sustaining kinship care placements (an arrangement usually undertaken as a consequence of parental labour migration) is frequently cited in accounts of family separation and the placement of children in residential care (see Section 5.3.1.).

⁸⁴ For example, scavenging or selling vegetables on the street.

Drawing on this insight, Section 6.3.3 explores the potential role of accessible childcare provision in increasing family income and preventing family separation.

In the absence of accessible childcare, an alternative to taking your children to work with you is to leave them at home. However, several caregivers described their experience of the intersecting child protection risks of inadequate housing, community issues such as the prevalence of sex work and substance misuse and the need to leave children unsupervised in order to work and earn money. Informal housing constructed from palm leaves, bamboo, corrugated iron and plastic is not secure. As this caregiver said:

‘I only have a hut. It is not strong or safe for the children. The wall is not strong. Not safe for me or the children. It is not a real house.’ Caregiver 3

Many homes in low-income communities lack lockable doors. If children or young people are left unsupervised, people can enter the house. The mother quoted above went on to describe this nexus of child protection risks as motivating her to seek to place her teenage daughters in residential care.

‘There is no one to look after the kids - and I worry if I leave them [unsupervised] someone will hurt them - and they are girls - and they will make ‘bad friends’ and they might get badly influenced from the neighbours. These are the reasons that I want to put the girls in an orphanage.’ Caregiver 3

Picture 4 below illustrates an example of informal housing in a rural or peri-urban area.

Figure 10. Informal housing in a rural or peri-urban area (Image permission: Chen Samet)



This mother in Phnom Penh also identified the safety of her children as informing her decision to place them in residential care.

'I wanted the children placed in an orphanage - because they were not safe at night with me.' Caregiver 4

A local government social worker also raised concerns about the lack of adult supervision and safety of children and young people in the urban poor communities in which she works:

'I worry for the kids . . . some poor people they don't really care, and just leave their children running around.' Government social worker 1

While these child protection and community safety drivers of family separation and residential care placement did not feature prominently in the child care reform literature reviewed as part of this study, the policy and programming document analysis in the previous chapter did identify violence against children as a prioritised area of intervention globally, and child protection as a lens through which international donors and governments currently view and conceptualise child welfare and child care programming. That analysis further revealed a conceptualisation and approach to child protection that

emphasised changing parents' attitudes and behaviours. However, empirical evidence supporting the assumption that sexual or physical abuse play a significant role in family separation and orphanage placement in Cambodia was not found in the literature. The community safety concerns highlighted by participants in this study suggest a potential role for community-based approaches and new ways of thinking about child protection in the context of low-and-middle-income countries. For example, the contextual safeguarding model (Firmin, 2017), which was developed to address the intersections of child protection and criminality in the UK, recognises that children and youth should not be seen in isolation from their environments and neighbourhoods, and potentially offers policymakers and practitioners new ways to assess and understand the risks children and young people face in their communities and how to respond. Similarly, the ChildSafe model (Friends-International, 2023) uses selected, trained and supported community volunteers who, as 'ChildSafe Agents', are active in their communities in both child protection and community support roles. This model has been contextually adapted and replicated in more than ten Southeast Asian cities.

In presenting his hierarchy of needs, Maslow (1954) emphasised the importance of satisfying fundamental needs (i.e. food, shelter and safety) before an individual can focus on higher-level social needs such as family or education. In addition to the difficulties caregivers face in meeting basic needs, the accounts presented in this section highlighted the challenges they encounter in combining income-generating activities with childcare responsibilities in housing and community situations they describe as unsafe. Efforts to develop policy and programming that address the complex issue of poverty and orphanage placement will require a multifaceted and multi-sectoral approach that includes immediate intervention in crises and long-term efforts to address systemic inequalities and issues such as community safety, childcare and livelihoods.

5.2.2. Livelihoods and low income

In their accounts of poverty and its impacts on family life, social workers and caregivers highlighted constituting livelihood factors, such as changes in the economy and labour market, low pay and demanding working conditions. Much of the Cambodian workforce is employed in a few key sectors characterised by low pay, exploitative conditions and minimal labour protection (Green & Estes, 2022). These sectors, notably agriculture,

garment manufacturing and construction, are pivotal to Cambodia's economy, but participants' accounts indicated that they are also sources of social and familial strain.

Participants drew particular attention to employment and income-generating conditions for women⁸⁵ given their traditional primary roles and responsibilities for child care (Kelley, 1996). The participants' accounts also highlighted challenges in maintaining viable rural livelihoods. Although most Cambodian orphanages are located in cities, the children living in them are often from rural areas (MoSVY, 2011).

In the context of an ongoing population shift to urban areas, the Cambodian economy and society are still predominantly rural, and farming remains the largest provider of employment and livelihoods (ILO, 2019). However, the agricultural sector is rapidly changing from a traditional model to an industrialised commercial one, offering diminishing opportunities to small-scale farmers. In describing their experiences of rural poverty and rural-urban migration, several participants drew attention to the limited market linkages of many households, which prevent small-scale family producers from selling their products in a timely way and at market price. Social workers and caregivers identified gaps in support to facilitate individual families' access to local and national markets,⁸⁶ with the lack of systematic or organised state mechanisms for supporting small-scale producers a common issue raised. Describing a context in which rural families struggle to develop their agricultural business beyond subsistence levels, this NGO worker with experience in rural development outlined the benefits of business and market-orientated interventions to support families at risk of placing their child in residential care:

"[Our NGO] tried to improve [families'] skills in agriculture . . . but still things did not improve - [these families] still only meet their own consumption [needs] - they do not make any money - it doesn't work . . . but . . . when we bring buyers from the market to them - not to talk about skills or anything - but to talk money - profit and income - when we connect them directly [to markets] . . . it is more [effective]." NGO social worker 16

This statement highlights the potential of directly linking rural producers with the market, underscoring the importance of practical, income-orientated approaches over the

⁸⁵ Despite non-gender specific invitations to participate in this study 10 out of 12 of the parents and other family caregivers interviewed were women. No birth fathers participated, only two grand-fathers.

⁸⁶ For example, through the formation or membership of economic groups, support for distributing or marketing products, upgrading the knowledge and skills of small-scale producers or facilitating corporate associations such as cow or pig-raising associations.

pedagogical and skill-enhancement strategies traditionally favoured by international agencies and NGOs. Another NGO social worker highlighted the lack of government-led support that he felt was needed to make small-scale agriculture a sustainable livelihood option:

'Many people say that Cambodian people are poor because they are lazy - but no, they are not lazy. When they do agriculture, they cannot sell, for example my mother, she has twenty mango trees. In mango season she has a lot of mangos - but no one picks them - no one buys the mangos - she has a lot of coconuts - no one buys the coconuts - they just drop and rot wasted . . . we are not lazy [but we have] no support, no help for small business - it is [the governments'] job - but they don't do it.' NGO social worker 14

Another NGO social worker echoed this view of inadequate government support:

'The main reason that pushes families to separate and place their children in an orphanage is [that] people have no job, no employment and no support - no support from the government - it seems that [the government] don't help much.' NGO social worker 5

Both participants identified a lack of national and sub-national state interest or support for pro-poor livelihood measures as contributing to unnecessarily high poverty levels in rural Cambodia. As the Director General of the United Nation's Food and Agriculture Organisation noted:

'The shocking fact is that at least two out of every three people experiencing extreme hunger [in Cambodia] are themselves small-scale food producers in rural areas.' (Phnom Penh Post, 2022c)

Strengthening market-orientated agricultural cooperatives and producer groups could encourage production above subsistence level, allow for cost savings on shared business-support services, ease access to processing equipment, and improve small-scale producers' linkages to the value chains of local and national market systems. However, the funding and coordination of such activities are beyond the scope of Cambodia's patchwork of uncoordinated and non-market-orientated NGOs to deliver and would need to be led by national and sub-national state actors working in partnership with the private sector. Such ideas or approaches do not feature in the Ministry of Rural Development's *Strategy Action Plan 2019-2023* (MRD, 2019), an omission that may reflect a neoliberal approach to development which argues for minimal state intervention in the economy.

While employment in the Cambodian agricultural sector fell from 73.7% of the workforce to 52.7% between 2000 and 2015, employment in the manufacturing and service sectors rose by a comparable amount in the same period (ILO, 2016). Propelled by investment from China, several urban centres⁸⁷ in the country have seen a property development boom in recent years, reflected in the contribution of the construction sector to GDP; doubling from 6% in 2011 to 13% in 2017 (SCI, 2021). In this context, daily wage labour on construction sites was cited by several caregiver participants as an income solution, and several reported receiving financial remittances from extended family members working as day labourers on construction sites and factories (often far from home or in Thailand). However, they described construction work as precarious, with the intersections of physical danger (due to lax health and safety conditions), illegal migration (and its concomitant risk of arrest and detention), lack of labour protections and exploitation making it a common, but unloved income-generating option of ‘last resort’ for families that are financially struggling.⁸⁸ As this mother from Battambang, a town close to the border with Thailand with high levels of labour migration, said:

‘I went to Thailand . . . illegally . . . [via] a smuggler, so I had to pay a lot of money, so I owed debt [to the people smuggler] . . . and [in Thailand] I was working as a construction worker. But the company did not pay any money to me.’ Caregiver 5

As suggested by this account, construction is not a male-dominated occupation in Southeast Asia, with the International Labour Organization reporting that approximately 40% of migrant construction workers in Thailand (predominantly Cambodian nationals) are female (ILO, 2016). The account also highlights how the precarity of their situations can leave workers vulnerable to exploitation and wage theft (an occurrence reported by several other participants in this study). Many of the caregivers identified long working hours and demanding employment and income-generating conditions as contributors to family separation. They also reported difficulties balancing childcare responsibilities with the demands of earning a living. Several noted that despite being in full-time employment, low pay left them still unable to meet basic needs, resulting in the placement of children in residential care. This grandmother, for example, stated:

⁸⁷ Phnom Penh, Sihanoukville, Siem Reap and Poipet.

⁸⁸ To provide some context, participants reported the 2021 daily rate for construction work to be 30,000 Khmer Riels per day, which represents an income of approximately \$7.50 USD per day.

'I did some farming work – but I was still lacking money - and I thought it would be better for [the children] to stay in the [orphanage].' Caregiver 6

She went on to explain that whilst she now had a job in a local government centre, she still struggled to buy food and meet the children's school costs:

'I do the cleaning at the health clinic – but I do not earn enough.' Caregiver 6

The garment sector (clothes manufacturing) is a cornerstone of the Cambodian economy and generates employment for approximately one million workers, nearly 80% of whom are women (Better Work, 2023). Whilst the sector provides critical employment opportunities for women, it also perpetuates gendered economic vulnerabilities and exploitative working conditions. Gender-specific issues in the context of this study include the intersectionality of gender and class, maternity rights and the challenges of balancing work and family responsibilities. The intersections of low pay, long working hours, lack of accessible childcare and inability to meet basic needs were highlighted by a single mother working in the garment sector in Phnom Penh, who told us:

'I work in a factory. In front of the airport - I have two children by a previous husband - he had another girlfriend so I decided to split up with him - and then I got sick - I think because I did not eat enough. [Today] I still do not have enough food to eat or money for the children's education. . . I work from 7am to 7pm six days per week - my sister helps me take care of the children.' Caregiver 2

Cambodia has no legal minimum wage and few labour protection laws outside the country's flagship garment industry.⁸⁹ The above participant reported working twelve hours a day, six days a week, but still not having enough money to pay for school or food. Highlighting labour exploitation and income inequalities characteristic of neoliberal development, one NGO manager said:

'If you look at the daily activities of the poor, they work more than the rich. They have no time to rest. But they get less income . . . sometimes they do not have daily food for themselves or their families - even though they have worked hard during the day.' NGO manager 2

In summary, flexible and competitive labour has contributed to Cambodia's economic growth. This growth has been achieved within a neoliberal framework emphasising

⁸⁹ In 2023 the minimum wage in the garment sector was raised to \$200 USD per month (Phnom Penh Post,

2022).

deregulation, market liberalisation and limited government intervention. Cambodia's flexible and low-cost labour has attracted foreign direct investment, particularly in the garment industry, which is Cambodia's most significant export-orientated sector. While these competitive conditions attract foreign capital, contribute to GDP and provide employment and immediate economic benefit for workers, they impose social and economic costs, including income inequality, minimal labour protection laws and exploitative working conditions.

A government social affairs official in northern Cambodia pithily challenged a prevailing stereotype and expressed his view that the cost of the country's macro-level economic success is often borne by those who benefit the least:

'The poor are not lazy. They work harder than the rich . . . they just don't get paid.'
Government social worker 3

5.2.3. Household economic strengthening

Caregivers who participated in this study identified income poverty as a leading cause of family separation, and the accounts of their employment and livelihood experiences presented above highlighted the need for policy and programming to increase family income. Household economic strengthening (HES) activities aim to reduce families' vulnerability to poverty and improve caregivers' ability to provide for their children. Household economic strengthening activities are diverse and include job placement, relief assistance, savings groups, agricultural support and training, loans for small businesses, vocational and skills training and cash transfer and social protection programs. Caregivers and practitioners who participated in this study identified support to improve income as a key service to prevent family separation. For instance, this mother identified low-paid and insecure employment due to a lack of any marketable skills as one of the reasons she had placed her children in care.

'The main thing is about the skills . . . by skills I mean things you can use to get a job - for example, sewing skills for a garment factory job so you can get a salary.'
Caregiver 4

An NGO Director stated that despite its low profile in policy and programming, improving family income is, in her view, the most effective intervention for preventing family separation:

'If you get the livelihoods sorted with the family - [establish] economic stability – these other issues - violence, drugs - they disappear, they reduce . . .' NGO manager

6

While recognising the value of household economic strengthening activities, practitioners highlighted several barriers to their effective implementation, identifying challenges both caregivers and social work staff face. The government and NGO social workers spoken to as part of this study work primarily with the very poorest. As detailed in this study, many of these families often face long-standing and inter-connected social, economic, health and psychosocial problems. In discussing supporting micro-enterprise start-ups, this NGO social worker in Northern Cambodia summarised:

'The more vulnerable the people are the more difficult it is to help them. It is very difficult. They have so many problems already - to run a new small business as well is a lot to ask.' NGO social worker 16

Another NGO social worker elaborated:

'We do this [small business] work - we help them step-by-step - give them money to start - the issue is that the budget that we have is limited and the percent of success is not certain . . . and [these businesses] never grow. They stay small . . . [and] many of them do not want [to learn] a skill - they are old - they cannot 'do' anything - they cannot do make-up or hair-cutting - and they do not want to learn, they just want to cook something and sell it. Many of these people are grandmothers. Some of them are old.⁹⁰ Plus, they have to stay at home and look after the children.' NGO social worker 8

This example highlights several points. For example, the need for many caregivers to combine running a business with child care responsibilities, and the reality that (due to mass migration) many of the caregivers are grandparents who are used to performing low-skilled construction and agricultural work and lack the skills that the 21st-century employment market seeks.⁹¹

These accounts surface the high level of support, individual care planning and follow-up visits some parents and caregivers may need to improve their financial situation

⁹⁰ The situation of grandparents taking on family care responsibilities is discussed in more detail in Section 5.3. 1.

⁹¹ Despite the challenges described in this section a check on internal data from one of the participating NGOs (Mith Samlanh in Phnom Penh) reported 191 small businesses begun and 447 (mainly youth) placed in employment during 2022.

sustainably. For example, this mother expressed her fears and need for support and advice in order to consider starting up a small income-generating business of her own:

'I would really like to start a small business. But I have zero money. I am scared. I cannot even pay the rent - so to start a business - I don't know - maybe I will speak to [the social worker] and see what they think might be possible - I like the idea - I could sell drinks . . . ' Caregiver 6

This mother's comment draws attention to her belief that running a small drink-selling business, could be 'possible', but also indicates the practical and moral support she feels she would need from her social worker to think through and realise such a plan. Household economic strengthening activities in low-and-middle-income countries are diverse and must be tailored to address each family's unique circumstances and challenges (Laumann, 2015). As this NGO social worker explained:

'Different [household economic strengthening] approaches - vocational training, small business or job - they are for different people - that is why we need to visit the family and find out what they want to do - some people they want a job from the company, from the factory or whatever - and some people they want to have a small business because they want to be able to take care of their children . . . ' NGO social worker 14

This comment highlights the social worker's role in building relationships with the families they work with, assessing the situation collaboratively and holistically, and making individual plans that fit the family's particular circumstances.⁹²

According to several practitioners, a limitation on NGOs successfully implementing small-business start-ups and other household economic strengthening activities is that between the parents' lack of skills or an entrepreneurial mindset and the supporting social workers' lack of business experience, profits in many such businesses remain at subsistence level, rather than growing into the kind of successful enterprises often represented as a potential outcome in some of the literature promoting micro-enterprise as an important and scalable poverty-reduction strategy (Barrientos & Hulme, 2016). The staff composition of many NGOs working with children and families typically includes social workers, teachers and medical staff, and recruiting personnel with business skills and experience to social service organisations is a challenge. As this social worker described:

⁹² Findings related to the role of social workers in Cambodia is further discussed in Section 6.3.3.

'It's very difficult to help a family start a small business - and to be honest, [our NGO] has only a small amount of money to help families set up and run a small business - and, we are not really expert in doing this kind of work . . . if we could get a funder for this project - that would help families.' NGO social worker 11

In practice, field social workers are often involved in supporting small-business start-ups, when a different skill set would likely be more effective. As this social worker explained:

'Business people and social workers are different [types of people] . . . for many NGOs - their social workers are not experienced in business, they have never run a business [themselves].' NGO social worker 12

This point was echoed by an NGO social worker from a different organisation:

'[Our NGO] has a social worker who focuses on small business - but even they are not experienced in running a business. But . . . if we do not do it - no one will do it - so we have to do it . . . ' NGO social worker 17

Whilst not a panacea, practitioners and caregivers who participated in this study valued household economic strengthening interventions to address both the symptoms and the causes of economic vulnerability. The NGO social worker below echoed many others when he said:

'If we had more budget we would like to do more small business support.' NGO social worker 9

Despite facing implementation obstacles, practitioners highlighted household economic strengthening as a crucial focus for enhanced policy and donor engagement. In explaining current policy and programming priorities to prevent family separation, one NGO Director observed a preference among donors for 'new' and 'innovative' projects, noting an unwillingness to fund household economic strengthening initiatives. According to this participant, donors and international policy actors are drawn toward more dramatic child welfare issues, such as violence against children, child trafficking, and modern slavery. The participant felt that donors and INGOs often perceive employment, skills, and livelihood programs as less appealing and *'a bit boring'* (NGO manager 6). This perspective was echoed by another NGO director from central Cambodia, who highlighted the operational challenges and the emphasis on quantitative, target-driven results favoured by donors. He suggested that these factors contribute to the lack of prioritisation of household economic

strengthening by international donors. When asked why household economic strengthening activities receive so little attention, he elaborated:

‘Because it is not easy to do! You need to train [the caregivers], you need [to provide] capital, you need to record everything. [In contrast] delivering [Positive Parenting Programs] is easy! You just put up a loudspeaker in the village and you can report . . . thousands of [people trained] – you have a big number to report! - the donors are happy!’ NGO manager 7

In the precarious livelihood context described by participants, household economic strengthening supported by social protection systems and cash transfers can serve as a critical lifeline for the most vulnerable populations (Marcus & Page, 2014). In the next section, I present and discuss findings related to participants’ experiences and perceptions of the Cambodian government’s recent efforts to strengthen social protection for families identified as poor and in need of social protection via cash transfers.

5.2.4. Social assistance and social protection bottlenecks

The role of government in providing social assistance and facilitating social protection cash payments⁹³ is recognised as an effective way of reducing poverty and of preventing family separation (Herczog, 2017; Roelen et al., 2017). However, under-investment in social protection mechanisms in Cambodia had until recently, done little to mitigate the impacts of extreme income inequality.

‘Social transfers reduce inequality, but the social safety net [in Cambodia] remains under-developed.’ (IMF, 2019)

However, the COVID-19 crisis catalysed the expansion of Cambodia’s social protection system (popularly known as the ‘ID Poor card’) which was originally developed to facilitate access to free health care for those assessed as being poor by their local authorities. Faced with millions of citizens unable to earn income during the pandemic lockdowns, this pre-existing framework was leveraged to enable digital payments directly to the mobile phones of millions of low-income citizens, earning Cambodia international plaudits for its rapid scaling up of digital social protection payments (Chhoeung & Nguyen, 2022). The system has now been adapted to serve as the administrative backbone for the provision of monthly ongoing cash transfers under an initiative known as the ‘Family Package’ (Narith et al., 2023).

⁹³ For example, emergency support, work assistance and training support, remittances and scholarships.

Whilst these recent advances are promising, the child-related transfers are limited to infants and the size of payments remains tokenistic.⁹⁴ In addition, a survey conducted in November 2020 found that out of 823 vulnerable households in receipt of NGO support, only 64% were registered as ID Poor (SCI, 2021:14). Findings from this study also found that access to social protection was inequitable. Reflecting on the ratio of the very poorest being successfully enrolled to receive any of Cambodia's new social protection benefits, this NGO Director said:

'Well, we see discrimination. All of our target group are entitled [to an ID Poor Card] . . . but only 30% of them have received it.' NGO manager 4

The participants' accounts in this study shed light on issues concerning the allocation of ID Poor cards and their associated social protection payments. Specifically, they highlighted problems of non-transparency, discrimination, and corruption in the distribution process. Government and NGO participants reported that familial, party-political and business patron-client relationships play a significant role in the disbursement of individual social protection payments and the institutional allocation of public funds intended for social assistance at sub-national levels. For example, an NGO social worker in Phnom Penh observed:

'In some cases, some people that get the ID Poor card are [the local authority officials'] relatives. They go to their relatives and say 'Hey pretend to be poor and wear some old clothes and I will take a picture of you and send it to the government to say that you are poor so you can have this [ID Poor Card]'. It is all about connections' NGO social worker 7

In addition to complaints of chronic and systemic underfunding, local authority social workers participating in this study also identified patron-client relations and ethnic discrimination⁹⁵ as contributing to making the issuance of ID Poor cards and the allocation of emergency support and social assistance at district, commune and village levels discretionary, nepotistic and to varying degrees politically strategic. This NGO social work

⁹⁴ To give some perspective, whilst the delivery mechanism for cash transfers is efficient the disbursements to date are for small amounts of money. For example, the disabled and those living with HIV receive \$10 per month, a city-based mother with a child aged under 2 years old receives \$10 per month, whilst her rural counterpart receives \$6 per month (Personal correspondence).

⁹⁵ The role of discrimination against Vietnamese Cambodians in family separation is explored in Section 6.3.1.

manager stressed political factors influencing the identification, assessment and enrolment of people into Cambodia's nascent social protection system:

'Of course, there is some discrimination - some party political [influence]. Some people are not [registered for ID Poor] because they are not on [the local authority's] political side.' NGO manager 2

Experiences of cronyism and a lack of transparency were described by social workers, caregivers and even government staff regarding the ID Poor enrolment process, access to cash transfers, and the allocation of social assistance funds at the local level. Cambodia's state social welfare system is designed to provide emergency relief and social assistance through funds allocated annually by the central government to local authorities. These funds are ostensibly ring-fenced to support social assistance activities for families within each commune, based on the assessment and discretion of the commune social worker and the Commune Chief. This process, however, came under scrutiny for favouritism and opacity, with some participants raising concerns about its fairness and effectiveness. As this NGO social worker explained:

'[In theory, the local authority] should use 20% of the Commune budget⁹⁶ to respond to the needs of [poor] families. [In practice] this usually means building a house [for a homeless family] or [providing] emergency support - [for example] providing rice. But we need to develop a tool for the Commune level social workers to monitor the budget. . . [and] we need to review the Commune spending plan - 20% of the budget should be available for social support.' NGO social worker 1

Explicitly calling out government corruption is socially unacceptable, professionally risky and potentially dangerous for most Cambodians. The above social worker's references to the need for enhanced monitoring and reviewing of budgets at the local level incorporates an unvoiced implication that the officially ring-fenced 20% of the annual commune budget is not, in practice, being used to fund social assistance activities and that improved monitoring and auditing mechanisms may help in addressing the issue. A related financial practice hampering the implementation of government-funded social assistance programmes obliquely suggested by several participants in this study was that the budget allocated to local authorities for spending on social programming is often spent instead on construction or road works as these activities offer opportunities to local level state and

⁹⁶ Budget allocation for social affairs varies depending on the population within the commune. Government and NGO participants estimated that in their experience communes in 2021 were receiving approximately

\$3,000-\$4,000 USD per annum nominally for spending on social assistance activities in the commune.

private sector actors for under-the-table payments. According to some participants, this type of graft can result in local-level budgets ostensibly ring-fenced for supporting families in need and at risk of separation being spent on unnecessary infrastructure projects. As a government social worker acknowledged:

'I am not clear about how it works for the commune- but i know there are rules - for example . . . 20% of the commune budget {is officially allocated for} social affairs. But what I see - is that they work more on infrastructure – because it is easier to. . . you know . . . because you can just talk to the private company to work on the road, or the canal. . . you know? (laughs) . . . the [invoice] . . . (laughs explosively) . . . there is the invoice. . . you can ask for the invoice from the private company . . . so it is easy to make [a fake] document about that (laughs)'
Government social worker 3

Another government social worker said:

The [central] government give the [local social welfare] budget to the commune, but the commune focus more on development . . . infrastructure.' Government social worker 1

Highlighting the limitations such misallocations of funds place on front-line social workers' ability to fulfil their role or responsibilities, this NGO manager commented:

'Go to the commune and ask the [commune social worker] how much budget they have been allocated - probably it has been allocated to Admin. Or infrastructure. Every year. Road repairs. Every year . . . ' NGO manager 2

The failure to allocate social budgets to commune-level social workers hampers their ability to assist families in need. Without the necessary funds, government staff struggle to perform their duties. As a result, NGOs often step in to cover basic expenses, like petrol, for these workers. This financial support enables government social workers to carry out essential statutory duties such as approving family reintegration and removing children from homes due to child protection concerns. When asked about the size of her annual budget, this government social worker said:

'Sometimes I get money for petrol. Sometimes not. But, mostly not.' Government social worker 4

5.2.5. Summary

This section presented findings on the socioeconomic factors contributing to family separation and the placement of children in orphanages in Cambodia. It revealed a

significant disconnect between policy-level representation of the drivers of family separation and the lived experiences of those directly affected by these issues. The findings highlighted the critical role of poverty, with many families citing economic hardship, food insecurity, and the inability to meet basic needs as primary reasons for resorting to orphanage placement for children.

As a significant constituting factor of poverty, the section also explored the livelihood challenges faced by families, particularly those in rural areas, who are disproportionately affected by low income, exploitative labour conditions, and inadequate governmental support for small-scale agriculture and other livelihoods. These conditions not only perpetuate family separation but also draw attention to the importance of targeted interventions to support family income and livelihoods as essential components for preventing such separations. Despite the recognised need for household economic strengthening activities to address the underlying causes of vulnerability, implementing these interventions faces significant obstacles, including limited funding and a lack of specialised knowledge and skills among practitioners to effectively support the development of income-generating activities.

The findings also revealed inequalities and inefficiencies in Cambodia's social protection and social assistance systems, particularly in enrollment into the ID Poor system, the disbursement of cash transfers and the allocation of government social assistance budgets at the commune level. While the COVID-19 pandemic successfully catalysed the expansion of the country's social protection delivery mechanisms, participants highlighted challenges remaining in ensuring equitable access to these benefits, with reports of discrimination, corruption and misallocation of funds intended for social support.

5.3. Labour migration

Participant's accounts identified internal and external migration as a defining feature of contemporary Cambodian society with significant impacts on family life and structure. Participants drew particular attention to the effects on family life of large numbers of children left behind to be cared for by their grandparents in rural villages when their parents migrate for work. The NGO social worker's account below summarises the compounding impacts of labour migration, a harsh employment environment and dependence on struggling relatives to provide full-time child care.

'[Migration] is one of the main issues related to family breakdown and sending children to the orphanage. For example, some parents travel to Phnom Penh from other provinces to work and then no one takes care of the kids at home in the province. Grandmother cannot take care of them as she has no job. So, she has to send the kids to the orphanage. Sometimes the mother [migrates to Phnom Penh] with the children - but the company or the shop or the business owner only accepts the mother, they don't accept the children - and the mother sleeps at the workplace - so she has to send the children to the orphanage.' NGO social worker 6

Cambodia's rural-to-urban migration trends can partly be attributed to the dual forces of globalisation and internal development policies, which have shaped labour market conditions and unevenly distributed economic opportunities across the country. While providing economic benefits, this mass migration also strains traditional family structures, contributing to family separation and residential care placement. A government social worker working in a district on the outskirts of Phnom Penh containing several informal settlements which are home to recent migrants to the capital identified economic necessity as the underlying driver of migration:

'It is because of poverty. They are very poor. Poverty is there all over Cambodia. That is why they migrate here, and to Thailand and other countries.' Government social worker 1

As well as the economic drivers of rural-urban migration commonly identified in the literature (Diepart & Ngin, 2020; Shaikh et al., 2021), participants in this study specifically highlighted that in addition to the increasing market dominance of large commercial agricultural companies and the lack of government support for local producers, the financial viability of small scale agricultural livelihoods had been further eroded by increasingly unpredictable weather patterns (particularly irregular rainfall, flooding and drought), deteriorating soil quality and inadequate government investment in irrigation systems. As this rural NGO social worker in a rice-growing region of northern Cambodia explained:

'Water and harvesting is so difficult [now]. For example, they grow rice and are about to harvest it and the flood comes. The climate has changed so much. Some rainy seasons there is almost no rain. This year there was almost no rain. But then it rained at the end, right when it was time to harvest. So the flood came and the rice was ruined.' Government social worker 3

Similar experiences were echoed by a farming family interviewed in the same province:

'Before it was better, we made some money, small money - but some money. Now it is getting harder and harder. Disease, insects, floods . . . and rain is difficult There is no rain, rain is less. It is hard - there is less mist - so it makes the soil harder. So, it is difficult to grow anything.' Caregiver 6

These participants also identified mass migration, the industrialisation of agricultural production and climate change as contributing to under-employment and poverty for many families. As a result, millions of rural Cambodians are by necessity drawn to the garment, construction, and service industries in the country's urban centres, or to employment opportunities offering better pay and working conditions in neighbouring middle-income countries such as Thailand and Malaysia.

This NGO social worker's description of a recent visit to his mother in his home village was typical of accounts describing evident demographic and socioeconomic changes in rural Cambodia.

'Three weeks ago, I went to visit my mother in [my home village] - and I found that compared to three or four years ago there were less people there now - now it is quite empty - everybody has gone to Thailand or to Korea - in each house there are only one or two people - it seems quiet. Before - so many [people] would go to harvest a rice field - but now just one machine can do! Many villages are very quiet now.' NGO social worker 17

This observation draws attention to both the hollowing out of rural communities as those of working-age migrate abroad or to the city, and also the social and economic effects of the replacement of traditional farming techniques with the less labour-intensive methods used by both large multi-national companies and increasingly by smaller farmers. This farming automation factor was frequently cited as contributing to the sharp decline in rural employment opportunities and consequent migration. For example, this NGO manager noted that:

'People no longer do human agriculture. For example, [rice] transplanting. If you go to the community not many people now [manually] transplant. They use the machine even if they [only] have a small piece of land.' NGO manager 2

Expressing his view that internal or international migration is rarely the ultimate preference for those who migrate and is fundamentally driven by a lack of opportunities and poor employment and pay conditions, he added:

'No one wants to leave their home country or their home town to migrate. You can

ask them - 'Would you like to go back?' - 'Would you like to stay with your family?'

- *Then, yeah, sure they would like to stay with their relatives, they would like to meet their own friends every morning . . . when you migrate your social relationships are cut, broken . . . they would like to go back, but the bad conditions push them to migrate. It is [because of] income - it is the income - the low income.*'
NGO manager 2

This participant's reflection on some of the social effects of economically determined migration invites an expanded conceptualisation of family separation in Cambodia, which is less exclusively centred on the child and considers the impacts on all family members. Highlighting the effects on families of the wider economic environment, this grandmother said that, despite almost inevitably separating parents from their children, the better pay and working conditions outside Cambodia were major pull factors in international migration.

'Migration is a big problem for Cambodian families – the village is quiet - only grandmothers looking after the kids - younger people go to Thailand and other countries . . . in Thailand they have a better system, they set the [working hours] properly, the pay is regular . . . [so] a lot of people [migrate and] leave their children with their parents.' Caregiver 5

5.3.1. Children of migrant parents and orphanage placement

Kinship care remains a cultural norm in many parts of the world, with extended family networks living and working together and extended family members routinely taking care of children whose parents have died, migrated, or are otherwise no longer able to provide full-time, day-to-day care for them themselves (Roby et al., 2014). However, historically, family members taking care of their nieces, nephews or grandchildren in the prolonged absence of their birth parents as a result of migration is not a historical norm in Cambodia and can be considered a recent phenomenon usually adopted as a coping strategy to manage childcare in a highly-mobile, neoliberal labour market (Diepart & Ngin, 2021; Springer, 2015). As poverty, economic changes, and indebtedness lead to increasing numbers of working-age parents migrating, family caretaking dynamics and roles in Cambodia are shifting. Green and Estes' (2019) ethnographic study of intergenerational dependency in rural Cambodia reported that *'more than a quarter of the households in [the village under study] have grandchildren raised solely by their grandparents'* (Green and Estes, 2019:141). One participant in that study, summarised:

'When I was growing up, parents almost always looked after their own children. But not anymore. Now all of the parents have left the village to work in the

factories and in other countries because everyone is up to their necks in debt.'
(Green and Estes, 2019:141)

Social workers and parents interviewed for this study identified grandparents as the usual providers of kinship care in Cambodia, with maternal grandmothers in particular often taking on the care of children whose birth parents have migrated. However, notwithstanding the strong affirmation of kinship care as a viable and established alternative care option within a rights-based alternative child care perspective (UNGAC, 2010; Cantwell, 2012), numerous challenges to successful kinship care placements – not least the impacts of poverty - were highlighted by participants in this study. Risks associated with kinship care highlighted by participants included lower rates of school attendance, psychological stress and health problems among predominantly older family caregivers and parenting issues related to grandparents' ability to exert adequate authority over older children left in their care. Social work and caregiver participants noted that kinship carers frequently struggle to meet the financial costs of caring for children. For example, the grandmother below described how she had placed her two grandchildren in an orphanage due to her poor health and financial inability to meet their basic needs.

'I sent my two grandchildren to the orphanage, aged fourteen and fifteen. The reason was their parents broke up - divorced - the mother re-married. So, I had the girls. But I was sick and poor. I could not afford to look after the children.' Caregiver
5

This account again highlights the multi-faceted nature of family separation and residential care placement - with elements of divorce, low income and poor health all contributing to the ultimate placement of the girls in an orphanage. Recognising this plurality of drivers, and the under-recognition of the role now being played by grandparents in raising children in Cambodia, a spokesperson for the international NGO World Vision stated:

'The grandmothers [we met] had many burdens – they were worried and experienced stress and anxiety . . . high blood pressure [and] depression. Sometimes we work exclusively with children, but do not work with grandmothers. It is important to build their social protection capacity. [We] urge all of our development partners to please consider supporting the elderly.' (Phnom Penh Post, 2022a)

The most frequently identified challenges faced by kinship carers were financial. This government social worker, when asked which kinds of families most commonly place their children in residential care, elaborated:

'Mostly the very poorest. And usually [the birth parents] have emigrated to Thailand. So, the children live with the grandparents, and the grandparents cannot afford it. They cannot look after them. This is very common – I see it all the time. Grandmother gets sick and she cannot cope - she is already old - it is hard to work and look after the children. She is old already.' Government social worker 1

Several NGO and government social workers reported that the cumulative effects of these pressures resulted in relatively high numbers of grandmothers ultimately seeking to place children left in their care in orphanages. The government social worker quoted below was based in Phnom Penh and was responsible for approving the placement into residential care of children in her district.

'Locally around here there are a lot of grandmothers with care of the children. Hundreds. A lot. Many of the children placed in orphanages are placed there by their grandmother. Yes – [they are] most often placed by the grandmother because the parents have gone to other countries.' Government social worker 2

Several participants highlighted a family dynamic where the relationship between children and their grandparent caregivers becomes increasingly difficult as both age. This strain often peaks when children enter their early teens, a period marked by rising financial and emotional costs of caregiving. Teenagers begin to question and challenge the authority of their grandparents, who are acting in a parental role. Consequently, many grandparents find themselves considering the placement of these children in residential care as a solution to manage both the heightened expenses and the emotional challenges of caregiving during adolescence.

'[We] can see the problems for the children remaining in the home village, staying with grandparents or relatives. [We] see that the child doesn't go to school and doesn't listen to [their grandparents] because they don't have their real parents there to give them warmth and guidance.' NGO social worker 12

A point made repeatedly by professionals was that, in the absence of the children's birth parents, grandparents often lacked the authority to keep the children living in their care attending school and away from environmental risks in their communities such as drug use, sex work or crime. As this NGO Director on the border with Thailand noted:

'By definition many of these migrant families are poor - the parents who move to Thailand sometimes neglect to send remittances to the [grandparent caregivers] back in Cambodia and - in our experience children left behind are at high risk to a number of problems – non-school attendance is common for children left behind.' NGO social worker 11

5.3.2. Summary

In summary, migration from rural areas to urban centres and abroad represents both an opportunity and a survival strategy for many Cambodians. Yet this movement is not without its costs, most notably in the context of this study the strain on traditional family structures and the challenges it poses to child welfare through family separation and orphanage placement. While addressing immediate financial needs, migration's social and economic consequences introduce new vulnerabilities, particularly for children left behind in the care of elderly relatives. The participants' accounts underscore the need for policy interventions and community support mechanisms to mitigate some of these adverse effects. Specifically, there is a need for enhanced social protection for caregivers, improved access to education for children of migrant parents, and economic policies that take account of rural poverty and support small-scale agriculture.

Like China, Cambodia's recent economic growth and poverty reduction have been driven by foreign capital flowing into the country in search of low land prices and affordable, flexible labour. Examining China's experience with migration and children left behind in rural areas when their parents migrate can potentially be useful in informing the development of policy and programming in Cambodia, given China's longer experience and more extensive research on the topic.

A common feature of caregivers' and social workers' stories was the dense description of the negative effects of micro-finance loans and debt on poor (and not-so-poor) families in contemporary Cambodia. In discussing her perspective on migration in Cambodia, the following NGO social worker said:

'The reason that most of the people migrate is debt'. NGO social worker 1

In the next section, I go on to consider the role of micro-finance lending and over-indebtedness as factors contributing to the perpetuation of poverty and family separation.

5.4. Over-indebtedness

While poverty and migration were the most common factors raised when discussing the circumstances leading to the placement of a child in residential care, analysis of the talk

also identified the role of over-indebtedness to micro-finance institutions (MFIs) as a significant constituent of both of these factors and contributor to family stress and

separation. In addition to emerging as a major theme identified by study participants, observation and general discussions I had with people while collecting data in Cambodia indicated that difficulties in managing high levels of personal and household debt are currently more-or-less endemic. As one local-level government social worker informed me:

'Everyone is in debt - it is very obvious - everyone is in debt . . . even me. A lot of people suffer a lot.' Government social worker 4

This section presents findings related to over-indebtedness drawn from interviews with parents, social workers and government officials. Section 5.5 then explores these findings through the lens of neoliberal development and governmentality in Cambodia, paying particular attention to the role played by land loss and its wider representation of violent dispossession (Green & Bylander, 2021; Springer, 2013).

The World Bank's *Microfinance and Household Welfare Report* (World Bank, 2019) found that *'over the past five years, the average loan size [in Cambodia] increased more than ten-fold, as did the share of loans for consumption needs'* (World Bank, 2019: 6). These financial trends are attributed by the World Bank to a combination of the low penetration of formal banking, aggressive lending practices and low financial literacy. Reflecting these international concerns about lending practices and the lack of regulatory oversight and borrower protection, a government social worker interviewed for this study said:

'The problem is the micro finance [companies] just give the loan[s] to everyone - they don't care. They have policies, but they do not obey their policies properly. They just give the loan to everyone - and everyone takes it.' Government social worker 3

The micro-finance model was originally developed to provide small business loans to support the growth and development of micro-enterprises whose owners could not access the formal banking sector (Yunus, 1999). However, the literature review findings indicate that in Cambodia such loans are commonly being taken on to either service other debts or meet immediate consumption needs (Green & Bylander, 2021; SCI, 2021). Some of the caregivers who participated in this study recounted adopting severe coping strategies, usually to manage a lack of food, such as adults eating less to ensure sufficient food for children, eating leaves and other plants not usually considered edible and taking on

unsustainable levels of debt from loan-sharks or micro-finance institutions.⁹⁷ Despite differences in the circumstances and experiences of the parents and caregivers interviewed, most of the stories of family coping mechanisms included taking on loans and debt in order to meet basic needs. As this NGO social worker explained:

‘Some families, they don’t know how to get any money - everyone they know is poor – and they are so stressed . . . and they need food and clothes . . . [so] they have to push themselves to get a loan.’ NGO social worker 10

While the ease of obtaining a loan in Cambodia often presents as a lifeline to families in acute need, the typically high interest rates and demanding repayment schedules can result in a vicious cycle, leaving families trapped in debt and jeopardising their financial stability and well-being. As one caregiver whose grandchild had recently been reintegrated from an orphanage to live back at the family home, recounted:

‘I am the only person earning an income in our house - my husband is sick - [but] - I do not earn enough.’⁹⁸ School costs me 2,000 riels (50 cents USD) per day per child - [I have] 4 children - so, \$2 per day 5 days a week - so, \$10 a week [in school attendance costs] . . . [previously] I could give the children something to get a snack at school - but now I cannot. I got a loan from microfinance - because my husband got sick - I have [reduced my debt] by \$500 already - I pay monthly - \$85 per month - to reduce the loan.’ Caregiver 5

According to this participant’s account, she was paying 57% of the monthly family income to service the micro-finance debt. When school costs were factored in, this family of six was left with \$25 USD per month to cover other living expenses. In terms of basic living costs, Cambodia is a relatively inexpensive country. However, \$25 USD per month between six people is insufficient, and, at the time of the interview, the family depended on emergency food support from an NGO. This participant also reported being in the process of seeking a further loan from a different micro-finance institution (MFI). Cambodia's lack of a comprehensive credit reporting system leads to borrowers taking multiple loans from different institutions, often without the means for repayment. The resulting debt trap underscores the need for cross-sector approaches to addressing over-indebtedness and its

⁹⁷ A 2021 study conducted in Cambodia by Save the Children International reported that *‘[Such loans were] often beyond \$3,000 when the average monthly income per capita is \$104’* (SCI, 2021:5).

⁹⁸ This participant reported earning \$150 USD per month.

social impacts, including strengthening social safety nets, financial education and state enforcement of the micro-finance and credit sector regulatory oversight.

Several practitioners drew attention to the challenges some caregivers (many of whom may have received limited formal education) face in being able to understand the terms and conditions of financial agreements they sign or in having the time, capacity or access to independent advice to support them in thinking through the longer-term implications of taking on and repaying a loan. Regarding limited financial literacy, money-management skills or understanding of loan agreements, particularly in a context in which credit is heavily promoted and marketed, an NGO social worker in the province of Battambang noted:

‘There are some families who are tricked by the [micro-finance] people - they get tricked by them – [the MFI representatives] say – ‘Oh, the loan is not so high’ and [the people] do not really understand - they are not educated about this - so they think: ‘Oh, it is easy - and they end up owing a lot a lot of money.’ NGO social worker 12

An NGO manager in Phnom Penh also expressed their view that:

‘A problem with the MFIs is that some of them miscommunicate. Some of them, they know . . . they don’t give enough information and they know that people cannot really understand. So, when people take the loan they cannot pay it back.’ NGO manager 2

Powerful commercial and institutional incentives to encourage the poor to take out loans they are unlikely to be able to pay back, were also described by this NGO social worker:

‘I know that some of [The MFIs] trick people so that they - OK, so this is a thing that I heard - when you go to work for an MFI your boss will tell you ‘OK, as long as you get a lot of people to borrow money your salary will go up’ - so, the [MFI] employee wants their salary to increase . . . so they don’t care if [the borrowers] are poor or if they understand [the terms and conditions] or not.’ NGO social worker 11

These observations underscore the intensity of the promotion and marketing of credit to low-income borrowers in a country with the largest proportion of microfinance borrowers relative to its population in the world. Average loan sizes in Cambodia are larger than per capita annual income. To provide some context, Cambodia had 3.06 million active microfinance loans in 2022, in a country with only 3.6 million households (Green et al., 2023). Many of these loans are secured by land-based collateral, putting families unable

to adhere to repayment schedules at risk of losing their homes and having to migrate (Green & Bylander, 2021). This intersection of over-indebtedness and migration was highlighted by an NGO social worker from a rural area:

'I see this a lot. Loans leading to migration. [They] go away to earn money to pay the debt. Because they have put their . . . ID card and their land and house title with the [MFI] they owe the money to.' NGO social worker 10

Whilst this NGO social worker felt:

'Most external migrants leave Cambodia to try to pay off a debt.' NGO social worker 2

Suggested solutions to the issue of over-indebtedness proposed by practitioners participating in this study tended to focus on educational and behaviour change approaches to improve borrowers' financial literacy. For example, in common with other practitioners, the following NGO social worker adopted an individualising and responsabilising framing to describe the decision-making and future planning capacities of the caregivers they worked with:

'Uneducated people - they cannot plan - they get a loan - but they do not think about [how] they cannot pay it back - [and then] they lose their land or their house.' NGO social worker 13

Some of the data generated by NGO social workers and government staff evidenced a blaming approach to caregivers, emphasising their inability to make good choices or follow through on plans agreed upon with their social workers. Several practitioners used language suggesting that those they worked with often made short-term, ill-considered decisions unlikely to benefit the family. In support of this individualising framing, practitioners described how, in their view, poverty can result in a short-term approach to life in which daily needs are prioritised, and medium and longer-term planning or the deferment of buying important (or desirable) items such as smartphones or scooters may seem unattractive or pointless to someone concerned on a day-to-day basis with securing income, food or a safe place to sleep.

As this NGO social worker summarised:

'Being poor is stressful.' NGO social worker 13

While another NGO social worker, explicitly drawing a connection between financial stress and mental health, said:

'I see poverty as the root of the problem - when you fall into poverty, you cannot think – it overwhelms you . . . it's despair. You cannot think of anything positive.'
NGO social worker 2

Research supports the view that poverty can have a range of adverse effects on mental health and cognitive functioning (Mani et al., 2013; Tampubolan & Hanandita, 2014). Preoccupied by their immediate situation, forward planning is not prioritised. Numerous caregivers described the psychological and physical health impacts of these stresses on poor parents. As this mother said:

'I have a private loan . . . the interest is 10% and i have to pay off the loan every month - each month I have to pay \$20 to the guy. I cannot sleep because of the loan.' Caregiver 3

Whilst this mother observed:

'A lot of people are having problems with loans. Me too . . . I have anxiety - I cannot sleep - I cannot go to bed.' Caregiver 8

Government and NGO practitioners participating in this study often spoke in pedagogical terms of improving individuals' and communities' financial literacy. However, the findings of this study present a transpersonal picture of over-indebtedness as an entrenched and systemic challenge best approached from several angles, with the primary onus to act resting with the government and lending institutions rather than on individual borrowers. Enhanced regulation of the Cambodian micro-finance sector is necessary to ensure that interest rates and repayment schedules are reasonable, transparent and understandably communicated to potential borrowers. Such measures would require the government to promote responsible finance by monitoring and enforcing regulations that require micro-finance institutions to adhere to ethical lending practices. Advancing such policy measures could allow the Cambodian micro-finance sector to fulfil its original purpose as a poverty alleviation tool rather than acting as a de facto social safety net, a catalyst for financial ruin and a mechanism for systematic dispossession.

5.5. Neoliberalism, dispossession and governance

In this section, I will discuss the findings from a theoretical perspective through the lenses of 'governmentality' and 'subjectification' (Foucault, 1977; Foucault, 1978). Given the prominence of these issues in the participants' accounts, I specifically highlight the context and impact of high levels of over-indebtedness, the vulnerability of borrowers, the under-regulated and predatory nature of the credit industry, and the widespread institutional corruption.

Foucault's concept of power and subjectification posits that the fully autonomous individual subject (i.e. person) within society is not possible, as the formation of the subject (person) depends mainly on political, social and economic powers external to itself.⁹⁹

Considered using Carol Bacchi's (2009) *'What's the Problem Represented to Be?'* (WPR) approach to policy analysis, the subject formation resulting from the emergence of micro-finance credit as a 'solution' to poverty in Cambodia can be interpreted as a form of governmentality that reflects the country's neoliberal approach to development. That is to say, the discourse and subject-formation of microfinance emphasises the neoliberal virtues of individual responsibility and entrepreneurship, with borrowers expected to self-manage their financial behaviour, invest their loans productively and thereby, ideally, lift themselves and their families out of poverty.

Whilst the microfinance model has the potential to be an effective tool for reducing poverty, particularly for women and their families (Daley-Harris, 2002), the empirical evidence of its impacts is mixed and critical scholarship highlights how the sector contributes to social and economic restructuring and disruption associated with neoliberalism which does not benefit the poor (Kotir, 2009; Dzansi, 2014). Adopting a feminist lens that foregrounds the role of women in generating family income in Cambodia, Katherine Rankin (2001) argues that the 'empowering' and 'entrepreneurial' financial subjectivities advanced through the microfinance model erode traditional social relations and community ties. The familiar neoliberal stress upon individual responsibility inherent in both the rhetoric and practice of microfinance can, argues Karim (2001), erode

⁹⁹ This idea should not be confused with full-blown determinism, in which subjects are passively shaped by discourses and practices within an all-powerful social order. Foucault's subjects do have some personal

agency, albeit significantly conditioned, in which people *can* both subvert and reject the power-relations that act on them (and which, they in turn enact/reproduce themselves) (Butler, 2002).

community bonds, leaving borrowers to face an exploitative and precarious neoliberal labour market as well as banks and micro-finance companies by themselves (Federici, 2014 in Green, 2019). The accounts provided by participants as part of this study indicate that these challenges are compounded by associated processes such as migration and family separation.

In support of this critical view, the qualitative data and stories generated for this study suggest that the growth of the microfinance industry in Cambodia *'has not led to a proliferation of entrepreneurs'* (Green: 2019:130), and levels of household debt have soared as borrowers use microfinance loans to cover family and life-preserving essentials, such as food, education and healthcare. Bylander (2015) found that less than 45% of microfinance loans finance productive enterprises, whilst Seng (2021) reports that 58% of microfinance loans in Cambodia are spent on consumption needs. The accounts of participants in this study supported these findings.

The *Microfinance Index of Market Outreach and Saturation* (MIMOSA) is a standard tool which uses data provided by the World Bank and indicators from the Human Development Index (HDI) to make some measure of 'market saturation', or over-indebtedness in the international microfinance sector. The MIMOSA (2020) report detailed problems in Cambodia's micro-finance and credit sector, highlighting coerced land sales and other human rights abuses associated with predatory lending and widespread over-indebtedness. A government social work manager interviewed for this study indicated the familiar cascading series of events that lead from poverty to over-indebtedness to land loss to migration:

'When [people] lose their land - before they migrate – there is a lot of argument with the micro-finance company - but . . . they still end up losing the land.'
Government social worker 1

The MIMOSA (2020) report also found that seizing collateral via forced land sales is a common method of debt collection, with micro-finance company officers pressuring borrowers into selling land to repay outstanding debts. The NGO social worker below presented her view that poorer families are often the target of unethical and predatory lending practices by micro-finance institutions:

'For me, the real reason that there are more very, very - the real poor people – the reason that they increase is because of debt. There are more banks and

microfinance around Cambodia - they grow like crazy – so, they go around and they give loans to farmers and people like crazy - they know that some poor people and some farmers have land - and they know that [these people] have no plan, no business plan - they know that when they give the money - they know that [the borrowers] cannot pay - so [the micro-finance company] will take the land!’ NGO social worker 8

David Harvey (2017) updates Karl Marx’s concept of ‘primitive accumulation’,¹⁰⁰ with its suggestion of being a historical and over-and-done-with phase of capitalism by introducing the analogous but ‘ongoing’ concept and practice of ‘accumulation by dispossession’. The political researcher Simon Springer (2015) argues that:

‘The primary components of accumulation by dispossession identified by Harvey are evident in present-day Cambodia: the violent expulsion of peasants through land privatisation, the conversion of common property rights into exclusive property rights, the suppression and commercial take-over of alternative and indigenous forms of production and consumption, [and] the commodification of labour.’ (Springer, 2015: 116)

Whilst the lack of transparency on land deals makes a precise quantification difficult, since the late 1990s, private, primarily Chinese and South Korean investors had, at a minimum, purchased an ‘*astonishing*’ (Springer, 2015:47) 45% of Cambodia’s total land area by 2015. Sam Rainsy, the exiled leader of the main Cambodian opposition political party, explains the political and economic logic of this mass transfer of previously public or state-owned land into the private sector from his perspective:

‘Land disputes are related to corruption . . . [involving] a small group of the top hierarchy of the former communist party¹⁰¹ . . . of course such a phenomenon may exist everywhere . . . but in Cambodia it has reached an unprecedented scale . . . they confiscate all the land and sell it to companies that can afford to pay millions of dollars. And it is the municipality who sells the land without any transparency. Most of the money lands in the pocket of a small group, a small number of corrupt people.’ (Rainsy in Springer, 2015:47)

Several participants in this study, from all levels of the policy network, spoke about the social and economic effects of deliberate and systematic land loss and dispossession on

¹⁰⁰ According to Marx primitive accumulation is the violent and coercive precursor to the transformation of traditional societies to fully capitalist ones. The process is characterised by the forceful dispossession of direct producers (for example, subsistence farmers) from their means of production (for example, land) (Marx, 1867).

¹⁰¹ i.e. the former leadership of the Khmer Rouge and their networks (for example, their children).

poorer families and their ability to maintain a stable family life. For example, this Phnom Penh-based social worker explained:

'A lot of companies and powerful people [are] behind this . . . and they are trying to collect the land . . . there is a very big and very strong structure behind this – many people right now lose their land - and when their land is gone they go to the slum . . . everything in their home village is finished. They do not choose to migrate. They are pushed. The loans have very high interest. A lot of cases. For example, in my village I see a lot of cases of people losing the land and then [migrating].' NGO social worker 2

This NGO social worker identifies that the systemic and coordinated organisation of micro-finance, land dispossession, and neoliberal development activities between the state and private sector incurs socioeconomic costs most heavily shouldered by society's least powerful.

Sam Rainsy's identification of state actors as an integral component of the mechanisms by which accumulation by dispossession is affected in Cambodia was reflected in caregivers' accounts. The impacts of the speculative and non-transparent nature of land sales jointly enforced by micro-finance institutions and sovereign government legislation have adverse effects on family stability and sustainability, as illustrated by the experience of this family from Siem Reap province:

'When the government enlarged the road, they cut our land - we lost the land. We did not get paid for it. So now we do not have much room - we all sleep in one room now. We had to remove our old house - otherwise the government said they will come and knock it down - [they said] we would have to pay their workers to knock it down.... some people who used to live here - they ran away - because they lost all their land and their small house. [Our family] lost over 300m sq. of land plus the house . . . it was a big house. My husband built that house before he passed away.' Caregiver 10

A government social worker from a different province reported the same dynamic, again highlighting the intersecting roles of kick-back-friendly construction and roadworks contracts and the challenges of small-scale farming in land dispossession. Drawing attention to the legal right of the Cambodian government authorities to compulsorily confiscate a set amount of land from private households and the increasing challenges rural families face in making a viable income from small-scale family farming, this government social worker said:

'Some families they have to sell their land - they have no choice - the other thing is the road development - and the price of the land increases - and the farming is so hard to make a success - so they sell the land.' Government social worker 3

The findings related to implementing the government's social protection and social assistance systems presented in Section 5.2.4 highlighted party-political and financial factors constraining the effectiveness of these programmes. Cambodians interviewed as part of Simon Springer's book *Violent Neoliberalism: Development, Discourse and Dispossession in Cambodia* (Springer, 2015) characterised Cambodia's contemporary state organisational structure as 'communist', a claim which, while perhaps surprising on the face of it, is echoed by other scholars who support the assertion by pointing to the Cambodian state's Maoist historical legacy and sprawling and opaque bureaucracy. Etcheson (2005), for example, suggests that although the ruling Cambodian People's Party (CPP) '*publicly abandoned socialism along with command-and-control economic policies [in 1989] . . . The party did not . . . abandon its internal Leninist structures and procedures, which it retains to this day*' (Etcheson, 2005:143). The embedded influence of the Cambodian People's Party in Cambodia's social, political and business structures shares some characteristics with the socioeconomic and political context in China, where the Chinese Communist Party (CCP) and its members constitute an effective 'shadow state', in which ostensibly independent entities (for example, the judiciary, the media, NGOs, religious organisations and business corporations) are monitored and steered by embedded party apparatchiks (McGregor, 2010).

'High-ranking government officials may have adopted a neoliberal configuration in Cambodia due to its latent potential to provide them not only with enrichment but also with the ability to control the monetary channels of privatisation and investment in such a way that only those connected to their systems of patronage stand to receive any direct benefit' (Springer, 2015:45).

Springer (2015) argues that in the Cambodian case, this form of governance is not 'Leninist' but can be viewed as a form of neoliberalism that ultimately rests upon the country's historically rooted and '*labyrinthine*' (Springer, 2015:57) systems of patronage (colloquially referred to in Khmer as *k'sai* - 'strings') that extend from the prime minister down to the lowest levels of governance in the village, and under which authoritarian state control, far from having been swept away by the rising tide of financial prosperity, market-based social relations and 'small government' typically associated with neoliberal ideology and discourse, has been strengthened and entrenched.

This study's literature review and empirical findings challenge the simplistic notion that 'uneducated poor people' are solely responsible for their financial indebtedness. Such a perspective overlooks the complexity and structural dimensions of over-indebtedness, suggesting that policy and programming focusing on individualised solutions, such as financial literacy and micro-enterprise training, might offer some benefits but are insufficient. These approaches do not adequately address the contextual and systemic nature of the situation, highlighting the need for a broader, more comprehensive strategy that considers the socioeconomic and institutional factors contributing to over-indebtedness. As the following description from an experienced social worker suggests, the reality of mass over-indebtedness, land loss and migration and its impacts on families is an embedded socioeconomic complex of financial and political interests and relationships - unlikely to be 'solved' or substantively addressed by programming targeted at the individual level.

'They have created a mist - it is the politics of the big companies - they invest a lot in Cambodia - for example, they register to build a big factory - somewhere - but the factory has to be in the province - the Government agrees and lets them go and start work in Kampong Chhnang [Province] - but - if they buy the land they need for the factory directly - one-by-one from the [individual land] owners - the price of the land will go up and be high - so they [set up] a micro-finance company that gives loans - and they work with the [local authority] commune chief - talking about this commune - 'How many families live over there?' 'Who owns that land there?' - and then it's just like - okay - he asks the commune chief to spread the word about [how] this [micro-finance company] gives good loans - and they only take small interest and it is easy and convenient and everyone should take advantage of this opportunity as it looks good - so everyone [will] come and take the loan - because there are not many conditions [to be eligible] - and then people have no plan to repay - so they cannot pay it back - and then there is an opportunity to take their land - this private agent - or company that gives the loan then takes the land and gives it to the [factory] company - the investment company - they cheat - this micro-finance company was created by the powerful investment group - it looks like a network.' NGO social worker 1

Cambodia today is a *de-facto* one-party state in which upholding human rights and opportunities for democratic participation are widely reported to have deteriorated since a government clampdown on dissent began in 2018 (Morgenbesser, 2019; Springman et al., 2022). Jamie Peck (2019) highlights the authoritarian potential of the neoliberal state by recognising that the common 'small state' understanding of neoliberalism risks overlooking that the front-of-house, deregulating 'roll back' of state functions can also involve a less obvious, but no less intensive *re-regulation* of the social, political and economic space

through the 'roll out' of new institutional and economic management systems, to the detriment of people experiencing poverty and the benefit of elites (Peck, 2019; Wacquant, 2012). In Cambodia, for example, consistent GDP growth has been accompanied by tightening restrictions on the free press, civil society, and opposition political parties. Despite day-to-day limitations on freedom of political expression in Cambodia, several participants in this study reflected diplomatically on their view that the government was failing in some of its roles and responsibilities to the Cambodian population as a whole.

As one NGO social work manager put it:

'[The root cause of family separation] is poverty, and maybe that the support from the government is not enough. If the system was better you could improve the situation . . . [but] I don't want to complain about the government!' NGO social worker 2

Another NGO social worker expressed similar sentiments:

'The government has to work together with the people . . . they need to work harder, to support the people.' NGO social worker 14

Several practitioners expressed their view that the failure to allocate proportionate policy attention or resources to pro-poor initiatives reflects a political communication strategy adopted to maintain the incumbent elites' position.

This NGO social work manager laughed as he observed:

'The government have already announced that poverty has been reduced - that is why the high-level policies and indicators do not focus on this. [The government] does not want to make a lot of [poverty-related] policies - as they have announced that [the problem of poverty] has already been solved!' NGO manager 6

This view was echoed by an NGO social worker in central Cambodia, who stated:

'[The government] has announced that Cambodia is reducing poverty and migration every year because the economy of Cambodia is getting better and we are reducing poverty - so that is why they do not want to put too much focus on poverty and migration - otherwise it looks bad - it would conflict with the government's own announcements.' NGO social worker 17

These observations suggest that, in the absence of free or fair elections, the maintenance of the ruling Cambodian People's Party's popular support rests less on a democratic mandate to govern and more on its economic performance legitimacy. Viewed in this way,

the need to consistently promote the ‘good news’ story of Cambodia’s increasing prosperity results in a reluctance on the part of the government to draw attention or respond to the persistence of widespread poverty in the Kingdom. In the context of child care policy and programming, this discursive attempt to disguise ongoing poverty and dispossession within the framework of neoliberal development is further supported by the individualising and responsabilising orientation of those child care policy and programming measures prioritised and driven by the government and its international development partners, such as violence against children, family reintegration and ‘positive parenting’.

Reflecting on his decades of experience in delivering social services in Cambodia, this NGO Director said:

‘Finally, I see that the problem is not about ‘families’ or ‘parents’ - it is about how effective our - the country, the government - I mean the structure - the whole structure of the country - is to support its citizens - to help people - to support families.’ NGO Manager 5

5.6. Chapter Summary and conclusions

This chapter has examined the social and economic factors driving family separation and the placement of children in orphanages in Cambodia, as highlighted by the social workers and caregivers who participated in this study. The findings reveal a significant disparity between policy representations and the lived experiences of these social workers and caregivers. Three main socio-economic drivers emerged as significant themes: poverty, migration and over-indebtedness, each reflecting the broader context of Cambodia’s neoliberal development approach. Participants’ accounts highlighted nuanced challenges at the family, implementation and national levels, revealing a complex landscape of precarious livelihoods, under-resourced public services and widespread poverty exacerbated by neoliberal policies and institutional corruption.

The persistence of poverty was identified as a fundamental driver behind the decision of low-income Cambodian families to place their children in residential care, with participants’ accounts underscoring a disconnect between economic growth narratives and the lived experience of many Cambodian families who remain stuck in exploitative labour conditions without access to adequate social safety nets or assistance. The importance of poverty’s role in family separation reveals the inadequacy of policy and programming responses that

fail to address underlying economic vulnerabilities and the need for strategies to improve family income and access to social protection.

Labour migration, widely recognised as a defining feature of contemporary Cambodian society (Diepart & Ngin, 2020), was also identified by participants in this study as a significant driver of family separation. This population movement, primarily driven by economic necessity, strains traditional family structures. For instance, there is an increased reliance on grandparents for childcare. These findings suggest the need for policies that support family cohesion and directly address the social challenges posed by mass labour migration.

Finally, over-indebtedness emerged as a significant concern, with microfinance institutions playing a pivotal role in the debt landscape. This study's findings challenge the simplistic narrative of irresponsible borrowing, highlighting instead the structural and systemic nature of over-indebtedness in Cambodia. The participants' accounts suggest the need for reevaluating individualised solutions and underscore the need for enhanced regulatory oversight and implementing fair lending practices to prevent exploitation.

The chapter concludes with a critical analysis of neoliberal governance in Cambodia, exploring the interplay between governmentality and dispossession. The accounts of caregivers, social workers and government staff indicated that the epidemic of dispossession that has swept Cambodia in recent years has negatively impacted family life in numerous ways and can be framed within a politically authoritarian and kleptocratic neoliberal context. The processes of neoliberalisation in Cambodia have been ongoing for over twenty years. However, attempts at securing social protection and inclusive prosperity have been underpowered, slow and incomplete at best, whilst democratic consolidation has arguably deteriorated. This really-existing developmental trajectory is at odds with the virtuous circle between international development assistance projects, neoliberal economic reform and democracy building. Participants' accounts of seemingly coordinated schemes to dispossess significant numbers of Cambodians of their land via unscrupulous micro-finance lending practices involving both the state and private sector highlight how extreme wealth inequalities can co-exist (indeed, be exacerbated by) high levels of economic development and growth. Extending this line of thought, some participants expressed that the government's promotion of Cambodia's economic success to bolster its performance legitimacy results in a state-level reluctance to publicly recognise or address

the persistence of high levels of extreme poverty and social dislocation at the policy and programming level.

The findings underscore the importance of household economic strengthening approaches, social protection systems and the empowerment of families at risk of separation as essential components of a strategy to prevent family separation and support the well-being of children and families. In the next chapter, I will develop my analysis by presenting and discussing the experiences and perceptions of social workers and caregivers regarding current interventions aimed at preventing family separation and reducing the number of children placed in residential care in Cambodia. Additionally, I will identify potential gaps in existing policy and programming.

Chapter 6. Findings and discussion: Caregivers and social workers reflect on priorities and gaps in policy and programming to prevent family separation and orphanage placement

6.1. Introduction

The previous chapter presented and discussed findings identifying structural social and economic factors participants reported as contributing to family separation and the placement of children in residential care. Drawing on Carol Bacchi's '*What's the problem represented to be?*' approach (Bacchi, 2009), in this chapter, I present and discuss findings that help address the third research question:

- To what extent do the problem representations at the policy and programming level reflect issues highlighted by social workers and caregivers?

The chapter begins by examining social workers' and caregivers' experiences of family preservation and deinstitutionalisation interventions prioritised and implemented at the policy and programming level. Following this, I present and analyse their identification of unmet needs and gaps in policies and programmes designed to prevent family separation.

The frame below provides an overview of the major themes that emerged and are presented in this chapter.

Table 8. Summary of the themes presented and discussed in this chapter

Policy and programming priorities	Policy and programming gaps
• Deinstitutionalisation. • Violence against children. • Access to education.	• Discrimination against Vietnamese Cambodians.¹⁰² • Substance misuse services. • Childcare services. • Individual care planning.

¹⁰² The Kinh are the majority ethnic group in Vietnam. While the use of the designations 'Vietnamese' and 'Ethnic Vietnamese' is common in the literature on ethnically Vietnamese people living in Cambodia (Eherentaut, 2014; Rumsby, 2019)). I have used the term 'Vietnamese Cambodians' in this study, as it

highlights both a distinct ethnicity and a longstanding, intergenerational presence in Cambodia.

6.2. Policy and programming priorities

This section focuses on participants' accounts of their experiences with the policy and programming 'solutions' to the 'problem' of 'too many children placed in residential institutions', which was identified in the policy document analysis presented in Chapter 4. That analysis found measures related to deinstitutionalisation, violence against children, and access to education to be most prominent in the policy and programming documents. Social workers' and caregivers' experiences and reflections on their lived experience of these three areas of intervention are presented and discussed below.

6.2.1. Child care deinstitutionalisation

Cambodia's position as a high-profile location for the global childcare reform movement is underscored by the support and direct involvement of international actors, including UNICEF, USAID, and the EU. The country's child care deinstitutionalisation campaign was galvanised by the government's *Action Plan for Improving Child Care* (MoSVY, 2016). This plan's objective, to reduce the number of children living in residential care by 30%, was surpassed with a reduction from 16,579 children in 2015 to 5,440 in 2021 (MoSVY, 2020). The findings of this study indicate that social workers who played a key role in this orphanage closure and family reintegration process generally supported the campaign's aims. However, concerns were raised by government and NGO social workers about the rapid pace of deinstitutionalisation, with some practitioners questioning the safety and quality of reintegrating such a large number of children into vulnerable families over a short period. Coupled with accounts from parents and grandparents who had had children reintegrated into their care, highlighting ongoing challenges in meeting basic needs, these concerns signal risks in Cambodia's implementation of deinstitutionalisation, which are explored at the end of this section.

6.2.1.1. Social workers criticise the 'business model' of children's residential care in Cambodia

In alignment with government policy aims, government and NGO social workers who participated in this study recognised that Cambodia's 'over-supply' of orphanages was partly due to their potential to be operated and run as lucrative businesses rather than as social services that appropriately met children and families' real needs.

As this NGO social worker said:

“Most orphanages are [businesses] - they get a lot of funding; they get a lot of [profit] . . . from the kids.” NGO social worker 3

This social worker went on to explain how the financial *modus operandi* of such organisations contributed to high levels of family separation by disincentivising programming that supported children to remain living with their families:

‘All [of these organisations] want the kids to be actually living in their orphanage because then they can get a lot of funding - and [the orphanage directors] use the excuse that they can put [the children] through school - but it is just to look good - why don’t they want the kids to live with their family and then [the NGO] could support school [attendance] anyway? [The reason is] because they would not be able to get the money! The kids [presence] makes the money for these NGOs and orphanage businesses, [supporting] the family does not [make them any money].’
NGO social worker 3

This account highlights that for an orphanage to make money, children need to be separated from their families and living at the orphanage. This is to attract foreign donors, tourists, and short-term volunteers, most of whom will be more willing to make financial donations or pay for their volunteering experience if they can ‘see’ the service being provided and interact with the ‘orphans’ (Carpenter, 2021; Miller & Beazley, 2022). This account also underscores the frequently expressed view among practitioners that the widely held belief among parents and caregivers that residential care placement can provide their children with educational advantages superior to those available in the local public school in their home community is mistaken. The relationship between orphanages and education in Cambodia is complex and is explored further in Section 6.2.3.

Concerns about the financial profiteering associated with orphanages in Cambodia were raised by practitioners and not by any of the caregivers interviewed. None of the participating caregivers were critical of the care their children had received in orphanages. They characterised the orphanage centres their children had been placed in as beneficial service providers, primarily in meeting their children’s basic needs and ensuring access to education.

As this mother from Phnom Penh said:

‘The treatment of the children by [the orphanage staff] was very good. . . Life has been tough. Having the children in an orphanage was a big help. I was so grateful to the guy for putting the children in [the orphanage] for three years.’ Caregiver 1

6.2.1.2. Social workers recognise a diversity of factors contributing to the reduction in the number of residential children's institutions and identify the impact of target-driven policy

Social workers from government agencies and NGOs recognised the government's efforts to strengthen regulation and oversight of residential care institutions, a policy they believed had played a key role in reducing the number of orphanages. Specifically, they highlighted several new government measures: the introduction of enhanced registration procedures for existing residential children's institutions, a moratorium on the opening of any new ones, the establishment of minimum standards for all institutions, and the conducting of government inspections to ensure these standards are met as a prerequisite for NGOs offering residential children's care to continue operations.¹⁰³

For example, this NGO social worker said:

'Many of the orphanages were closing anyway, even before Covid . . . [because] when the government came and checked and audited them; they saw that they did not meet standards and were exploiting children, so MoSVY closed them [down].'
NGO social worker 16

Recognition of the government's efforts was tempered by concerns about corruption influencing the orphanage closure campaign. An NGO manager pointed to vested interests and patron-client relationships in the selection process for closing residential centres. This insight highlights the complex political economy surrounding children's residential care in Cambodia, where social and commercial relations and practices can significantly shape the implementation of policies, impacting their overall effectiveness (Guiney & Mostafanezhad, 2016).

'So, the Government have a target of 30% reduction [of children in residential care] - so they say to the field staff - 'You have to do it! You have to try to do!'. But some of the high-level politicians have [vested interests] in [particular] orphanages - there may be some financial benefit from the orphanage, right? . . . so the social workers say, 'We are going to close this orphanage and reintegrate the children!', [but] the owner of the orphanage comes to talk with the [politician] and says 'Ah, don't close my orphanage' and then, we - the field staff in the middle - we try to push and reintegrate the children - but we are struggling - we don't know that the orphanage and the politician are talking together behind the scenes.' NGO manager 2

¹⁰³ These new government functions were set out in the *Minimum Standards on Alternative Care for Children* (MoSVY, 2006a), and operationalized in the *Sub-decree on the Management of Residential Care Center* (MoSVY, 2015), although implementation did not begin until 2017.

Corruption, described as ‘*Cambodia’s Curse*’ (Brinkley, 2009; 2012), is widely recognised by local people, academics, and government officials as permeating many aspects of Cambodian life (Feinberg, 2009; Springer, 2011; Un, 2006). As the data generated for this study confirms, corruption is a part of daily life for many Cambodians, with the financial burden weighing heavily on those with the fewest connections and least ability to pay. While it is beyond the scope of this study to elaborate on the geo-political role of corruption and its discursive deployment against non-Western countries, I would note that any discussion of corruption needs to be considered historically and from a placed-based perspective (Ivanov, 2007; Torsello, 2011). As Harrison (2007) explains, there is a need to question

‘taken for granted’ assumptions about what corruption is and how it operates. This means generating understandings of how meanings of corruption vary, and how this variation is determined by the social characteristics and political position of those engaged in corruption talk.

Thematic analysis of practitioners' narratives revealed that factors beyond the formal deinstitutionalisation activities of government, NGOs, and donor agencies were felt to have played a role in the reduction in the number of children living in residential care. For instance, an NGO social worker from the tourist centre of Siem Reap connected this trend to a drop in Western tourists and volunteers visiting residential children’s centres. He attributed this shift to the influence of international media campaigns increasing public awareness about the negative impacts of fraudulent and exploitative orphanages in Cambodia.

“Some orphanage owners were also involved in tourism . . . and would [recruit children] from rural villages to live at the orphanage that were not orphans. But more and more tourists started to become aware of the problems with orphanage care - so revenue and visits [to the orphanages] decreased.” NGO social worker 15

Given the expressed view of social work participants that many Cambodian orphanages are primarily operated as for-profit businesses, often targeting tourists and short-term volunteers, it is unsurprising that the effects of the COVID-19 pandemic on international travel and tourism were reported by participants to have significantly impacted their financial viability. The NGO social worker below identified a dynamic in which, as the number of residential children’s centres decreased, those remaining operational adopted more selective approaches to which children were allowed to stay.

'There are a lot of children being sent out of the [orphanages] now - and the centres have made the rules more restrictive - they throw the children out more now if they break the rules - also the [orphanages] are running out of funding so they have to reintegrate, reintegrate - they have no funding so they just send the kids back to their families.' NGO social worker 14

This NGO social worker in central Cambodia said:

"Funding decreased, so [many orphanages] had to close. Mostly, these orphanages were registered but did not have [formal/institutional funding] - they just collected money from visitors and tourists - so when these sources declined [due to the pandemic], they had to close." – NGO social worker 3

The role of the pandemic and its knock-on effects on tourism as a driver of high levels of orphanage closure and the rapid return of thousands of children to live with their families was further highlighted by the accounts of some parents whose children had recently been returned to live with them. This mother in Phnom Penh said:

'I sent the boy to the orphanage when he was five years old, and he stayed there for about four or five years – but [in late 2020] the orphanage ran out of money, so they sent him home to me.' Caregiver 4

This caregiver went on to say that she would have preferred her son to remain at the orphanage, and several other parents and social workers interviewed expressed similar views: that the decline in the availability of residential care places had resulted in a more-or-less 'forced' return of some children to their birth families against their wishes. Some parents whose children had been returned to live with them reported that they were actively seeking an alternative residential placement for their children, as they felt unable to cope or provide an adequate standard of care at home. However, the significant decrease in the number of children's residential centres due to the implementation of child care deinstitutionalisation policies, enhanced admissions procedures and financial unviability within the sector had made finding a placement more difficult than it used to be.

Participating parents consistently reported positive experiences with placing their children in residential children's institutions (RCIs), highlighting benefits such as the assurance that their children's basic needs for food, safety, and education were being met. However, a tension emerged in their accounts: while the parents generally viewed residential care favourably, they noted that their children expressed less enthusiasm about these arrangements

6.2.1.3. Tensions between caregivers and children's attitudes to residential care

Most parents and caregivers interviewed for this study described placing their children in an orphanage as an emotionally fraught yet practically beneficial experience. When recalling her children's time staying in residential care, one mother emphasised that she maintained contact with them and that her children received education and other opportunities that they would have been unable to access if living at home.

'I would visit my children at the orphanage once per month. [The orphanage] encouraged this. The treatment of the children by [the orphanage staff] was very good – there was sport and dancing and extra classes.' Caregiver 1

Another mother also highlighted access to education as a benefit of the placement:

'At first I was worried that the NGO would take the children from me forever - but later I saw that they took care of the children very well - so I thought - 'Well, it's good to keep them here - they get a good education.' Caregiver 7

However, caregivers' accounts indicated that this positive view of residential care often conflicted with their children's wishes and feelings concerning where they would like to live. While interviewing children about their experiences both of living in residential care and of being reintegrated into their birth family was outside the scope of this study,¹⁰⁴ the accounts of some of the parents suggested that many children placed in residential children's institutions missed their families and that the decision to leave the orphanage and return to live with their parents was often instigated by, and advocated for by the children themselves. Although the small sample size in this study limits the ability to draw broad conclusions, the frequently reported phenomenon of children initiating and negotiating their own return to their families is notably absent from the literature on deinstitutionalisation and family reintegration. This gap suggests a potentially interesting area for further research.

As this mother in Northern Cambodia said:

'I wanted to keep them there - I would have preferred to keep them at the orphanage for their education - but the thing is they wanted to come home - I warned them - it's not an easy life [at home] – but they did not want to stay [at

¹⁰⁴ For further discussion see Section 3.5.1.

the orphanage], and they said 'I would rather work and stay with my family' - so - I cannot stop them - I cannot push them back to the orphanage.' Caregiver 6

A mother in Phnom Penh also highlighted her children's unhappiness at being separated from her:

*'I would visit the girls almost every day. Yes, I had to try and persuade them to stay [at the orphanage]. The children were crying and wanted to come back home with me. And I had to tell them: 'I am so sorry. I cannot take care of you'. I had to keep working.'*¹⁰⁵ Caregiver 2

A street-living mother, one of two participants whose children were still living in residential care at the time they were interviewed, said:

'They want to come back to me. I miss them - but I have no choice – it was the only choice.' Caregiver 4

These accounts give a sense of the emotional pain suffered by parents and other family caregivers, who feel that their inability to meet their children's needs due to poverty and life circumstances left them no option other than to place them in residential care. Several parents spoke of gaining a place at an orphanage as 'lucky,' offering their children a chance to maintain their education and have life opportunities that the parents felt unable to provide themselves.

6.2.1.4. Risks in the implementation of deinstitutionalisation in Cambodia

Although recent Cambodian social policy has prioritised deinstitutionalisation in line with global child care policy models, child rights, and the *UN Guidelines on the Alternative Care of Children* (UNGAC, 2010), implementing deinstitutionalisation in resource-poor environments presents significant challenges. These include inadequate infrastructure, fragmented service delivery, the ingrained social, political, and financial roles of children's residential care, and limited social workforce capacity.

Despite overseeing and facilitating the return of hundreds of children to their birth families, a senior Cambodian NGO social worker raised concerns about the quality of the implementation of Cambodia's child care deinstitutionalisation and family reintegration campaign.

¹⁰⁵ These girls ultimately returned to live with their mother, with the orphanage providing school support.

'[The 30% reduction-of-children-living-in-residential-care programme] is not really successful . . . because first of all the local authorities and DoSVY¹⁰⁶ they do not really understand reintegration policy and they do not have the skill - so they just take the kids home - and forget about them.' NGO social worker 15

In common with other NGO participants, this social worker drew attention to the lack of capacity of government staff at the sub-national level to guarantee the safe and sustainable return of children living in residential care to their families and the failure of state sub-national social affairs departments to be familiar with or adhere to procedures such as conducting pre-reintegration family assessments, addressing a family's assessed needs or conducting follow up visits to monitor and support the child's return to family-based care. Many Cambodian provinces¹⁰⁷ have only one government social worker to cover the whole province, and underfunding of government social work services can make the costs of follow-up home visits prohibitive.

Highlighting a lack of household economic strengthening, school and health support, as well as the fact that many children placed in residential care originate from rural areas, he continued:

'You send the children back home – but [then] the children are far from school, far from the health centre - they are still poor and in bad condition - they are very remote, very far away.' NGO social worker 15

Questioning the safety and sustainability of the large number of family reintegrations conducted in recent years, an NGO social worker reported that in her experience, many of the children had been hastily sent home from orphanages and continued to live in poverty after being returned to their families. In addition, she also expressed the view that social work follow-up is limited, and access to basic services such as school and health care remains constrained.

'[The social workers] do not [assess] enough, they just visit the kids a few times and then [make] a decision - 'They are ready to be sent home' - but then the [family] problems will happen again . . . so, you [should] work with the parents before you reintegrate children home . . . it comes down to family support, [but the donors are not] interested [to fund this type of work].' NGO social worker 4

¹⁰⁶ District Office of Social Affairs, Veterans and Youth Rehabilitation (Sub-national government social services).

¹⁰⁷ Roughly comparable to a county in the UK and United States, a Local Government Area in Australia or a

Department in France.

In the context of Cambodia's quantitatively successful effort to reduce the number of orphanages and children living in them, lack of funding or numbers of social work staff within both the state and NGO sectors was highlighted by some social work participants as resulting in inadequate initial assessments of families receiving their children back from residential care and difficulties in following up to ensure that the child was safe and well. One NGO social worker from a family reintegration team in central Cambodia (NGO social worker 15) reported that 840 children had been reintegrated from residential care to their birth families in his province during the previous 12 months. There were only eight members of staff (four poorly resourced government social workers and four better-resourced NGO social workers) to oversee and conduct this work.

Designing and measuring deinstitutionalisation programme outputs in terms of deadlines and numbers shifts the focus from facilitating safe and appropriate family reintegration and providing preventative child, family and community services to meeting quantitative deinstitutionalisation-orientated targets within the required timeframes. This target-led and administrative focus can result in an emphasis on bureaucratic processes rather than the standard of social work needed to ensure children's safe and sustainable return to their families. The selection of, and attention to, *output* indicators rather than *outcomes* is also a method by which international agencies, local NGOs, and governments can, to some extent, use targets to game the system and report apparent 'success' to donors and the international community (Bevan & Hood, 2006).

In 2020, the Ministry of Social Affairs, UNICEF, and USAID published their *'Report on Results of Implementing the Action Plan for Improving Child Care with the Target of Safely Returning 30% of Children in Residential Care to their Families'* (MoSVY, 2020). This evaluation reported that between 2015 and 2020, the number of residential children's institutions in Cambodia was reduced from 406 to 232. During the same period, the number of children living in residential care declined from 16,579 to 6,579, representing 9,801 children leaving orphanages and returning to family-based care. However, the government's data also reveals that only 1,419 of these children were formally 'supported for reintegration,' suggesting that 8,382 children were returned home outside of the government's and partner NGO's purview. Most of these 'reintegrations' are likely to have occurred without family assessment, support, or social work follow-up. Even allowing for some inaccuracies

in the data, these figures are cause for alarm and flag the urgent need for a slowing down of Cambodia's child care deinstitutionalisation campaign and an

evaluation of the outcomes and well-being of the thousands of children who have returned home in recent years.

6.2.1.5. Summary

Government and NGO practitioners provided insights into the ‘business model’ of orphanages, highlighting that this can undermine approaches seeking to keep families together and contribute to high levels of family separation. Social workers also acknowledged that measures such as enhanced registration and the establishment of minimum standards had contributed positively to better regulation of the sector. However, concerns about the influence of vested interests on the implementation of deinstitutionalisation policies moderated this acknowledgement. Caregivers and social workers' narratives also identified external factors contributing to the closure of residential children's institutions in Cambodia, such as the impacts of media campaigns challenging the value of international volunteering in orphanages of the global south, and decreased funding due to lower tourist and volunteer visits, exacerbated by the COVID-19 pandemic.

Drawing on the experiences of other countries where social support programmes for families and communities are under-resourced, deinstitutionalisation policies have been shown to pose risks to children when hastily implemented (Frimpong-Manso, 2014; Ismayilova et al., 2014; Huseynli, 2018). The analysis of the government's data (MoSVY, 2020) and the accounts from both parents and social workers presented and discussed in this section support Fronek et al.'s (2019) view that, *‘in practice, these [deinstitutionalisation] policies have led to mixed outcomes in Cambodia due to limited workforce capacity and the lack of a unified approach to reunification and family strengthening in a rush to meet . . . targets’* (Fronek et al., 2019:142).

6.2.2. Violence Against Children

Interventions to address violence against children (VAC) received the highest level of attention among the policy and programming documents reviewed, with proposed methods for addressing the issue focussing on the delivery of positive parenting programmes and strengthening national child protection systems. However, despite evidence suggesting that 50% of 13-17-year-olds in Cambodia reported physical violence

at home, and 60% reported witnessing violence in their homes, schools and communities (CDHS, 2022), violence against children is not identified as a significant factor in family

separation and orphanage placement in Cambodia in the academic or grey literature, and only one participant in this study (Government social worker 1) reported physical or sexual abuse as a reason for residential care placement when discussing cases they were aware of. Accounts generated for this study instead highlighted issues related to practitioners' contested views regarding child protection responses in the Cambodian context and the role of parenting programmes in reducing violence against children and residential care placement.

6.2.2.1. Social workers' contested views on child protection response in the Cambodian context

The following exchange between an Australian social work consultant (S) and a (European) NGO Director (K) is taken from a focus group discussion conducted as part of this research. It indicates tensions between typically Western ideas and approaches to child protection and those more prevalent in Cambodia.

'S: There is a tension here in Cambodia between 'preventing violence against children' and 'preventing family separation' - they actually work against each other and cancel each other out - so when you have cases of child abuse [in Cambodia] and you speak to the [Cambodian] social workers and ask them 'Well, what are you going to do?' - they will say - 'Well . . . I am going to speak to the parents - and I will say to them when a child has been abused - 'No, what are you going to do right now?'

K: That is a Western concept, and I would be very careful entering this . . . because it is our perceptions of the violence and what it represents - and when we say a [family] situation is to the detriment of the child - an important question is: 'What is worse? Getting them out of the family or getting support to the family?'

S: But, the protection of the child needs to be managed.

K: OK - yes - but not [necessarily] by separation - it is not either 'separation' or 'suffer violence' - it's not - I would be very cautious about how you represent it - very cautious.' NGO focus group discussion 1

Over a decade of professional social work experience in Cambodia, I have regularly supported local staff in child protection cases. In my experience, incidents of violence against children (for example, physical abuse or exposure to domestic violence), which in the UK would trigger child removal or legal action, are addressed through a somewhat different approach. Typically, allegations of abuse initially prompt a visit from the government local authority or village social worker, who assesses the situation through

discussion with the parents and neighbours and, in many cases, advises the family to cease the abusive behaviour. Should concerns persist, the matter is escalated to the local

Commune or Village Chief, who, in addition to reprimanding the parents, also requires them to sign a contract agreeing not to repeat the behaviour. Any further recurrence or reports of alleged abuse prompts the local authority to seek NGO support and possibly file a police complaint to facilitate the child's removal.

As this government social worker said:

'If it is not big violence, you know just like [parental] arguments, then its fine, I will just go and tell them to stop it, but if it is too much - a high-level of violence then . . . I have to ask the Commune Chief or the police to help.' Government social worker 1

From a Western perspective and through the Westernised child protection lens of international donors and NGOs, this approach may appear overly lenient, granting excessive discretion to local officials, susceptible to personal bias, and exposing children to unacceptable levels of risk. Jordanwood (2016) identified that Cambodian government social workers preferred reconciliation approaches over prosecution in cases of domestic abuse and violence against children. While reconciliation allows families to stay together, it also puts women and children at risk of future abuse. However, this procedure represents an indigenous form of social work in the Cambodian context, reflecting the country's hierarchical and patrimonial social and political structures. Cambodia is effectively a one-party state in which government and local authority actors wield significant influence, and their party-political affiliations invest them with a level of respect, if not fear, from the community. Beyond the wealthier enclaves of the capital, community life largely preserves its traditional character. The architectural design of housing and layout of communes and villages is characteristically open, as are daily life activities such as washing and cooking, which, in contrast to Western norms, results in a lower expectation of privacy. This spatial openness fosters an environment where family dynamics are more visible and accessible to neighbours and local authority actors, thus making the private lives of individuals and families relatively transparent within the community. This characteristic of Cambodian communities underscores the interplay between physical space and social relationships, offering insights into how communal ties and social surveillance can function as an adjunct to child protection systems in a less enclosed or privatised environment.

While there is an ongoing tension between diverse understandings and meanings of violence and abuse across cultures, and dangers of cultural superiority underpinning the

international instruments and identification of harms to children.¹⁰⁸ In the context of this study, the indigenous approach to child protection described above, which relies on admonishment by government-affiliated authority figures and contractual agreements as preventative measures, prompts an interesting question. Namely, to what extent does this approach prevent or reduce violence against children while maintaining family unity? To my knowledge, there has been no research exploring the efficacy or outcomes of the approach to family intervention described above, representing a gap in our understanding of really-existing social work practice in Cambodia.

This is not to say that no Cambodian children are ever removed from their families due to physical or sexual abuse. They are. As this NGO social worker said:

‘I would remove a child from a family if they badly beat a child or sexually abused a child . . . If it is urgent, you need to take them out. And we need to make plans of where the child would go and what should we do with the family. But the plan would always be to improve the family situation and return the child.’ NGO social worker 4

Several government and NGO social workers commented that they thought the current emphasis on strengthening the child protection system in Cambodia was a policy and programming focus that represented the agenda and preferences of the country’s international aid donors rather than the Cambodian government itself.

For example, this NGO social worker said:

‘The government and the big NGOs now - they see only ‘abuse’ - they are interested only in this part - but they miss something – the main problem is poverty.’ NGO social worker 5

The NGO social worker cited below made clear her view that much of the social work policy agenda and implementation in Cambodia was globalised, top-down, and donor-led, with programming developed and delivered to allow local NGOs to access available international funds allocated according to the strategies and agendas of international agencies and donors.

¹⁰⁸ Arguments about cultural sensitivity have focused on both the negative effects of international agencies implementing their own agendas (Kanj, 1990) and on the dangers associated with unquestioning respect for ‘other’ cultures that can result in the acceptance of practices that are intrinsically harmful to children (Ncube,

1998).

As this NGO social worker summarised:

'[Violence against children and parenting programs] are the focus of the United Nations. The United Nations gives a lot of money to Cambodia - so we follow that.'
NGO social worker 1

Echoing the programming-formation dynamic identified by Khieng and Dahles (2015), some NGO Directors in this study acknowledged that their programming and services are sometimes influenced more by transnational funding agendas than by genuine community engagement. Consequently, the perceived risks and needs prioritized by the community and local social work staff often do not align with the priorities set by overseas funding agencies.

The policy and programming document analysis conducted as part of this study identified positive parenting programmes as a prioritised activity for reducing both violence against children and the number of children placed in residential care. Due to the current popularity of parenting programme approaches at the donor level, international aid agency funding for local NGOs to implement such programmes is relatively easy to obtain. At the time of the data collection for this study, five out of the six participating NGOs were implementing such programmes.

6.2.2.2. Social workers question the effectiveness of parenting programmes in preventing family separation

Positive parenting programs aim to enhance parent-child relationships, improve parenting skills, and foster positive parent-child interactions (Bunting, 2004). In the Cambodian context, the policy document analysis found parenting programmes being advanced as a method for reducing both violence against children and orphanage placement. For example, the *Action Plan* (MoSVY, 2016) calls on state and NGO actors to:

'Implement a national behaviour change campaign to prevent and respond to violence against children and unnecessary family separation.' (MoSVY, 2016:6)

Despite being directly involved in delivering parenting programs, several NGO social workers expressed views on the limitations and relevance of these classes for the parents and caregivers they work with.¹⁰⁹ This NGO social worker, for example, said:

¹⁰⁹ None of the parents or caregivers participating in this study reported having attended parenting programmes.

‘Practical problems are the root of families’ troubles. Parenting programmes . . . focus more on the parents’ behaviour - not so much [addressing] practical problems, but more about parent’s attitudes and behaviour - but it is the practical problems that are important, we should be working on that - parenting programmes, they look good, but . . .’ NGO social worker 4

This social worker’s comment about parenting programmes ‘looking good’ was echoed by other NGO practitioners who attributed the promotion of this model in Cambodia to its low cost and relative ease of implementation compared to direct work with families. Highlighting the ability of parenting programmes to generate impressive output results for NGOs and donors, this NGO manager said:

‘For [the attitude change activities], it is easy. You just put up a loudspeaker in the village and you can report – thousands of [people trained]’ - you have a big number – the donors are happy - easy!’ NGO manager 7

6.2.2.3. Summary

The findings related to violence against children revealed a discrepancy between policy focus and ground realities. While the policy analysis found a high level of consideration for addressing violence against children as a method for preventing family separation through parenting programmes and strengthened child protection responses,¹¹⁰ practitioners’ accounts revealed a tension between Western and Cambodian approaches to child protection, highlighting cultural divergences. The emphasis on positive parenting programmes as a means to reduce both violence against children and orphanage placement was critically questioned by some social workers, who expressed scepticism about the relevance and effectiveness of these programmes, pointing out that the root causes of family challenges often lie in structural and practical problems, such as precarious employment, labour migration and poverty, rather than in parenting styles and behaviours.

The policy document analysis presented in Chapter 4 identified ‘Access to education’ as the third most considered area of policy and programming intervention to prevent family separation and residential care placements. Participants’ accounts reflected this policy-level identification of this factor as a significant driver of orphanage placement.

¹¹⁰ See Section 4.2.1.

6.2.3. Education and children's residential care in Cambodia

Access to education was cited as a reason for placing children in residential care in almost every interview conducted for this research. This finding supports the foregrounding of education-related issues as a driver of children's residential care placement in the policy and programming documents. In this section, I present and discuss three major themes that emerged from participants' narratives. I then explore the implications of these findings for understanding the role of residential care in Cambodia's educational system, offering insights that could inform future research and the development of strategic policy directions.

Participants' accounts of the role of residential care in relation to education in Cambodia present a complex interplay of diverse factors, making broad statements liable to oversimplify the situation. One aspect of this complexity is that the proliferation of orphanages in Cambodia has resulted in a residential care landscape characterised by diverse local and foreign providers, representing a range of characteristics, operational models, and underlying philosophies. While social workers' accounts, deinstitutionalisation discourse, and media coverage highlighted the adverse effects of 'orphanage tourism', where short-term volunteers from abroad pay to teach and interact with children in residential settings, many other types of residential children's institutions exist. Whereas Cambodia's twenty-one state-run residential children's institutions suffer from limited resources, overcrowding, and under-staffing challenges (Phnom Penh Post, 2020), South Korean or Western Christian organisations often operate well-resourced residential centres with a mission combining religious values with good-quality academic education. Competition for admission to this latter type of institution can be intense. Research has found instances of parents paying money and local authority staff faking their own deaths to obtain a place for their children in these 'orphanages' (MoSVY, 2011). In Cambodia, it is not uncommon to meet prominent figures, successful career individuals, or, more simply, colleagues and friends who have had the chance to pursue good quality education thanks to the institutions they were placed in as a child.

In a context of under-resourced and often inadequate health and social care provision, small, independent NGOs play a crucial role in providing residential and respite care for children with specific needs and their families, such as those with disabilities, HIV, or sensory impairments (blindness or deafness). These organisations offer tailored education

and additional services, including respite care and rehabilitation, thereby addressing gaps left by the limited capabilities of the public sector.

6.2.3.1. Poverty and the appeal of residential care to access education

Parents and social workers who participated in this study usually discussed barriers to education in connection with poverty. In principle, public education in Cambodia is free. In practice, teachers' salaries are low, so many take 'informal school fees' from parents to supplement their salaries (Dawson, 2009; Hammond, 2018). In addition, parents must pay for uniforms and school materials, and in rural areas, they may also have to provide bicycles as secondary schools are often far from the family home. Highlighting the intersection of poverty and access to education, many of the caregivers who participated in this study said they placed their children in residential care because they could not afford to send them to school themselves. As this mother makes clear:

'I sent [my son] to the [orphanage] because I was very poor, and I was worried that he would not get an education . . . the problem was I did not have money to pay for school.' Caregiver 10

In discussing the circumstances that led to her deciding to place her children in residential care, the mother below explained how, as the cost of a variety of unofficial school fees¹¹ increased as the children got older, maintaining them in school became progressively more difficult in a context where there was not enough money for the family to meet their basic needs.

'I still did not have enough food to eat or money for the children's education. Because as they get older and study more and more it costs more and more.' Caregiver 2

In such circumstances, parents described how, on reflection, they considered it in the best interests of their children to stay at an orphanage if such a placement guaranteed their basic needs would be met and they could continue to pursue their studies.

Analysis of Cambodian data revealed that low or no education is a common characteristic of the two largest clusters of poor households (OECD, 2018). Parents' education-focused aspirations reflect these findings, highlighting the importance of education for their

¹¹¹ For example, payments to access school, non-voluntary private tuition from public school teachers and having to buy books and stationary at inflated prices from school teachers (Hammond, 2018).

children's future employment and life prospects. As one mother expressed, employing the frequently used metaphor of the 'dream'¹¹² of a better future for her children:

'The main reason [for residential care placement] is to send my children to school, and my dream is to help them to have a good education and get a good job.'
Caregiver 2

6.2.3.2. Perceived improvements in public education

The Cambodian government has prioritised Improving the education system over the past ten years, and government data reports significant improvements in school enrolment rates (MoEYS, 2022). In Chapter 4, the analysis of policy and programming documents to prevent family separation revealed a focus on education. Specifically, the analysis found that family-level interventions—such as school attendance grants, the provision of uniforms or bicycles, and school enrolment campaigns—were one of only three commonly identified family separation risk factors that received detailed consideration in more than one of the ten reviewed documents.

Social workers in this study acknowledged that the Cambodian school system has improved in recent years. For example:

'Education and schools seem to have got better. Ten years ago, some teachers were not keen to teach' NGO social worker 15

However, as in the example below, this acknowledgement was often qualified.

'School attendance. . . is better now, but in some areas, it is still quite difficult to get [children] to school because of the distance' NGO social worker 11

State and NGO-implemented school enrolment campaigns that provide uniforms and bicycles and help parents and caregivers complete school enrolment paperwork are a high-profile annual occurrence in Cambodia. However, while NGO social workers said that such activities provide good photo opportunities and impressive school reintegration figures at the start of the school year, government data suggests that the more challenging task of *maintaining* children from poorer families in school still needs improvement. The school

¹¹² In Khmer, '*So-pen*'.

completion rates for 2019 were 81%, 49%, and 26% in primary, lower secondary, and upper secondary school, respectively (UNICEF Cambodia, 2023:10).

Accounts from both parents and social workers reflected this official data, with participants reporting that Cambodia's high secondary school drop-out rates reflect the direct and indirect costs (for example, unofficial school fees and opportunity costs such as foregone labour income (Tan, 2020) of maintaining older children in school.

“Many children finish only grade 6 or grade 7 (age 11-13), and then they stop because of the money. Some families need the children to go and earn some money and some families think: ‘OK - I think they have studied enough – [now] you should help me find money to pay for food, pay for what we spend every day.’ NGO social worker 10

Highlighting perceived poor educational quality in state schools, extra fees, and childcare issues, this mother from Phnom Penh said:

‘The public school is not so good - but we still have to pay money [to the teachers] . . . but the education is not so good. The school is only open three days per week, and only in the mornings.’ Caregiver 3

After describing some of the shortcomings of the local public school, this Phnom Penh mother, whose two children had been returned to live with her from an orphanage when they reached Grade 4 (9 years old), expressed concerns about the possible impact of family reintegration on their education:

Me: ‘Would you have liked the children to stay at the orphanage longer?’

Mother: Of course. I have nothing to provide them anyway. They could have got a better education if they had stayed at the orphanage.’ Caregiver 3

Another mother expressed a similar attitude towards residential care placement:

‘It is better to keep them [in the orphanage]. Because they get an education. It is not that I don’t want to take care of them. But it is better for them there . . . I want them to have a better future. I do not care about myself. If I have enough to live [myself] it is enough.’ Caregiver 4

While all of the parents expressed sadness at being separated from their children, none of them complained about the standard of care or services their children had received while living at an orphanage. On the contrary, a striking feature of the accounts was the strength

of their conviction that orphanage placement can improve children's education and life chances.

6.2.3.3. Tensions between NGO social workers' and parents' perceptions of the educational benefits of children's residential care placement

Many parents and caregivers described education as the only available path to a better life for their children, and a lack of education was described as creating an inter-generational cycle of poverty. They viewed the education and support offered by residential centres as a way to break out of this trap, and several government social workers agreed with this conviction. Conversely, NGO social workers were univocal in their view that the belief among caregivers and sub-national government staff that residential children's institutions can provide a better education than children would receive if they were supported to remain at home and attend their local public school was mistaken.

As this NGO social worker said:

'Social worker: [These parents] . . . send their children to the centre because they think that at the centre their children will get [a better education]. That is what they think.

Me: Are they right to think that?

Social worker: No. They are not right. NGO social worker 17

Another NGO social worker explained how disabusing parents of the 'myth' that orphanages can provide a better education is a regular part of her practice when working to dissuade them from placing their children in residential care:

'[I try] to explain to parents who are very optimistic about the orphanage - 'It is not what you think - you should try to keep your children [at home]' - and we explain the reasons why and . . . [that] many of the children who are sent to an orphanage simply attend the public school closest to the orphanage anyway.' NGO social worker 16

This tension is perhaps partly explained by the fact that many of the NGO social workers in this study's sample worked in teams dedicated to reintegrating children and, as such, had been on the front line of Cambodia's child care deinstitutionalisation and family

reintegration campaign.¹¹³ The deinstitutionalisation-informed discourse, policies, training materials, and implementation plans these social workers had been exposed to frequently cite as a ‘myth’ prevailing ‘positive community attitudes’ regarding the potential educational advantages of placing a child in residential care. For example:

‘In order to combat the myth that children receive a better education in RCIs, we encourage the design of awareness-raising campaigns among the general population that highlight the importance of families remaining together and the harmful effects of RCIs . . . This should be linked to ongoing behavioural change strategy work.’ Capacity Development Plan (MoSVY, 2018: 42)

In countries where the public school system fails to reach and support the poorest to access and complete a decent education, it may be misleading and lack credibility at both policy and community levels to categorically communicate that institutional care offers no potential benefits when a reality check and the accounts of those with lived experience indicate that things are not so clear-cut.

Most residential centres in Cambodia report offering education to children (MoSVY, 2011). A government social worker explained that residential care in Cambodia is often conceptualised as a type of boarding school. However, the quality of education varies. While a small number of foreign-funded organisations, often run by faith-based (Christian) groups (Rumsby, 2021¹¹⁴), provide their own, often good-quality education and vocational training, this is the exception. Most children’s residential institutions in Cambodia send the children in their care to the local public school (MoSVY, 2011). All parents who participated in this research had children who had attended these latter types of institutions. However, I could find no Cambodian studies comparing the educational outcomes of children in residential care with matched peers living with their families in the community. This gap in the evidence examining the associations between orphanage placement, school attendance and academic outcomes suggests that the policy and programming-level characterisation of community beliefs in residential care placement potentially securing

¹¹³ The methodology employed in this study did not allow for an in-depth exploration into whether these participants were expressing their personal viewpoints or echoing established professional orthodoxies. This limitation impacts our understanding of the extent to which the responses reflect individual beliefs and experiences or collective professional norms

¹¹⁴ In this paper the author highlights the over-representation of Vietnamese-Cambodian children in these faith-based residential centres and schools (Rumsby, 2021).

better educational outcomes for marginalised children as a ‘myth’ is an ideological assertion rather than an empirical finding.

While it is true that many residential centres send the children in their care to local public schools (calling into question the relevance or added value of their intervention in the first place), some institutions create a parallel system, often of better quality than the local state school system, with more educational resources (e.g., computers, English and Chinese classes), comfortable classrooms and well-trained and well-paid teachers (often the cream of the public teacher training colleges, who are then removed from teaching in the public sector to the detriment of a wider group of children and the national public education system). Several participants noted that it is not only impoverished parents who seek to place their children in residential care to access perceived educational advantages for their children. As this social worker from Phnom Penh said:

‘Some parents that [want to] place their children in the RCI - they are not poor - but they believe too much in the orphanage and think that [the orphanage] can provide education . . . and opportunities.’ NGO social worker 4

While another confirmed:

‘[Some] families they are not really poor but they want their child to have a better future and they [think] that the orphanage will give them that.’ NGO social worker 5

Given this scenario, we could be tempted to think that residential children’s institutions can, in some circumstances, contribute to a ‘good education,’ a situation illustrated in this local newspaper extract:

“The orphanage is fun, (Sophor’s mother said), because she gets to study English, French, Khmer traditional music, math and mechanics”. But since returning home, Sophors’ education has already proved worse than before, she said, with her local public school not offering English or computer courses.” “Oui,” 16-year-old Sok Ny said with a smile, her elbows on a table in the head office of the Borey Ek Phnom orphanage in Battambang, where she has lived for the past seven years. “I’m happy here – I love it.” (Phnom Penh Post, 2017)

In contrast to the NGO social workers who participated in this study, a government social worker in Phnom Penh firmly believed that residential care placement enhances educational opportunities for children from the poorest backgrounds despite acknowledging the negative emotional impact of living away from their birth families.

'Me: Do you think poor children can access better educational opportunities if they are in residential care?

Social worker: Yes, of course! Living in an orphanage, they can get a better education than with their poor parents - but the problem is that they do not feel [emotionally] warm enough.' Government social worker 1

This example again illustrates the tendency of NGO social workers to express views that are more closely aligned with the key messages of the global DI movement than their government social work counterparts or caregivers. This finding could be explained by international agencies' direct funding, monitoring and evaluation of the NGO sector. Viewed from this perspective, NGO social workers' adoption and internalising of global child care reform and deinstitutionalisation principles can be seen as an artefact of their training and the deinstitutionalisation-informed nature of their practice.

6.2.3.4. Summary

It is widely recognized that poverty is a significant push factor for vulnerable families to send their children to live in residential children's institutions, but could this sometimes be a rational choice on the part of parents? The caregivers who participated in this study were among Cambodia's poorest and many of them reported difficulties obtaining food and shelter. In those circumstances, what are the odds that they will be able to sustain their child's school attendance and support them in their studies? The government's data (OECD, 2018) shows that for parents in the bottom 20% of the socioeconomic population, the chances of them being able to afford to keep their children in school and achieve a quality education are small. Recall that 74% of Cambodian children do not complete upper secondary education (UNICEF Cambodia, 2023:10).

The role of residential care in supporting education and training is contested and presents a paradoxical challenge. While the emerging global consensus against residential care and towards family and community-based care, supported by strengthened social safety nets and access to quality education, offers a sustainable and compelling long-term vision, in contexts of extreme and immediate poverty, conflict, or disaster, residential facilities, if operated to a 'good enough' standard may sometimes provide stability, safety, and educational opportunities otherwise unavailable.

Research on the developmental effects of residential care on children is extensive (Berens

& Nelson, 2015) but leaves key theoretical questions fundamental to the debate

unaddressed. For example, to what extent does attendance at elite residential schools such as Eton in the UK or the Doon School in India affect students' social and emotional development? Little et al.'s (2005) survey of research on the impacts of residential placement on child development in the United States and Europe concluded that there is insufficient evidence to justify clear recommendations about what types of children are likely to benefit from what kinds of residential settings and argues that in the absence of evidence, policy and practice regarding residential care have been guided by ideology.

The findings of this study have identified the government's enhanced oversight, monitoring, and data collection of the children's residential care sector as welcomed. Given the lack of a comprehensive evidence base and the scale and diversity of residential and educational provision in Cambodia, this emerging data collection and analysis capacity can potentially provide the basis for clarifying the size and functions of the current children's residential care landscape and conducting rigorous evaluations of the impacts of residential care on child development, educational and life course outcomes.¹¹⁵

6.3. Policy and programming gaps

In addition to describing their lived experiences of family separation and deinstitutionalisation, caregivers and social workers' accounts also surfaced factors contributing to separation and orphanage placement that are under-recognised in current Cambodian child care policy and programming. In this section, I present and discuss three factors: discrimination against Vietnamese Cambodians, substance misuse, and childcare (daycare). These findings indicate some potential new areas and approaches for policy and programming designers working to prevent family separation in Cambodia to explore.

6.3.1. Discrimination against Vietnamese Cambodians

Systemic discrimination and human rights violations against ethnic Vietnamese communities living in Cambodia are a common but rarely discussed fact of life in Cambodian society (Canzutti, 2022; Sperfeldt, 2020), and as such, are a factor unacknowledged or addressed in the child care policy and programming documents reviewed as part of this research. This study generated qualitative data from a purposive

¹¹⁵ See Sections 7.3.2.

sample of parents and caregivers, with one sampling criterion being that they had experience of placing their children in residential care.

Three of the twelve parents and other family caregivers who participated in this research were Vietnamese Cambodian mothers. When asked if they or other Vietnamese Cambodian families they knew had experienced any discrimination, all three mothers said that they had not. However, their subsequent accounts contradicted this initial response. Each reported being excluded from government-provided emergency support during COVID-19 lockdowns, and none had been enrolled in the ID Poor social protection system. As this mother said:

‘The commune will not give me [an ID Poor Card] because I am Vietnamese. The commune chief will not give me the poor ID card. The local authority [arranged] for the pagoda¹¹⁶ to distribute food [during the COVID-19 lockdowns] to people experiencing poverty in the commune - but the pagoda did not give it to me because I am Vietnamese.’ Caregiver 3

Another Vietnamese Cambodian mother said:

‘I would be so grateful if I could get some food, some cash, an ID poor Card – I try - but it never happens - because I am Vietnamese.’ Caregiver 1

Most Vietnamese Cambodians exist in a legally indeterminate position, cut off from the limited social security safety nets that exist and denied many of the entitlements of Cambodian citizenship. Even though many ethnic Vietnamese have been settled in Cambodia for generations, an estimated 90% do not have birth certificates or identity documents,¹¹⁷ making their civil status and day-to-day lives precarious and leaving them *de facto* stateless. Denied citizenship, they cannot own land, open bank accounts, vote, or travel outside the country. In addition, their lack of civil status prevents them from accessing the legal system or making formal complaints to the authorities.

Many Vietnamese Cambodian children are unable to attend government schools (due to their lack of ID documents), while their families are effectively barred from accessing most public services.

¹¹⁶ Buddhist temple and monk’s compound.

¹¹⁷ In one study only 5% of 414 ethnic Vietnamese surveyed in Takeo, Kampong Chhnang and Pursat provinces had birth certificates (Sperfeldt, 2021).

This mother, for example, described barriers she had faced in obtaining health care:

'When I went to the hospital . . . it was not very good. Because, the hospital staff, when they knew I was not [Cambodian] they treated me differently . . . the service was bad.' Caregiver 1

The first-hand accounts of these mothers underscored the lived realities of marginalisation and social exclusion faced by many Vietnamese Cambodian families. The mother cited below expressed her sense of social isolation within Cambodian society:

'People treat me differently. So, it is difficult for me to get the help . . . people do not care about me that much . . . My community [do] not really like me. They discriminate against me. . . [the local authorities] do not want to speak with me. 90% of the people in my area do not appreciate me.' Caregiver 3

The difficulty of obtaining a clear picture of this community and their circumstances in Cambodia is compounded by a reluctance to recognise or discuss the issue at the social, political, or media level, a lack of reliable data, and a complex and centuries-long history of animosity between Cambodia and Vietnam, with anti-Vietnamese nationalist rhetoric influencing Cambodian politics up to the present day. As might be expected with such a sensitive issue, estimates of the number of Vietnamese-Cambodians living in Cambodia are wide-ranging. The Cambodian National Institute of Statistics' *Cambodia Socio-Economic Survey 2013* (CNIS, 2013) estimated ethnic Vietnamese at 0.1% of the population (14,678 individuals), while researchers working on minority issues generally agree that the community numbers at least 400,000, with the NGO Minority Rights Organisation putting the figure as high as 700,000 people (MIRO, 2017).

Foucault argues that prohibitions relate to the exercise of privileged or exclusive rights to speak on certain subjects, particularly in political discourse. According to Foucault's concept of 'Rules of Exclusion,' these prohibitions serve as mechanisms that regulate discourse. The first rule of exclusion manifests as discursive prohibition, where certain topics are restricted or controlled to maintain power structures (Foucault, 1970, as cited in Young, 1981).

'We know quite well that we do not have the right to say everything.' (Foucault, 1970 in Young, 1981: 54).

In addition to its absence in any of the policy and programming documents reviewed, none of the Cambodian social workers, international consultants, or other professional

participants in this study raised the issue of ethnic discrimination as a possible contributing factor to social exclusion, poverty, or family separation. This omission or oversight suggests a double prohibition, with the economic and social exclusion of ethnic Vietnamese families living in Cambodia compounded by an unspoken exclusion of this well-known social reality from public discourse. Indeed, despite my discussions identifying experiences of discrimination with Vietnamese Cambodian parents, I failed to explore or probe this theme in the interviews with social work professionals (none of whom were Vietnamese Cambodian), perhaps because having spent over a decade living and working in Cambodia I too had subconsciously adopted this social prohibition.

None of the literature on child care deinstitutionalisation in Cambodia reviewed as part of this study referred to the particular challenges faced by Vietnamese Cambodian children and their families. None of the government or NGO child welfare or child protection performance management, monitoring, and evaluation tools are disaggregated by ethnic group. This lack of recognition at the level of data collection renders the situation of ethnically Vietnamese children in Cambodia invisible to policymakers, and addressing this gap is a prerequisite to drawing attention and resources to this marginalised and under-served group.

It is neither surprising nor unique to Cambodia that scapegoats are maintained and politically instrumentalised as poverty, wealth inequalities, and social tensions among the general population remain evident after more than two decades of neoliberal policy fixes and a media and state narrative emphasising the country's economic successes. The discrimination against the Vietnamese Cambodian and its role in family separation and orphanage placement revealed in this study is a complex issue that intersects with historical animosities, social and political exclusion, and systemic inequalities (Amer, 2017; Sperfeldt, 2020). The examples of marginalisation described by Vietnamese Cambodian participants reflect broader mechanisms of social control and exclusion. This finding highlights the need for increased recognition of the part played by ethnic discrimination in Cambodian social affairs and the promotion of inclusive social policies and practices that recognise and address the issue. Specifically, participants in this study identified their exclusion from the emergent Cambodian social protection system as a policy and programming gap to be addressed.

6.3.2. Substance misuse

Caregivers and social workers identified substance misuse as a significant factor contributing to family separation, with many expressing concerns over its damaging effects on community safety and family life. In discussing substance misuse in marginalised communities, participating social workers and caregivers drew attention to the impact of alcohol and drug abuse. In particular, they highlighted the widespread use of crystal methamphetamine and homemade rice wine.

As this NGO social worker from Northern Cambodia stated:

‘The drug problem is very obvious.’ NGO social worker 11

Similarly, this mother said:

‘I have lived in Phnom Penh since 2012. . . . now it seems more obvious that people are using drugs - more and more – it scares me - I am worried . . . ’ Caregiver 2

A government social worker from Phnom Penh noted:

‘I can see it almost everywhere - in the pagoda¹¹⁸, in the street - for the family, it is very dangerous.’ Government social worker 1

In talking about the most common family problems they encountered, this NGO social worker identified substance misuse and contextual community issues:

‘Alcoholism, drugs and poverty . . . and the environment they live in - by environment I mean that many people in that community have the same problems.’ NGO social worker 13

Several participants made the connection between substance misuse and family poverty. The NGO social worker below expressed her understanding of the causal links between alcohol misuse, health issues, over-indebtedness and child neglect:

‘Rice wine has many side-effects - people [want to get drunk] every day - they think that \$2 per day [spent on alcohol] is easy for them because they earn \$10 in a day - but, \$2 for the alcohol and then they eat something while drinking - so that is \$2 more - and then - they do not take care of their children’s study, do not care about the children’s food or health - finally the children or parents get sick -

¹¹⁸ The grounds of Buddhist pagodas are often the location of informal communities, homeless people and

migrants in Cambodia's urban centres.

they cannot work - they go to a private doctor . . . and then everyone owes the doctors money - it is another debt!’ NGO social worker 1

The impoverishing effects of substance misuse were also suggested by this mother’s comment that:

‘My second husband used ice¹¹⁹ - we had no money - [ice] is very expensive.’
Caregiver 4

Regarding practice issues, an NGO manager highlighted the challenges social work staff face in addressing parental substance misuse within families:

‘We can always work with a family where one parent is a substance abuser - but where we have two - [we cannot]. Their priorities are drugs. Meth¹²⁰ has gone huge in the communities . . . it is everywhere - there is a lot of violence because of ice.’ NGO manager 3

Statements underscoring the scale of substance misuse and the challenges faced by social workers in tackling its effects on caregivers’ capacity or willingness to look after their children were also made by field social workers. For example, this NGO social worker said:

‘Some parents have no money or poor health - they are pretty easy to convince [not to place their children in an orphanage] because they love their children - but for alcoholics or drug addicts, they are very difficult to convince because they do not want their children around - they have a lot of excuses - they do not take care of the children and do not send them to school and use their children to earn money or go begging - it is very hard to work with those parents.’ NGO social worker 16

Referencing their experiences of the impact of substance misuse, several caregivers said that a community environment that exposed their children to substance misuse and violence had contributed to their decision to place their children in residential care. Several highlighted that both methamphetamine and alcohol misuse were strongly associated with domestic and community violence. A mother who described having put her children in an orphanage for their protection and physical safety highlighted the aggressive and unpredictable behaviour of people using methamphetamine:

‘Living on the street has become more dangerous in the past five years - for sure - I am more scared to sleep at night now than I was before. For sure. More people

¹¹⁹ Methamphetamine.

¹²⁰ Locally known as ‘t’kau’ (‘Ice’).

use drugs and it gets crazier. Ice is more dangerous than [rice wine] - they just go crazy.' Caregiver 3

While this mother in Phnom Penh shared her own experience of methamphetamine-related domestic violence:

"It is very obvious that a lot of people are using drugs. I am afraid of this. . . . people go crazy - and I am afraid of the violence. My brother-in-law tried to beat me because he was crazy on drugs.' Caregiver 4

Social workers and caregivers also discussed the impacts of alcohol misuse, drawing particular attention to the associated issue of violence. As this government social worker said:

'Violence is nearly always connected with alcohol'. Government social worker 4

In common with other Southeast Asian societies, rice wine, known locally as 'Sraa Sau,' occupies an important place in Khmer culture and is used medicinally, ceremonially, and as part of everyday life. However, with typical alcohol content above 20% and a retail price of about \$1 USD per litre, its potency, cheapness and availability make it a drug of choice for those of limited means. From my own experience, drunkenness, alcohol addiction, and alcohol-related health problems are an evident part of everyday life in many poor and marginalised communities in Cambodia. Despite this, during more than ten years of working in the country, I have not known of any donor or agency that mobilises funding for interventions or campaigns targeting alcohol misuse or its effects on families. Considering the extent to which the issues identified and addressed at the policy and programming level reflect those highlighted by social workers and caregivers, this is anomalous. Particularly given the prioritising of violence against children at the policy and programming level and research that consistently shows a strong connection between alcohol misuse and domestic violence (Collins et al., 1997; Albrithen, 2006).

Another government social worker, in discussing a case in which she had removed a child and placed them in residential care due to physical abuse from his caregiver, observed:

'The main reason that the grandfather beat his grandson was because [the grandfather] was drinking.' Government social worker 1

The findings of this study raise questions about the relative lack of policy or programming attention given to alcohol misuse in Cambodia. I suggest two possible explanations. Firstly,

a reluctance within neoliberal domestic politics to implement policies that could negatively impact the alcohol industry, its elite Cambodian owners, and the government revenue generated from this sector. Secondly, the adoption of transnational child welfare frameworks and their associated funding flows prioritise formal child protection mechanisms for *responding* to violence against children. While strengthening child protection response systems is essential to the policy mix, an overly exclusive focus on strengthening child protection response systems risks diverting attention and resources from developing and implementing preventive strategies.

This focus indicates a broader trend in policy orientation favouring reactive, *post hoc* social policy measures over preventative ones, suggesting a policy and programming-level gap in the holistic conceptualisation of social issues. The failure to recognise or address alcohol issues thus underlines a broader oversight in social policy formation and implementation, which should strive to balance both immediate response mechanisms and long-term preventative strategies that address the determinants of social problems.

In comparison to alcohol, drug misuse enjoys a higher profile both politically and due to its incorporation into international aid funding streams. However, the policy orientation is again reactive rather than preventative and does not reflect the experiences described by participants in this study. In practice, most substance misuse and harm-reduction activities in Cambodia depend on international funding historically tied to HIV prevention (for example, clean needle programs, methadone programs, and HIV testing) (Chheat, 2018). While not questioning the value of these programs, the data generated by this study suggests that this focus on programs for injecting drug users does not meet the really existing situation. The participants' accounts present a substance-misuse landscape dominated by the smoking of methamphetamine and drinking of alcohol, suggesting that the ongoing international donors' health-related focus on reducing harm among intravenous drug users (whose numbers are relatively low in Cambodia (Tuot, et. al. 2019)) is an example of top-down global health and social policy and programming untethered from a street-level or country-specific context.

In 2017, the Cambodian government initiated a six-month campaign against drugs, which has been indefinitely extended. To date, the campaign's emphasis on detention and prosecution – rather than ensuring access to adequate healthcare for people who use drugs, including treatment, rehabilitation, and harm reduction – has led to an escalating

public health and human rights crisis (Amnesty International, 2020). Over three years since its launch, the National Authority for Combatting Drugs campaign has not only failed in its mission of reducing drug use and drug-related harms, it has led to severe and systematic human rights violations, with an increasing number of people, primarily from poor and marginalised populations, extra-judicially detained in over-crowded and under-staffed private and state drug rehabilitation centres (Amnesty International, 2020; Hasselgard-Rowe, 2021).

The under-recognition by donors, international NGOs, and the government of the societal and familial impacts of substance misuse was raised by this NGO Director:

'We never hear UNICEF talking about addiction - or USAID - it's not in there . . . or the government, even MoSVY - they don't talk about addiction . . . it's ignored.'
NGO manager 6

In summary, through both direct parental substance misuse and its broader adverse impacts on community safety, the narratives of social work and caregiver participants emphasised substance misuse as an under-recognised driver of family separation and one that is difficult for practitioners to address.

6.3.3. Childcare

Eight of the ten mothers who participated in this study highlighted challenges in working or generating income while looking after their children. Four of these mothers said that residential care placement relieved them of childcare responsibilities and gave them the time to earn money to live on.

6.3.3.1. Parents identify income-generating pressures and childcare challenges

All caregiver participants reported difficulties in balancing work and childcare responsibilities. Their stories shared much in common, with the decision to place children in an orphanage, though an emotionally difficult one to make, partly driven by the need to secure income for the family's survival.

The work schedule described by the mother below, who was employed in a bag-making factory, reveals the intersections of single parenthood, low income, and demanding employment conditions as drivers of orphanage placement.

'It was hard work for me looking after the children and doing the job at the same time. . . so, I put the girls¹²¹ in [an NGO] - whilst I was working in the factory - after work I collected them. At that time I would put [the girls] into [the NGO] in the morning - and then I would collect them again at 11am for lunch - I had a bicycle - and after lunch I would drop them back [to the NGO] again - then I would collect them when I finished work at about 8.30 pm.' Caregiver 2

The logistics and physical demands of the work and child care routine she describes seem unsustainable, and, ultimately, when the girls were older, this mother arranged for them to live in an orphanage full-time.

The income and opportunity costs associated with having to work alongside one's children, as well as the income-generating benefits of placing children in residential care, were highlighted by one mother who said:

'Before - when I was living with the children – I used to collect rubbish - that is all I could do as I had to take care of the children - it is a hard job - to work - to collect rubbish and care for two children. Now that they have gone to [live at] the orphanage, I can make [better] business - going around selling vegetables on the cart.' Caregiver 4

This street-working mother described how, before being placed in residential care, her children would join her to collect recyclable rubbish that could be sold later. Rubbish to be scavenged and sorted to extract recyclable and sellable material (i.e., plastic, cardboard, and metal) is commonly placed out on the streets at night, making scavenging a night time job. Night-time scavengers working with their children are a common sight in Phnom Penh, exposing the children accompanying their parents to a risky environment and routine likely to impact their school attendance and achievement negatively.

One of the participating NGOs had recently initiated a daycare service, as well as a 'night care' service, which provided overnight accommodation for children whose mothers worked at night.

'[Our NGO] has started a daycare program for young children - we have 30 kids per day - but we want more - in all [our] centres. Sometimes the mothers work late at night – and they call [our NGO] and ask [us] to keep the children overnight - it is very good.' NGO social worker 4

¹²¹ *Aged three and six at the time.*

The families providing this night care are selected from the local communities where the working mothers live. The NGO assesses and monitors these care providers to ensure they meet quality standards set by the NGO for taking care of other people's children. Each night care provider receives a payment from the NGO of \$7 USD per child per night.

6.3.3.2. Participants identify childcare as a preferred support service

Both social worker and caregiver participants strongly advocated for developing and expanding childcare services to support caregivers in generating income and maintaining family cohesion. Childcare was provided by only two of the NGOs involved in this study and is not a service that features in any of the government or international agencies' plans or strategies for preventing family separation.

An NGO social worker involved with organising a pilot programme for community-based childcare in Phnom Penh said:

'It is a real help to the families - a lot of people they go to work and they put the children in daycare [with us] - it is generally open 7am-5pm.' NGO social worker 14

The value of this programme in supporting a family to stay together was described by one user of the service who said:

"The best help I get is the daycare and the education - [the children] eat here at [the NGO] - they have a school here in the morning - but then after lunch they can go to art class - and then when I finish work the kids can come home and eat with me and go to bed." Caregiver 8

Participants repeatedly highlighted the potential benefits of childcare, such as allowing parents to work, improving their income and reducing the need to place children in residential care. As this NGO social worker said:

'I think it is a really good idea to have daycare for kids - like, we could give [the children] some food, let them sleep and do activities during the day - and then the parents come and take them home - I think this would be an interesting project to run.' NGO social worker 10

Several other social workers underscored the potential benefits of strengthening childcare services. For example, this NGO social worker said:

'[Child care] would be a very effective project to help prevent family separation . . . for most parents - if they had enough . . . money and time they just want to keep their children with them - and have them sleep with them at their home.' NGO social worker 16

While another NGO social worker concurred:

'[Day care] would be a big help for parents so that when they put their child in daycare they can have time to make money to support the family.' NGO social worker 6

Participating caregivers were also enthusiastic about the idea of childcare services.

For example, this street-working mother in Phnom Penh said:

'That would be the best thing for me. If you had [a place] and you put the kids from morning and collect them at 5pm - that would be the best, the best. I want them to sleep with me at night.' Caregiver 4

6.3.4. Individual care planning and relational social work

The accounts provided by social workers and caregivers strongly emphasised the value they placed on relational approaches to case management and social work built on trust. The complexity and contextual specificity of the circumstances that lead parents and caregivers to put their children in residential care necessitate more than the predominantly 'systems-level' policy and programming approaches advanced by international agencies and their government partners. While systems-level efforts such as social protection payments, inclusive registration, monitoring of standards in residential children's institutions, and better pay for teachers to reduce the need for informal extra fees help address institutional drivers of family separation, they are insufficient on their own. Individualised and tailored support packages, co-developed between individuals and families at risk of separation and a trusted social worker, are also required to address the complex and contextual issues at the individual and family levels.

Individual care planning can be crucial in identifying and providing targeted support to address current challenges. This approach has the potential to reduce the abuse and exploitation that marginalised individuals and groups in this study reported experiencing. These vulnerabilities are often exacerbated by a lack of ID documents, low social standing,

and the absence of 'connections' or 'allies' in a patron-client social context. Recognising the central importance of the helping relationship, a relationally orientated approach to case

management can, I argue, potentially empower families and prevent family separation by mitigating the power imbalances exploited by employers, state officials, the police, and others with greater socioeconomic power than themselves.

In the context of income generation and employment, the NGO social worker quoted below explains how assigning a dedicated social worker can empower parents to negotiate terms and conditions with employers, enabling them to balance earning an income with childcare responsibilities.

‘These mothers should come to the NGO - to the social worker - so that we can help in talking to the company, to the business owner to support her to negotiate the hours of work - so that we know when she will finish so she can look after the child.’ NGO social worker 4

A point to note here is this social worker’s confidence that the involvement of an institutionally backed social worker as an ally or advocate for poor and low-social-status parents is likely to secure them more reasonable terms of employment and reduce the risk of separation.

Caregivers emphasised the interpersonal and morally supportive nature of their relationships with their NGO social workers. In addition to material support, social workers and parents highlighted discussion and home visits by the social worker as key elements of the social work role.

For example, this grandparent, with care of her grandchildren, said:

‘We get visits from the social worker. The social worker gives us solutions and advice plus some material - a bed, school material, food - they really take care of us.’ Caregiver 5

While NGO social workers stressed that their practice and theory of change sought the independence of those they worked with, caregivers’ accounts were characterised by descriptions of long-term relationships with their social workers and the NGOs they worked for, often spanning years. The role of relationship building, trust, and long-term commitment in this professional relationship was elaborated on by this mother, whose children had returned to live with her following a long period of living in residential care:

‘I have known [my social worker] for ten years. If I have any problem I call him. If I was hungry, he used to bring me food when I was homeless. I was drinking [alcoholically] when I was living in the [abandoned] train - but he would still come and help me if I called him.’ Caregiver 7

A single mother, who was running a successful beauty business while caring for her two children who had previously been placed in residential care, said:

‘Rith was the social worker who visited me. He always comes to visit the family. He always gives advice and encourages us - not much support with the rice or anything - but he always encourages us - mental support - because there were a lot of challenges for me to be able to provide for the family.’ Caregiver 8

While the relatively small sample size of this study precludes drawing broad conclusions, this mother’s emphasis on home visits, discussion, ‘advice’, and ‘encouragement’ as valued social work activities reflects the relational nature of the social work practice of NGO and government social workers described by participants in this study and indicates elements valued in the Cambodian social work context.

Mirroring the comments of the mother quoted above, this NGO social worker explained:

‘The No. 1 activity is social worker home visits to provide information, advice, and encouragement - all the other activities can only work if you have the relationship.’ NGO social worker 2

Several NGO social workers and managers emphasized the importance of building a trusting relationship between social workers and those they serve. For example:

‘[It’s about] the relationship - if you don’t trust your social worker how are they going to influence you to make a positive change - how are they going to inspire you to make a change?’ NGO manager 3

Despite all participating caregivers reporting that they still lived in poverty, they did not emphasise financial or material support when discussing their relationship with their social worker. Rather, caregiver participants in this study highlighted the value they placed on the interpersonal, coaching-oriented, and morally supportive aspects of social work intervention. This contrasts with conceptualisations and approaches to social work as represented at the policy and programming level, which focus on statutory, legal, and procedural aspects of child protection procedures, a focus reflected in Cambodia’s strategic plans for strengthening and training the social workforce (MoSVY, 2021).

Cambodia has a social and economic system that favours those who can leverage existing ties to well-connected family and friends (Feinberg, 2009). In the absence of these

connections, low-income and marginalised caregivers repeatedly identified three key supports that they wanted from their social workers:

- Information
- Advice
- Encouragement

The comment below illustrates the difficult situation facing many poor parents and how indigenous social work practices and approaches have evolved to mitigate these gaps in knowledge, social inclusion, and moral support.

'I did not know anyone. I had no one to ask. I had no network. I needed advice.'
Caregiver 1

The following description by an NGO social worker illustrates how the Cambodian approach to social work can benefit non-formally educated and socially excluded individuals. The social worker describes working collaboratively to provide them with relevant knowledge, advice, decision-making support through discussion, and ongoing motivation for making life changes. Additionally, the social worker reports advocating for those lacking the necessary connections to gain social entry or progress in a client-patron-oriented society.

'You have to encourage people - they need encouragement - they may have the energy - but they lack ideas - so we have to sit with them to plan, guide, and encourage them. A lot of [employers] do not want to accept job requests from people they do not know. Most poor families lack connections. They only know other poor people. From the employer's side it is to do with trust. So, something that the NGO can do is speak to the company - to vouch for the beneficiary [as a potential employee].' NGO social worker 4

A final theme identified in discussions around social work practice was social workers and social work managers' sense of a lack of institutional recognition, funding, or interest in supporting this kind of one-to-one, relational social work at the policy and programming level.

As this NGO social worker said:

'Ideally, a social worker should visit a family according to [the needs] of the case . . . however, the budget is limited - and each member of staff has a lot of cases to work on - so being able to do this is a challenge.' NGO social worker 5

As the above accounts indicate, relational social work conducted via home visits and working individually with families is resource-heavy in terms of time and staffing. Working at the individual and family-level interventions often fails to produce the large-scale, time-

bound quantitative 'results' or measurable 'impacts' that many international donors prefer. These donors typically favour quantitative monitoring and evaluation methods, as well as 'systems-level' approaches to implementing social policies. For example, a positive parenting program campaign can quickly report hundreds or thousands of participants. In contrast, family-level social work may take years to sustainably improve the situation of just one family.

'[Parenting Programs and public events at which school material is handed out to large numbers of poor children] - they look good, but . . . Exactly. It 'looks' good. But a social worker sitting with a family three times per week . . . [the donors are not] interested! It makes me angry. I am frustrated because they only give the funds to the wrong things - but for the solution - 'No!'. It comes [down] to family support again. [The donors are not] interested.' NGO social worker 4

This observation mirrors those made by NGO social work manager 6, who expressed her view that funding for staff to work directly with families was difficult to secure as donors prefer to support new or 'innovative' projects and undervalue the need for social work home visits, relationship-building, and ongoing support. The result is a shortage of funds to pay the salaries of sufficient numbers of front-line social workers to work with families to prevent family separation and facilitate the safe and sustainable reintegration of children from residential children's institutions to family-based care.

"Social workers need more time to visit and spend more time with the family to build a relationship and to find out the real things that are going on in the family. This needs a budget. Increase the budget for staff so we have more social workers so they can have more time with families. For meeting with families right now we have a very limited budget, so if we spend too much time on visiting one family - we won't have any budget to go to the other families - when I say 'budget' - I mean money for staff [salaries] and petrol." NGO social worker 5

Highlighting the value of collaboration between NGO and government social workers and the under-resourcing of state social services, the NGO social worker quoted below added that intimate knowledge of marginalised families' histories, strengths, and weaknesses required NGO and community-level government staff with long-term knowledge of the family to work hand-in-hand to identify strategies to help families address the core issue facing many of them: low income.

"We need more budget to support the village and local authorities and communes who need strengthening and training - because they know the local situation, they

know the families, they know the opportunities for generating income [in the local community].' NGO social worker 12

6.4. Chapter summary and conclusions

This chapter has explored the relationship between policy, programming, and the lived experiences of caregivers and social workers in the context of family separation and orphanage placement. Led by the major themes that emerged from participants' accounts, it has critically examined the priorities and gaps in current approaches, emphasising the value of aligning policy and programming with the actual needs and circumstances of those they purport to serve.

The Cambodian government's efforts, supported by international actors, have significantly reduced the number of children living in residential care. However, accounts from caregivers and social workers who participated in this study about the rapid pace of this deinstitutionalisation of child care in Cambodia raised concerns about the safety and quality of the process in the context of a constrained social service workforce and affected families' vulnerabilities. Meanwhile, neither social workers nor caregivers identified violence against children as a significant driver of orphanage placement, and social workers expressed doubts about the relevance and effectiveness of positive parenting programmes in the Cambodian context.

The findings from social workers and caregivers also identified some gaps in current policy and programming. Discrimination against Vietnamese Cambodians emerged as a critical but under-addressed issue, highlighting a need for more inclusive policies, particularly in relation to ID registration and equitable access to social protection schemes. Substance misuse was also highlighted as having adverse effects on community and family life. Despite its impact, substance misuse is not recognised or addressed within current child welfare policy frameworks, and the findings identified a gap in the provision of non-carceral, community-based substance misuse treatment and rehabilitation services.

Finally, both practitioners and caregivers highlighted the importance of personalised support, advice, and encouragement from social workers, along with accessible childcare services, as preferred support services for maintaining family cohesion.

In conclusion, participants' experiences underscored the importance of developing and implementing policies and programs responsive to families' nuanced and diverse needs.

Approaches to family preservation call for a holistic approach that addresses structural issues such as poverty and discrimination while also providing targeted support to ensure

the safety, human rights, and well-being of children and their caregivers within their communities. This requires a concerted effort from both local and international stakeholders to ensure that policies are not only well-intentioned but are also practical, effective, and reflective of the realities faced by those they are meant to assist.

In the final chapter, I summarise the findings in relation to the research questions and highlight some of the new knowledge generated by this study. I also identify some research limitations and suggest seven recommendations for future policy and programming to prevent family separation in Cambodia.

Chapter 7. Conclusion and recommendations

7.1. Introduction

This chapter addresses the research questions by summarising key findings from the policy and programming documents analysis, semi-structured interviews, and focus group discussions. The research's original contributions to knowledge and some of its limitations are then identified. Some conclusions are drawn, and recommendations are suggested for future research and policy and programming steps to support children and families at risk of separation in Cambodia. Finally, some personal reflections are offered on undertaking the research and preparing the dissertation.

The conclusions and recommendations arising from this study are tentative due to the limited sample size.

7.2. Addressing the research questions

7.2.1. What is the problem of family separation and orphanage placement represented to be in Cambodian policy and programming?

The qualitative document analysis of ten selected policy and programming documents¹²² revealed that interventions to address violence against children and to counter 'positive community attitudes' towards children's residential care through behaviour change campaigns and parenting classes received the most attention in policies and programmes aimed at preventing family separation. The drivers of family separation that were found to have received the least amount of attention in the policy and programming documents were 'migration' and 'poverty'.

A closer, interpretive analysis of two of the most operationally important of these policy and programming documents found the problem of family separation and orphanage placement represented in these documents to be a failure to meet internationally endorsed child rights standards manifested as too many children living in residential care due to weak regulation of the sector and positive community attitudes towards children's residential care. This representation is conceptually underpinned by principles from

¹²² See Section 4.1.

children's rights and the globalised child care deinstitutionalisation policy and programming model. It has been produced and disseminated in Cambodia by international agencies and actors based in high-income countries, most notably UNICEF and USAID.

7.2.2. Which problems leading to family separation and orphanage placement are highlighted by social workers and caregivers with lived experience of family separation?

Social workers and caregivers who participated in this study identified socioeconomic drivers of family separation and the placement of children in residential care in Cambodia. These factors included the inability to meet basic needs, precarious and low-paid employment, labour migration, over-indebtedness, concerns about community safety, inadequate public services, and the aspiration to access better educational opportunities for children. In some cases, these factors were compounded by discrimination against Vietnamese Cambodian families and inequitable access to state social protection systems. Parents and caregivers who participated in this study primarily described placing their children in residential care to ensure their access to essential needs such as food, clothing, and education in the context of poverty.

NGO and government social workers emphasised that the commercialisation of orphanage care in Cambodia exacerbates the problem of family separation by undermining community-based social service provision and positioning children's residential care as a potentially lucrative business. This opportunity for profit contributes to the sector's expansion and detracts from developing alternative approaches that address the needs of children within their own families and communities. Participants also highlighted the lack of tailored support services for issues such as substance misuse, community safety, accessible childcare, and precarious employment. Participants' accounts indicated that these diverse challenges to family life are underpinned by income poverty. Social workers, parents, and caregivers stressed the potential value of household economic strengthening as a key strategy for keeping families together.

7.2.3. To what extent do the problems represented at the policy and programming level reflect those identified by social workers and caregivers?

The findings revealed a disconnect between the focus of policies and programming and ground realities. An analysis of policy and programming documents, along with insights from caregivers and social workers, reveals that although efforts have been made to reduce

the number of children in residential care in Cambodia—such as closing institutions, promoting family reintegration, and conducting behaviour change campaigns for caregivers and local authorities—insufficient attention has been given to the poverty- related factors driving family separation, as highlighted by social workers and caregivers.

While NGO and government social workers involved in the child care deinstitutionalisation process in Cambodia supported the goal of reducing the number of children living in residential care, some raised concerns about the rapid pace of deinstitutionalisation, questioning the safety and quality of reintegrating a large number of children into their families over a short period in the context of constrained social service capacity.

Additionally, while this study revealed a policy and programming emphasis on behaviour change campaigns and positive parenting programs to address violence against children and prevent family separation, social workers critically questioned their relevance and effectiveness. They expressed some scepticism towards these approaches, noting that the underlying drivers of family challenges often lie in structural and practical issues related to poverty and low income rather than parenting behaviours and attitudes.

Social workers and caregivers emphasised the need to address the underlying causes of family separation through holistic family and community support services and household economic strengthening. However, current policies and programming do not prioritise household economic strengthening as a core component in preventing family separation, despite its identification as crucial by those with lived experience of family separation and the placement of children in residential care.

7.2.4. What implications do the findings have for child care deinstitutionalisation and family preservation policy and programming?

The seven recommendations presented in Section 7.6 outline the findings' implications for child care deinstitutionalisation and family support policies and programs in Cambodia. Additionally, the following section discusses the theoretical and methodological implications that emerged from the application of the models used in this research.

7.3. Reflections on design and methodology

In this section, I reflect on the strengths and weaknesses of the theoretical frameworks and methodological approaches used in this study.

Hoppe's (2010) 'problem-structuring' approach to policy analysis and formation informed the study's overall design. This approach's strength is its recognition of and engagement with the inherent complexity and uncertainty of many policy problems. Problem-structuring's emphasis on involving multiple stakeholders in the policy process recognises that different actors may have different perspectives on the problem and varying suggested solutions. My use of the model demonstrated how incorporating diverse kinds of knowledge (e.g. technical, experiential, local) can help uncover aspects of a problem that may remain unapparent in more narrowly focused, single-perspective analyses.

In Cambodia's geopolitical and institutional context of child care reform and deinstitutionalisation, a potential limitation of the problem-structuring approach is its inadequacy in addressing the global nature of this and many other contemporary policies. Global policies typically involve various actors, including governments, international organisations, transnational financial institutions and advocacy networks. Many operate across diverse political, cultural, social and economic landscapes. These actors may advance policy frameworks (and their associated funding) that aim at broad, transnational applicability. These global frameworks may overlook local differences in needs, capacities and priorities and leave little room for contextual adaptation. In this context, problem-structuring's focus on participatory and deliberative processes may be undermined by the power asymmetries inherent in global policymaking, with restricted latitude for tailoring policies and programmes to fit local contexts constraining local actors' influence over policy design and implementation.

While a problem-structuring approach encourages inclusion and deliberation, potentially contributing to more democratic policy design, my experience generating and analysing data incorporating multiple perspectives indicated that it can be resource-intensive and require significant time, effort and expertise, potentially making the model challenging to operationalise. In addition, such a comprehensive and extended consultation and

negotiation process in policy formation risks 'analysis paralysis' - delayed or stalled decision-making due to an overemphasis on data collection, detailed analysis and

deliberation, especially when stakeholders have conflicting interests or values (Langley, 1995).

In line with the problem-structuring theoretical framework, this study generated and analysed data from the policy design, policy implementation and target group levels. At the policy design level, this data was obtained from legislative, strategic and programmatic Cambodian child care reform documents. The qualitative document analysis (QDA) method (Altheide, 2000; 2012) was used to conduct an initial examination of these documents and identify major themes, priorities and gaps. A strength of the qualitative document analysis approach was its flexibility, allowing me to focus my analysis on those documents and texts that best addressed the research aims and questions. Unlike quantitative methods such as content or word frequency analysis (Weber, 1990), qualitative document analysis encourages a reflexive approach acknowledging the researcher's role in selecting and interpreting the documents.

However, this inherent subjectivity is open to critique, and there is the potential for bias to affect the validity and reliability of the findings. For example, there is a risk that a researcher may overemphasise or overlook some documents, leading to a skewed interpretation. While consistency and transparency in the coding and analytic process can address some of these risks, in the context of policy design and policy-related research, it may not be easy to demonstrate the rigour of a qualitative document analysis, particularly to political, financial and other institutional stakeholders who value and prioritise quantitative approaches.

Finally, the diversity of documents produced in policy processes—their varying type, quality, length, and availability—may result in a qualitative document analysis reflecting and reinforcing pre-existing policy and programming preferences. Researchers employing qualitative document analysis must navigate these challenges to produce credible and compelling analyses, for example, by complementing the approach with other methods to address its limitations.

Another document analysis method used in this study was Bacchi's '*What's the Problem Represented to be?*' approach (Bacchi, 2009), which focuses on how problems are constructed or represented within policy discourse. A strength of the guiding questions of the '*What's the Problem Represented to be?*' approach is that they help the researcher go

beneath surface-level interpretations to uncover the biases, interests and power dynamics that can shape policy and programming. Contributing to problem-structuring's inclusion of multiple stakeholders and perspectives, Bacchi's approach draws attention to the lived effects of problem representations embedded within policies on different groups. This identification can help highlight who benefits from particular representations of a problem and who might be under-served, disadvantaged or marginalised.

However, this discursive approach may make it challenging for researchers and policymakers to develop concrete, actionable recommendations. The model's focus on deconstructing problem representations potentially results in analyses that, while interesting, are more academic than practical. Similarly, while the approach can be helpful in problematising and critiquing existing policy, it offers less guidance for developing alternative representations or solutions, potentially limiting its contribution to constructive policy change. For example, the approach's focus on texts risks over-emphasising the role of discourse in policy processes at the expense of considering material conditions, political and financial factors and other practical realities.

7.4. Original contributions to knowledge

This research has made the following contributions to knowledge:

1. It is the first study to foreground the experiences of both social workers and family caregivers experiencing the realities of global child care deinstitutionalisation policies.
2. It identifies disconnections between the drivers of family separation and orphanage placement prioritised in Cambodian policy and programming and those highlighted by social workers and caregivers with lived experience.
3. It provides empirical data to support concerns first raised by Fronek et al. (2019) about the possible risks of implementing child care deinstitutionalisation in Cambodia. The risks identified in this new study are associated with a policy and programming focus on reactive approaches, such as the rapid closure of residential centres and return of children to their families and a relative underemphasis on preventative strategies, such as community-based family support services and household economic strengthening.

4. This research contributes to knowledge by applying Hoppe's (2010) and Bacchi's (2009) frameworks for problem-structuring and policy analysis to develop a comprehensive descriptive map of the drivers of family separation and orphanage placement in

Cambodia. The findings identify new and potentially valuable policy and program development pathways and provide fresh insights into addressing this issue.

7.5. Limitations of the research

The small sample size of this study limits the generalisability of the findings. Therefore, the recommendations are intended only to suggest areas for further consideration.

A further limitation of this study is the lack of attention given to the situation of children with disabilities and their families. Children with disabilities are disproportionately represented in residential children's institutions around the world (Goldman et al., 2020; van Shaik, 2023). This raises concerns about the effects on their development, health, welfare, exposure to abuse and isolation from their families and society (Ferdous & Hossein, 2022). This research limitation arises from two main factors: the absence of reports of disability in the context of family separation and residential children's care by the research participants during data collection and my limited knowledge and experience in this area. Consequently, the study does not address the particular challenges and needs of children with disabilities and their families in Cambodia. This omission is regrettable, given that the literature review revealed a scarcity of research and services, and studies on children's residential care in Cambodia frequently overlook the situation of children with disabilities and their families.

Given the high proportion of single mothers in the interview sample and the absence of birth fathers, the analysis could have been strengthened by giving more attention to the gender-specific experiences and systemic issues affecting mothers and grandmothers. Incorporating a more nuanced gender analysis, particularly through a feminist lens, could have provided a deeper understanding of the unique challenges faced by these women. This perspective could have explored how gender dynamics influence family separation and the placement of children in orphanages. It could also generate insights into how social policies, cultural norms, and socioeconomic contexts impact women in Cambodia differently, potentially leading to better-targeted and practical policy recommendations.

Research, policy and programming recommendations arising from this study are presented below.

7.6. Recommendations

The first two recommendations suggest key areas for further research.

7.6.1. Research to evaluate the outcomes of family reintegration efforts in Cambodia

Analysis of data from the government and UNICEF Cambodia (MoSVY, 2020) reveals that of the 9,801 children reintegrated from residential care to their biological families as part of Cambodia's child care deinstitutionalisation campaign, only 1,419 received social work support during the transition. These figures indicate that 8,382 children returned home between 2017 and 2019 without social work follow-up or support.

To assess and enhance the outcomes of orphanage closure and family reintegration in Cambodia, the Ministry of Social Affairs, Veterans and Youth Rehabilitation (MoSVY) and its partners might consider commissioning research to evaluate the outcomes of family reintegration efforts to date.

Parents and caregivers who participated in this study and had children reintegrated from residential centres back into their care highlighted ongoing challenges, including struggles to meet basic needs such as food, difficulty in maintaining their children in school and housing instability. It is important to note that, unlike most families that have received children back to live at home (MoSVY, 2020), all of the participants in this study were involved in formal family reintegration processes, including oversight or support from local government or NGO social work staff.

The only study of family reintegration outcomes in Cambodia (Jordanwood, 2014) was conducted before significant deinstitutionalisation efforts began. Given UNICEF's 'core commitment' to 'do no harm' (UNICEF, 2024a), it is recommended that the outcomes for reintegrated children and their families be assessed or evaluated. Such an evaluation should include both children and families receiving support and those not. At a minimum, it should assess whether reintegrated children:

- Are safe,
- Have sufficient food,
- Attend school or are safely employed,
- Access adequate shelter and stability,

- Are positively embedded within their communities, and
- Maintain positive relationships with family members.

The findings from such an evaluation could inform future policy and programming in Cambodia and also provide useful information for planning and implementing child care deinstitutionalisation in other countries.

7.6.2. Research on residential children's institutions and children in residential care in Cambodia

MoSVY and UNICEF Cambodia conducted the most recent counts of residential children's centres and the children living in them in 2016 (MoSVY, 2016; Stark et al., 2016). Government data and accounts from participants in this study indicate that significant changes have occurred in Cambodia's residential child care sector since that time (MoSVY, 2020). MoSVY and their partners may wish to commission a national enumeration of residential centres and the children living in them.

Both social work and caregiver participants in this study reported a decline in the number of residential care facilities beginning before the COVID-19 pandemic. Caregivers and social workers also noted that many centres ceased operating due to COVID-19-related lockdowns and the collapse of international tourism in 2020 and 2021. Although the Cambodian tourism sector is gradually recovering (Phnom Penh Post, 2024), the demographic profile of visitors has shifted. Tourists from China and other East Asian countries now constitute more visitors than previously (Xinhua, 2024). This shift towards more Asian tourists will likely affect Cambodia's voluntourism market and associated orphanage sector, which has historically been driven mainly by Western visitors (Guiney & Mostafanezhad, 2016; Higgins-Desbiolles, 2023).

The suggested enumeration could contribute to an updated snapshot of Cambodia's residential child care sector and inform future child care reform and deinstitutionalisation policy, programming, and funding allocation. This could help ensure that strategies are responsive to the current needs and realities of children in residential care and to Cambodia's rapidly changing social and economic context.

The following recommendations make suggestions related to policy, programming and practice.

7.6.3. Promote inclusive registration for Cambodian national ID cards

Social work and caregiver participants reported barriers to accessing government services due to a lack of formal identification documents. The absence of legal identity papers prevents individuals from registering for the ID Poor system, making them ineligible for social protection cash transfers and other benefits.

The Cambodian government's new law on Civil Registration, Vital Statistics, and Identity (CRVSID)¹²³ provides a legal framework for integrating birth and death registration with identification and residence documents (GHA, 2023). This legislation guarantees a universal right to identity, aims to eliminate obstacles in the ID registration process, and applies to all permanent residents of Cambodia (IBA, 2024). However, this study identified that some marginalised and underserved communities¹²⁴ face barriers to obtaining legal identification documents.

To promote inclusive registration for national ID cards and improve access to government services, the Ministry of Interior, the General Department of Identification, and their partners may wish to consider raising awareness of and improving accessibility to national ID registration.

7.6.4. Expand household economic strengthening activities

International and national NGOs and donors may wish to consider partnering with the government to expand **household economic strengthening** programmes to address family separation and other poverty-related challenges.

Existing research and findings from this study identify income poverty as a primary factor in placing children in residential care in Cambodia and other low- and middle-income countries (Goldman et al., 2020; Jordanwood, 2016; MoSVY, 2011). To address this fundamental driver of family separation, it is suggested that agencies working with families at risk of separation expand household economic strengthening activities. These interventions should be tailored to meet the diverse needs of individuals, families, and local

¹²³ Effective from July 2024.

¹²⁴ For example, Vietnamese Cambodians, migrating families and the homeless.

socioeconomic contexts. Based on the needs highlighted by participants in this research, potentially useful interventions could include:

- Income-generating activities,
- Savings and loans groups,
- Financial information and advice,
- Vocational training and skills development,
- Agricultural support,
- Market access and value chain development, and
- Employment support.

Participants in this study emphasised the adverse impacts of **over-indebtedness** on family life. Unethical practices in the microfinance sector, such as aggressive marketing of loans, inadequate credit assessments, and coerced land sales, have also been highlighted in empirical research and by the NGO sector (Bliss, 2022; Green et al., 2023; LICADHO, 2019). Legislation and guidelines, including the *Prakas on Interest Rate Caps* (NBC, 2017) and the *Law on Consumer Protection* (RGC, 2019a), are intended to protect the interests of microfinance borrowers by ensuring transparent disclosure of loan terms, fair treatment, and mechanisms for addressing grievances and disputes. However, there is a significant gap in enforcing these regulations (Bliss, 2022), and the National Bank of Cambodia might want to consider strengthening their implementation.

At the community level, international donors, sub-national authorities, and local NGOs may wish to develop and deliver debt-related services, including:

- Financial information and advice,
- Debt awareness-raising campaigns,
- Savings and loans groups, and
- Legal advice and support for microfinance borrowers.

Social work and caregiver participants also underscored the need for accessible **childcare services** that allow parents to work and earn an income. Donors and international and local NGOs operating in Cambodia may like to consider partnering with communities to develop or expand flexible, safe, and sustainable childcare models for low-income parents and caregivers.

The problem-structuring approach to policy analysis and design adopted in this study (Hoppe, 2010) aims to inform policies and programs that balance the needs and preferences of different stakeholders within the policy network. In this context, the desires of social workers and caregivers for community-based services to improve family income could be strategically framed for political and funding purposes. This could be achieved by emphasising the potential of household economic strengthening activities and community-based services to contribute to achieving existing government and international donors' goals, such as reducing violence against children and implementing child care deinstitutionalisation.

7.6.5. Extend individual care planning and community-based services

International and domestic NGOs and donors may wish to consider partnering with the government to extend family-based and community-based services to address commonly identified drivers of family separation and other family challenges.

Existing policy and practice recommendations for stakeholders involved in deinstitutionalising child care emphasise the centrality of family and community services (Goldman et al., 2020; Herczog, 2021). Recommendations made by a consortium of leading deinstitutionalisation agencies and academics¹²⁵ underscore that community-based and family-based programs *'are fiscally efficient and promote long-term human capital development'* (Goldman et al., 2020:606). Therefore, stakeholders, including donors, governments, and NGOs, are encouraged to allocate resources and focus on supporting such programs.

Social work and caregiver participants in this study emphasised the impacts of parental **labour migration** on **children of migrant parents** and their **caregiving grandparents**. To address these inter-related issues, the Ministry of Social Affairs, Veterans and Youth Rehabilitation (MoSVY), donors, and NGO partners may wish to consider exploring the feasibility of implementing and evaluating pilot interventions that provide psychosocial and practical support to family caregivers and children in migration-sending regions.¹²⁶ The design of these programs could be creative and tailored to the local context, potentially

¹²⁵ Including UNICEF, LUMOS, and Maestral (Goldman et al., 2020).

¹²⁶ For example, participants in this study identified migration sending regions such as Prey Veng, Takeo and

Ek Phnom (Battambang).

incorporating elements of education and health, individual psychosocial support, safe migration, household economic strengthening and tailored services that cater to the needs of older caregivers.

Research indicates that adolescence is the most common age for Cambodian children to be placed in residential care (MoSVY, 2011), with over half of the children in orphanages being between 13 and 17 years old (Stark et al., 2017). Social workers and caregivers participating in this study identified community safety and child protection risks as factors driving family separation and orphanage placement. These risks are especially acute for teenagers, who may be left unsupervised and exposed to sex work, substance misuse, and insecure housing conditions.

A lack of essential services within their communities drives some parents to place their children in residential care. Relatively service-sufficient residential institutions '*pull children out of service-deficient communities*' (Newton, 2017:400). Donors and NGO partners might want to consider collaborating with local authorities and communities to pilot and evaluate **community development** interventions and slum upgrading measures. Such initiatives could enhance infrastructure, support essential services (including school and childcare), address substance misuse, and improve housing quality to protect children and prevent family separation. Additionally, existing local **community-based child protection mechanisms**, such as the ChildSafe model¹²⁷ (Davis et al., 2021; Rowland, 2019), could be expanded, with research commissioned to evaluate their effectiveness and outcomes.

Families at risk of separation face diverse challenges, including low income, health issues, educational needs, substance misuse, and ethnic discrimination. One-size-fits-all approaches, such as awareness-raising campaigns and parenting programs, may fail to address these specific needs. Local programmes should address the particular needs of each child and family at risk of separation. In this study, social worker and caregiver participants emphasised the value of individually tailored support delivered in the context of a professional relationship with a social worker based on trust.

Developing and maintaining 'professional alliances' or 'purposeful relationships' with individuals and families enables social workers to identify and prioritise the most urgent needs and practicable next steps for each individual and family. A relational approach to

¹²⁷ See Section 5.2.1.

social work emphasises the interpersonal dimensions and mutuality of the helping relationship (Folgheraiter & Raineri, 2017). It allows social workers and those they are working with to jointly reflect on and adapt plans to meet changing circumstances, allocate resources effectively, and provide well-targeted information and advice.

While acknowledging the importance of social work case management's administrative and procedural components, a relational and **individual care planning** approach underscores the significance of the helping relationship. This participatory approach ensures that interventions are culturally appropriate and aligned with the family's values and preferences. Furthermore, individual care planning can build the capacity and resilience of children and families, equipping them with the knowledge and experience needed to overcome challenges independently in the future.

The following recommendation relates to social work education.

7.6.6. Incorporate household economic strengthening into social service workforce training

Extensive research and this study's findings underscore the role of low income and poverty as factors driving family separation and residential care placement in Cambodia (Allen et al., 2022; Goldman et al., 2020). Government and NGO social workers and social work managers who participated in this study highlighted the value of expanding household economic strengthening activities. NGO social work participants also identified gaps in donor engagement and financial support for these activities and a lack of knowledge and skills among the social workforce to effectively deliver household economic strengthening and livelihood support initiatives.

Strengthening the social service workforce is a prioritised area of focus and resource investment within Southeast Asian child welfare policy and programming. (Phnom Penh Post, 2022b; UNICEF, 2019; USAID, 2024). In Cambodia, a collaborative, national-level effort is underway to develop new training curricula and professional pathways for the government and NGO social service workforce. This initiative, led by the Ministry of Social Affairs, Veterans, and Youth Rehabilitation (MoSVY), the National Institute of Social Affairs (NISA), the Royal University of Phnom Penh, and UNICEF Cambodia, demonstrates a collective commitment to strengthening social service provision. So far, these initiatives

and accompanying government strategic plans and guidelines have primarily focused on child protection training and systems (MoSVY, 2021; UNICEF, 2019; USAID, 2024).

Developers of social work education in Cambodia may want to consider integrating the theory and practice of household economic strengthening as a basic competency for the social workforce in Cambodia. Incorporating these elements into training curricula and modules can embed household economic strengthening perspectives and practices into the social work role, providing social workers with the knowledge and skills needed to support families in achieving financial stability. This integration could help create a holistic social service support framework that addresses child protection, social and emotional needs, and economic empowerment for families. A helpful first step could be incorporating household economic strengthening into the *Guidelines on Basic Competencies for Social Service Workforce* (MoSVY, 2019).

The final recommendation focuses on the methodologies and processes of forming and designing social policies.

7.6.7. Promote the problem-structuring approach to social policy and programming formation

Social workers and social work managers who participated in this study expressed frustration over their lack of inclusion in the design of policies and programmes that they are tasked with implementing.¹²⁸ This study also identified potential risks and unintended effects of implementing top-down globalised child care reform and deinstitutionalisation measures without contextualisation. For example, there has been an apparent lack of oversight or support for most children who have left residential care since the government's child care deinstitutionalisation campaign began in 2017.

Unlike traditional policy consultation methods, problem-structuring's inclusive strategy involves a wide range of stakeholders in identifying and describing the problematic

¹²⁸ 'For strategic planning or anything at the national level they never invite [policy implementers] to join the strategic planning . . . they just prepare by themselves and then at the annual meeting they invite us to look . . . if you have any comment - yes - they write it down - but they never change the document or plan . . . if you want to solve the problems of the children or the youth [the policy designers] need to speak to the youth and the families to understand [the problem] and to see how the parents can support or help.' NGO Manager

situation at the outset of the policy formation process. While this approach may present political and power-sharing challenges for international donors and their government partners, it promotes the inclusion of context-specific views, interests, and expertise from various relevant parties. As a result, policies designed using this method are more likely to be well-targeted, pragmatic, and widely accepted, ensuring more effective implementation and sustainable outcomes.

7.7. Final reflections

This research revealed a disconnect between international institutions' acknowledgement of the need to contextualise global policies to meet local needs and a lack of evidence of this being done in practice. This gap between rhetoric and practice can be attributed to several factors, including the top-down nature of global policy formation and governance structures and the standardisation inherent in transnational policy-making. Often designed with a one-size-fits-all mentality and grounded in neoliberal principles, these policy and programming frameworks prioritise economic growth over social welfare and equity. In Cambodia, these policies have entrenched existing hierarchies and disproportionately benefitted local elites and foreign investors. For example, the neoliberal focus on a lightly regulated and flexible labour market has, in addition to contributing to economic growth, resulted in precarious employment conditions, social dislocation and family separation.

Underscoring the need for more inclusive, bottom-up approaches that integrate local knowledge and needs into policy-making, the failure to translate the rhetoric of contextualisation into practice often leads to programs disconnected from the lived experiences of the communities they aim to serve. These policy and programming disconnects reinforce existing global and national inequalities—sometimes even causing harm—and risk undermining the effectiveness of dominant global governance structures. As a result, the legitimacy of these institutions may be diminished, which could have significant consequences in the evolving geopolitical landscape of a multipolar world order.

This dissertation's research process and production have been both a personal and an intellectual endeavour, blurring the line between self-development and research training. For instance, having experienced the challenges of producing original research firsthand, I

will be less quick to criticise the work of others. Additionally, scholarly habits such as modesty in advancing claims, strengthening an argument or position by reducing its scale or scope and acknowledging limitations are valuable personal and professional insights.

Many of the Cambodian parents and caregivers who participated in this study described harrowing life experiences, often reaching back to their childhoods. Despite this, the graciousness, good humour, and vitality of the mothers and grandmothers I spoke with reflected something deeply encouraging about the human spirit.

The humanity and commitment of many social workers I spoke to were also inspiring. Caregivers stressed how vital the care and encouragement received from their social workers had been to their ability to persevere in adversity and, in some cases, thrive. I share their view that during emotional, material, or spiritual struggle, acts of kindness, solidarity, and practical support from others—even if seemingly small—can make the difference between whether we sink or swim.

Appendices

Appendix A. Letter of invitation to participate in the study



'Keeping Families Together'

Family Preservation Policy & Programming in Cambodia: A Problem Structuring Approach

Data Collection Information Sheet - (Partner NGOs)

The focus of this study is the Cambodian Government and civil society's policy and programming aimed at family preservation and reducing the unnecessary placement of children in residential care. The research aims to generate new knowledge with the potential to inform the design and implementation of family preservation policy and practice in Cambodia by reconstructing, analyzing and comparing the interpretative framings of family separation and existing and proposed policies and procedures as reflected at the policy design level, and amongst social workers and families/caregivers involved in the process.

The aim of this PhD study is to explore the views of different stakeholders on the drivers of family separation and how support to families at risk of separation is experienced and understood. I will be interviewing families, social workers, and policy designers as part of this research. The findings will help in developing and designing family support policies and practices.

The research is funded by the Economic & Social Research Council UK and Durham University Department of Sociology, UK.

Ethical approval for this research has been granted from the Department of Sociology here at Durham University - and I can share those documents with you if you want.

This research is authorized under Article 2, Article 6 and Article 32 of the Phase IV (3PC) Memorandum of Understanding between MoSVY, UNICEF and Friends International.

I hope to be in Cambodia to conduct interviews with social workers and families during November and December 2020 and will spend 3 or 4 days with each participating NGO, although uncertainty due to COVID-19 may make some rescheduling necessary.

Risk assessments and protocols for conducting face to face interviews will include social distancing measures in line with best practice of partner NGOs and WHO and Cambodian government's latest advice.

I shall have a Khmer speaking research assistant with me for all interviews so there is no

need for you to provide translation. The research assistant will be trained so will also be able to conduct any interviews with participants who would prefer not to be interviewed by a foreigner.

If, due to the COVID situation it is impossible for me to travel from the UK to Cambodia in November 2020 we shall reschedule for January/February 2021. If international travel remains impossible at that time the interviews will be conducted by the research assistant alone with support from myself provided online.

Interview Process/Method

The main task I am asking for help with from **Mith Samlanh** is the identification of social workers and families to be interviewed in **Phnom Penh** on **xxxxx** and the setting up and facilitating of those interviews.

Whilst at **Mith Samlanh** we would like to interview:

- 2 or 3 **Mith Samlanh** social workers
- 2 or 3 parents/caregivers
- 1 or 2 DoSVY or CCWC staff.

The Mith Samlanh/DoSVY/CCWC social workers need to be field social workers and/or managers who have experience of working directly with families that have placed a child in an RCI in the past 3 years.

The families identified for interview should be the parents/caregivers of children who have been reintegrated to family after a period in RCI.

We won't be interviewing children.

In the interviews we will discuss how social workers and families view the situations and problems that lead to family separation and RCI placement. So, the interview questions will focus on social workers and families accounts of **family separation**.

Each interview will last approx. 90 minutes.

Interviews will be conducted by myself and the research assistant/translator, or by the research assistant on their own if preferred or if it is ultimately not possible for me to travel to Cambodia.

For interviews with families a social worker who knows the family could also be present if the family would like that.

I will pay for transport, or any other costs involved.

I would also like to give something as a thank you to the families that take part - either material or cash. Please give me your advice on the best approach to this.

The level of confidentiality and locations for the interviews are up to the interviewees.

The interviews will be recorded and transcribed for analysis, and all personal information of participants will be anonymized if the participants wish.

Prior to traveling to Cambodia to conduct the interviews I shall be in contact with my contact there **at Mith Samlanh** via email and/or zoom to explain the research more fully and receive an update on the work that you are currently doing with families and the general situation in your area.

Criteria for the interviewees are summarized here:

Interviewee	Criteria	How many?	Location of interview	Notes
NGO Social worker	Experience of working with families who have ever placed a child in RCI. Minimum = 3 cases Timescale = in last 3 years	2 or 3 social workers	NGO office	Interviews will focus on 2 or 3 cases of family separation that are well known to the social worker (case studies).
Gov. Social worker	Experience of working with families who have ever placed a child in RCI. Minimum = 3 cases Timescale = in last 3 years	1 or 2 social workers	NGO office or DoSVY/ CCWC office	This should be a Gov staff that the NGO has some experience of working closely with. It should be a Gov staff that does direct work with families.
Parents/caregivers	Caregivers of children who have been in residential care but have now had their children reintegrated home.	2 or 3 families	NGO office or family home	Although this sample is of families with reintegrated child note that focus of interview will be on the family separation time <i>not</i> the reintegration process.

Suggested dates that I spend with Mith Samlanh

Date	Activity
TBC	Update on MS and social work situation in PNP (2 hours)
TBC	Interview MS social workers
TBC	Interview Families
TBC	Interview Gov social worker (s)

All the above are suggestions – so please let me know of any other thoughts/ideas you have and whether the suggested dates work for you. We can then finalize a schedule.

Any questions, thoughts or suggestions please email me at paul.j.farley@durham.ac.uk

Thanks so much for your participation - I know times are difficult and you are all very busy – I appreciate your help.

James Farley

'Keeping Families Together'

Family Preservation Policy & Programming in Cambodia: A Problem Structuring Approach

Research Information Sheet (Caregivers)

My name is James Farley and I am based at Durham University, UK. I am a social worker and PhD researcher and am working in partnership with '**XX local NGO**' to research the views of different people on how best to support families at risk of placing a child in an orphanage. The findings will help in developing and designing new policies and practices in this area.

The research is authorized under Article 2, Article 6 and Article 32 of the Phase IV (3PC) Memorandum of Understanding between MoSVY, UNICEF and Friends International.

I would like to invite you for an interview. I am particularly interested to hear the experiences and views of families.

Interviews will last about 90 minutes and will focus on your experiences and what was happening for you and your family at the time your child went to live in residential care. I would like to hear about what you thought were the main problems you were facing at that time, and your ideas about what would have helped you and your children. Hopefully hearing from you and other families can improve how families are helped in future. I understand that this might be a difficult thing for you to talk about - so please do not feel have to take part. It is up to you.

I do not speak Khmer very well, so a Cambodian research assistant will also be present. Their name is xxxxx.

You will be interviewed by myself and/or the research assistant and our discussion will be recorded and stored securely. Your interview will then be transcribed, and extracts may be

used in my PhD research and reports for both 3PC/Friends International and Durham University, UK. This written work may also include quotations from your interview.

When we meet, I will discuss with you if you wish to remain anonymous or if you are happy for your comments to be attributed to you and also answer any questions you may have before we begin the interview. You are free to withdraw from this research at any time up until 1 month after the interview and are also free to not answer any of the questions.

My contact email is: paul.j.farley@durham.ac.uk

Tel: +44 0 7395 327 779

Research Assistant's contact email is xxx@gmail.com

Tel: +855 xx xxx xxx

Appendix B: Research information and consent (caregivers)



'Keeping Families Together'

Family Preservation Policy & Programming in Cambodia: A Problem Structuring Approach

Interview Consent Form.

I would be grateful if you would complete this consent form prior to being interviewed, thank you.

- I have read and understood the information sheet. YES/NO
- I agree to being interviewed and it being audio recorded. YES/NO
- I understand that the recording will be stored securely and will not be used for any other purposes without my consent. YES/NO
- I am willing for the interview to be transcribed and extracts used in this research and in other materials such as reports and teaching. YES/NO
- I wish to remain anonymous (that is, no views or comments will be attributed directly to me by name or job role) YES/NO.
- If 'no' to the above, I am happy for views or comments to be attributed directly to me by name YES/NO, or job role YES/NO
- I would like my name to be listed as a contributor to this research in the acknowledgments section of the PhD thesis or any other publications. YES/NO

Name

Signature

Date

Address.....

.....

.....

.....

Contact number

E mail.....

‘Keeping Families Together’

Family Preservation Policy & Programming in Cambodia: A Problem Structuring Approach

Research Information Sheet (Social Workers)

My name is James Farley and I am based at Durham University, UK. I am a social worker and PhD researcher and am working in partnership with ‘**XX local NGO**’ to research the views of different people on how best to support families at risk of placing a child in an orphanage. The findings will help in developing and designing new policies and practices in this area.

This research is authorized under Article 2, Article 6 and Article 32 of the Phase IV (3PC) Memorandum of Understanding between MoSVY, UNICEF and Friends International.

Given the government’s plans to develop and improve support to children and families at risk of separation in Cambodia I would like to invite you for an interview. I am particularly interested to hear your experiences in this area.

Interviews will last about 90 minutes and will focus on your experience of working with families who placed a child in residential care, and a discussion of your views on the drivers of family separation and the various approaches available to social workers when supporting families at risk of separating (e.g. income generating activities, school support, home visits).

I do not speak Khmer very well, so a Cambodian research assistant will also be present. Their name is xxxxx.

You will be interviewed by myself and our discussion will be recorded and stored securely. Your interview will then be transcribed, and extracts may be used to inform my PhD research and reports for both 3PC/Friends International and Durham University, UK. This written work may also include quotations from your interview.

When we meet, I will discuss with you if you wish to remain anonymous or if you are happy for your comments to be attributed to you and also answer any questions you may have before we begin the interview. Taking part in the interview is completely voluntary and you are free to withdraw from this process at any time up until 1 months after the interview and are also free to refuse to answer any of the questions.

My contact email is: paul.j.farley@durham.ac.uk

Tel: +44 0 7395 327 779

Xxxx's contact email is xxx@gmail.com

Tel: +855 xx xxx xxx

Appendix C: Research information and consent (social workers)



‘Keeping Families Together’

Family Preservation Policy & Programming in Cambodia: A Problem Structuring Approach

Interview Consent Form.

I would be grateful if you would complete this consent form prior to being interviewed, thank you.

- I have read and understood the information sheet. YES/NO
- I agree to being interviewed and it being audio recorded. YES/NO
- I understand that the recording will be stored securely and will not be used for any other purposes without my consent. YES/NO
- I am willing for the interview to be transcribed and extracts used in this research and in other materials such as reports and teaching. YES/NO
- I wish to remain anonymous (that is, no views or comments will be attributed directly to me by name or job role) YES/NO.
- If ‘no’ to the above, I am happy for views or comments to be attributed directly to me by name YES/NO, or job role YES/NO

Name

Signature.....

Date.....

Address.....

.....

.....

Contact number.....

E mail.....

Appendix D: Semi-structured interview guide (caregivers)

RECONSTRUCTING INTERPRETIVE FRAMING OF FAMILY SEPARATION & RCI PLACEMENT (PARENTS/CAREGIVERS)

Demographic/warm up

Age

Household composition

No. of children in household

I want to talk about what happened back at the time that your son/daughter went to stay at the orphanage. I would like to know about what the situation was for everyone in the family back then. Tell me in your own words the whole story of what was happening for you all at that time - take it from the beginning

Family composition/history	PARENTING CAPACITY	POVERTY
Location/Home province Income	Substance misuse? Violence? Poor physical/mental health?	Enough food? Own land/house? Debt? Child working? Impact on education? Shocks?
EDUCATION/SCHOOL Attendance? Attainment? Costs? Location? Quality? Issues acute or chronic?	RCI MARKET/TRAFFICKING Which RCI? Why that RCI? Status of RCI? Registered, FBO, etc. Initial contact/existing ties to RCI? Contact arrangements? Support from RCI to family?	SERVICES Family in receipt of any services? (IGA, school support, SW visits)
FAMILY/COMMUNITY BELIEFS		
Role of village chief/local authorities in placement? Family's feelings about separation/placement? Parents expectations of placement? Were expectations fulfilled?	FAMILY CRISIS Death, illness, divorce, re-marriage Was community/extended family support available?	ABUSE Known history/ incidents of violence or sexual abuse?
MIGRATION Pattern? Impact on the child?	CWD/Additional Needs Condition? Any social/material formal/informal support available?	Proximal point of family separation/ RCI placement

Case Study Frame Reconstruction

- What was the biggest reason you wanted/agreed to your son/daughter to stay at the RCI? Whose idea was it?
- How did you both feel about it? How did your son/daughter feel about it? What did you hope for/want from the RCI placement? What things were you worried about?
- Rank the things that led to your son/daughter going to the RCI in order of importance.

Explain why you have ordered them that way? Can you think of anything that could have been done to solve those problems? Who could have done that? How? What would have been good about that?

- What kinds of help are available to families round here? Village Chief? Pagoda? CCWC? NGOs? What is on offer?
- What do you think would be most helpful to be on offer?
- Was anyone trying to help you or your son/daughter at that time? Who? What were they doing? Did it work/help? Why/why not?
- In an ideal world what would you have liked to have happened back then? What could have been done to help?
- How could that have been practically done? What would have been good about that? Why was that not possible? What would need to have been done to make it possible?
- What do you think would have been the best outcome for your family back then? Why do you say that? How could that have been concretely achieved? What would you have needed (detail)? Who could have helped?

FAMILY SUPPORT

- Have you ever received any help/support/money/material to help with your children's school? What type of support was it? What worked well/not so well? What could have made it better?
- Have you ever had any help from an NGO with setting up a small business or increasing your income? Tell me about that. What worked well/not so well? What could be done to improve it?
- Have you ever received regular cash payments from an NGO? If yes, how was it arranged? What do you think of the idea of cash payments? Why do you say that?
- What about creche, day care and respite care? Do you have any experiences of those types of services? What worked well/not so well? How could they be best organized round here?
- Do you receive visits from the social worker now? From whom? How do you feel about those visits? Why do you say that?
- How often do you think families at risk of separation should be visited by social workers? Why do you say that? Who do you think should visit (e.g. NGO/DoSVY/CCWC)? Why do you say that? What is the purpose of social work visits? What do you want NGO or DoSVY social workers to 'do' when they visit?
- Rank these types of family support in order of how helpful they are for families that are struggling. Explain your reasons.
- Is there anything else related to the things we have been speaking about that you'd like to say?

WRAPPING UP

- Can you tell me about when your child returned to live at home? What changed to make the return of your child possible/desirable? What is different about your situation now compared to when your child went to the RC?
- What have you found to be the biggest help in having your child return home? How is that support organized? What else would have helped? How could that have been organized?
- What are the bad things about children living away from their families in an RC? And what are some of the benefits? Do you think it is always bad for a child to live away from their family?

- Do you know of different RCIs that people can send their children to? How do they differ? Do you know of other people placing children in RCI in this community? Can you tell us about that?
- Many parents think about sending their children to an RCI as hope think their children will get a better education and have better future opportunities that way. What is your view on that? What makes you say that? Do you have any examples to support your view?
- What do you think is more important - for a child to live with their family or to get a good education? Does the age of a child matter when thinking about this? Would you/have you considered sending your own children to an RCI in order to benefit from better educational opportunities? Can you tell me a bit more about that? Which RCI? Why? Ultimate decision?

Appendix E: Semi-structured interview guide (Social workers)

RECONSTRUCTING INTERPRETIVE FRAMING OF FAMILY SEPARATION & RCI PLACEMENT (SOCIAL WORKERS)

Demographic/Warm up

Gender? NGO or Gov. SW? Name of Team? Job title? How long working as SW?

What are your most common work activities with families?

Which of those tasks are the most difficult? Why? Explain reasons for those difficulties. What could be done to reduce those difficulties?

What would you say is the purpose or main aim of the organisation you work for?

And what is your personal aim as a social worker? What is it that you are fundamentally trying to 'do' in your work? What does the phrase 'keeping families together' mean to you? What should be done to keep families together? How would that practically work (detail)?

Tell me about the current situation of family separation and RCI placement in Cambodia? How has it changed in the past 10 years? How has it changed in this area? Why has it changed?

Case Studies

Let's talk in detail about 2 or 3 family separation cases that you have been involved with as a social worker. I want to talk about what happened that led to the child going into residential care. Take it from the beginning - when did you first meet or get to hear of the family?

Family composition/history Location/Home province Income	PARENTING CAPACITY Substance misuse? Violence? Poor physical/mental health?	POVERTY Enough food? Own land/house? Debt? Child working? Impact on education? Shocks?
EDUCATION/SCHOOL Attendance? Attainment? Costs? Location? Quality? Issues acute or chronic?	RCI MARKET/TRAFFICKING Which RCI? Why that RCI? Status of RCI? Registered, FBO, etc. Initial contact/existing ties to RCI? Contact arrangements? Support from RCI to family?	SERVICES Family in receipt of any services? (IGA, school support, SW visits)
FAMILY/COMMUNITY BELIEFS Role of village chief/local authorities in placement? Family's feelings about separation/placement? Parents expectations of placement? Were expectations fulfilled?	FAMILY CRISIS Death, illness, divorce, re-marriage Was community/extended family support available?	ABUSE Known history/ incidents of violence or sexual abuse?
MIGRATION Pattern? Impact on the child?	CWD/Additional Needs Condition? Any social/material formal/informal support available?	Proximal point of family separation/RC (placement)

CASE STUDY FRAME RECONSTRUCTION

- Rank the problems that led to family separation in this case (PD). Explain why have you ordered them that way?
- What did you (and/or colleagues) concretely do to try and help? Why did you do that, what was your thinking/plan? (BT) Did it work/help? Why/why not? (BT)
- Who else did you talk to/involve in this case? Which other staff/teams in your org? Who outside of your org?
- Why those people? How useful were they? Why do you think that was? (BM)
- In an ideal world what would you have liked to have done? (UP) What would have been good about that approach? Why was that not possible? (SS) What would need to have been done to make it possible? (SS/BM)
- What do you think the family saw as the main problem in their situation?
- What do you think would have been the best outcome for this family? (UP) Why do you think that? (BT) How could that have been concretely achieved? (SS) What would you have needed (detail)? (SS/BT) Who could have helped? (SS/BT)

APPROACHES TO FAMILY SUPPORT

- How often do you think families at risk of separation should be visited by social workers? Why do you say that?
- What is the purpose of the follow up? How often are you able to visit such families in reality? Why is that? What concrete steps could be taken to improve that?
- Tell me about your experience of providing school support to families? What type of support was it? What worked well/not so well? What could be done to improve it?
- What about creche, day care and respite care? Do you have any experiences of those types of services? What worked well/not so well? How should they be organized?
- Tell me about your experiences of using IGA with families? What worked well/not so well? What could be done to make IGA support more effective?
- How about giving cash or material directly to families? What have been your experiences of this approach to helping? Is it a good approach? Why do you say that?
- So, I see 3 main approaches to family support - Household Economic Strengthening (IGA & CCTs), Early Intervention (community work, prevention) & crisis intervention (follow up). Usually these approaches overlap, , but in your experience do any of them stand out as more or less effective than the others? Why do you say that? Can you give me a supporting example? Why exactly do you think that did/didn't work? Rank these family support approaches in order of how important they are in preventing family separation.

WRAPPING UP

- What are the gaps you have in your work supporting families? What would you like more of (staff, time, money for families, skills, your personal capacity, better joint working with other agencies (e.g. schools))? How would you concretely fill those gaps (details)? How would that practically help you to help children and families?
- Spending time With beneficiaries can be draining and depressing. How would you describe the personal/emotional side of your work with families? _How does it

affect you? Do you have any ideas for how your organisation could make that better for social workers?

- In your experience is there a particular age at which it is more common for children to go to RCI? Why is that? What kind of specific family support/social work activities might help at that point?
- Studies suggest that parents send (or think about sending) their children to an RCI as they think their children will get a better education and have better future opportunities that way. What is your personal view on that? What makes you say that? Do you have any examples to support your view?

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