

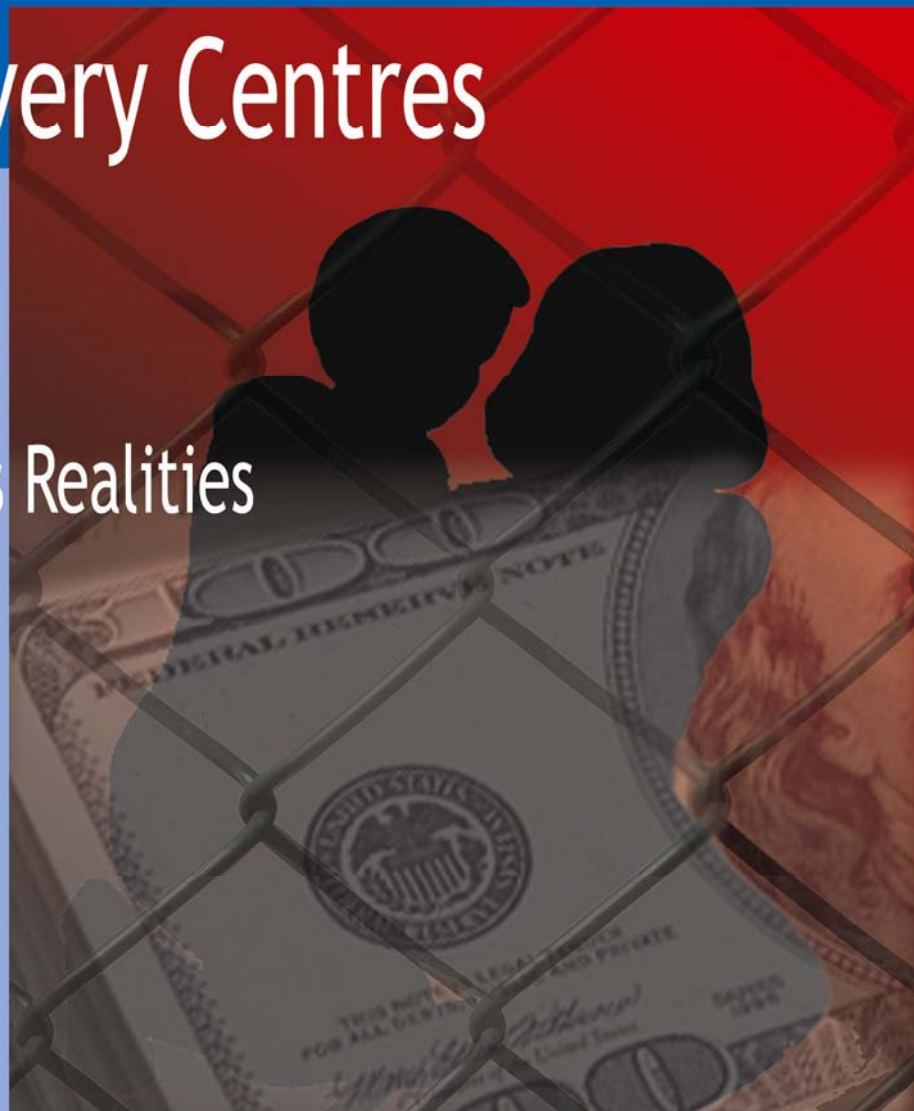


COSECAM

Child Recovery Centres

Intentions versus Realities

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Report No: 011E

Project funded by

Global Ministries Netherlands (KIA)

Welfare Stamps Foundation Netherlands (SKN)

Canadian International Development Agency (CIDA)

CHILD RECOVERY CENTRES Intentions versus Realities

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Introduction

Hundreds of children and young women in Cambodia require a temporarily shelter because they were trafficked, suffered from exploitation or their rights were violated in other ways. A number of Shelters, better called Child Recovery Centres, provide the protection and support that the children and young women need till the time that they are able to return to their family or are able to secure their own livelihood. A coalition of local organisations, COSECAM working on the problems of trafficking, exploitation and abuse of children organised an assessment of shelters that target abused children and young women during years 2002 and 2003². This paper will, on the basis of this assessment and other sources, try to describe the conditions at the shelters and how child recovery centres operate, what their capacity is, what their strengths and weaknesses are and which constraints they encounter. We will also discuss the policies that are at the base of their operation and the principles that (should) guide their operation.

Abused, Neglected or Unskilled Clients

Classification of clients is only useful if it is used to improve the care and services to them. Clients with a different history will need different kinds and types of care and services. This need should thus be a base for classification of centre clients. Children who are sexually abused in a commercial context, who are trafficked and forced to work as prostitute need special psychosocial services. Children who are raped although not trafficked need similar psychosocial services addressing the sexual trauma. The similarity in these cases is the sexual abuse and ironically the resulting loss of respect by the society. The special services and counselling for this kind of abuse is thus a base for classification.

Children and young women who are exploited and abused, for example as domestic servant, beggar or in sweatshops need social services as well but of a different kind. The common denominator in their cases is the labour exploitation. Another group is formed by children and women who are victim of domestic violence. Also these clients need social services and counselling but again of a different kind.

What they all share is the need for counselling to overcome their emotional trauma. We suggest a classification of one main type of clients who need psychosocial counselling, with as sub-types clients who are sexually abused, victims of domestic violence or abused as labourers. An appropriate label for these clients would be abused children in need of psychosocial counselling.

Another type of clients are children whose history is not abuse but neglect. This are street children, homeless children because their parents are labelled to have died from AIDS, children with HIV/AIDS or those who are disabled. Although many of these children also

¹ NGO Coalition to Address Sexual Exploitation of Children in Cambodia (COSECAM)

² Capacity Assessment of local Organisations (CLO), in 2002-3 sponsored by Dutch Embassy Bangkok.

have emotional traumas they will need psychosocial counselling of a different nature and intensity than required for abused children. Among this group are children who need specialised medical or physical care. We call this group neglected children in need of care.

A third type of children often found in child recovery centres are the children 'at risk'. One group are teenage girls working in professions that makes them very vulnerable to sexual abuse. The beer girls and dance-girls are the best known, but it are also girls working in bars, karaoke, massage parlours, restaurants and hotels. However, not many girls of this type are found in child recovery centres. A second type of 'at risk' children are 15 to 18 year old girls with a low education and from very poor families who might be at risk of being trafficked and exploited because they (want to) leave home in search of work. Some centres regard such 'at risk' children as an easy assessable source *to fill up* the residency if they do not have 'acquired' the planned number of clients of the intended target groups. A relatively high proportion of clients of this type are resident in quite a number of centres. These clients do not necessarily need psychosocial counselling or even social services, but they are in need of skill training. The idea is that through learning a good skill they will abandon their risky job. Therefore, we call this category children unskilled clients in need of vocational training.

Unfortunately, centres tend to classify their clients not in terms of need and services, but in terms of what target group is fashionable in development circles at the time. That is the reason why we find often 'trafficked children' among the list despite the rather different groups of which this category is made up: trafficked for labour, trafficked for sexual exploitation, trafficked for begging. 'Abused children' is another label used for sponsors' benefit but which not indicate the care and services these children need. Many centres share another habit that not seemed based upon the benefit of their clients. There are few centres which shelter young boys, while most centres host exclusively females. Centres tend to have a population of only women and girls, or only of boys. We have not found any centre that sheltered both boys and girls who were not related at the time of our visit³. Does this mean that there are only few boy-children in need of the services of recovery centres? The fact that a number of NGOs especially target boys seems to indicate that not the number but their gender is reason to differentiate. Staff from many of the visited centres explained that it would not be culturally proper to shelter teenage boys and girls who are no siblings in the same institution. Indeed, in three centres we found teenage girls and boys but they were part of the family sheltered. These families were homeless, in process of divorce or escaped from domestic violence. However, we got the impression that the 'culturally appropriateness' argument was not the main reason, but that practical problems to separate the teenagers and/or sponsor related factors were the real reason why teenage boys were excluded from the residence.

Appropriate Care

Abused, neglected or unskilled children need good care although of a different kind and/or type. The child recovery centres try to replace the parents and a number of NGOs have developed procedures that assure the appropriate care. At a monthly meeting platform centre staff have discussed issues of care since May 2002 and reached consensus about

³ 'Local' child recovery centres that sheltered abused or neglected children were visited at least twice during the period May 2002 till June 2003. Some centres under international management or run by international NGOs were also visited. However, it might be that some centres established after January 2002 or not formally known with the Ministry of Social Affairs or not registered with the Ministry of Interior escaped our attention. Centres that focus their assistance on street children were not visited.

what should be regarded appropriate care⁴. Their view was used as input for a national workshop on Child-centre Management and Minimum Standards, organised by COSECAM on 17 March 2003. The report on this workshop presents the national consensus on this issue⁵. Ironically, although attended by participants from virtually every child recovery centre in the country not one of the represented centres would pass a test on basis of the proposed Minimum Standards. Clearly centres have the intention to observe the standards they themselves developed but they have to go a long way before this becomes reality.

In fact, almost all centres rely on the experience and sentiments of their staff when dealing with issues of care. Our own visits were not designed to detect inappropriate care but the results of an ADHOC survey during 2003 among a small number of institutions gives cause for some concern⁶. This concern is not directly about issues of abuse by centre staff although this has happened in the past because this is fortunately rather rare and when detected measures were taken⁷. The concern in ADHOC's paper is about policies of NGOs in regard of their role, the quality of the care and about proper attitudes and practices of the centre staff. Also a group of 17 girls from 6 shelters were not content with some practices and attitudes⁸. Some or more shelter staff seem to regard girls who were forced to work as prostitutes as lesser citizens. The girls complained that they had to do the lowliest domestic chores while other children were given opportunities to learn or relax. The ADHOC survey points to a practice that also the girls mentioned, namely locking up their clients. The latter might be both a policy of the particular NGO and a result of a certain attitude of the staff in charge of the care. The policy is designed to avoid that girls run away, while the staff's attitude is a matter of perception that the client will not obey. Interesting too is that a number of centre staff do not want children who are sexually abused to talk about their former experiences - they said this would open the wound. When asked how they know this most staff answered that this is common knowledge. In fact their attitude is based upon a feeling that what happened to the children is shameful, and that the children are to be blamed! Or that at least the rest of the population would regard these children shameful. However, the 17 girls were very straight on this matter - they want to talk about what happened to them. Another worrisome practice that is fortunately not widespread is isolating clients from their relatives. It is for this reason that the Minimum Standards for Residential Care includes arrangements to make contact with relatives mandatory, unless the client doesn't want to meet them⁵.

The issue of appropriate care is not settled with the development of minimum standards or the employment of qualified staff. Centres need to have good policies that are based on the interests of their clients. This interest requires that centres co-operate closely together and avoid territorial tendencies. Unfortunately the client's interests are not always given precedence over the interests of the organisations. Survival of the organisation, getting funding, and personal interests of the staff - having or keeping a job - are strong incentives to overlook the real interests of the clients if these interests conflict with the survival or job interests.

⁴ The platform is hosted by COSECAM but the agenda is independently set by the participants. See also Draft Minimum Standards for Shelters, 2003 COSECAM report nr. 003E

⁵ Minimum Standards for Residential Care, 2003 COSECAM report nr. 005

⁶ draft Paper on Shelters in Phnom Penh Area, Women Section September 2003, ADHOC.

⁷ Some cases are reported in the media about directors who were accused of improper behaviour and who consequently were removed from their position.

⁸ Sold like Chickens, 2003 COSECAM report nr. 006.

Values and Morals

All centres try to instil good attitudes and behaviour in their clients. But it seems that this often turns into re-education. In this sense not only curricula about morals and values speak for itself but also progress reports of a number of NGOs illustrate their opinion that children should learn 'proper' values and behaviour⁹. This implies that the current values and behaviour of the clients are not proper. Indeed, during our visits we often got the impression that centre staff assumes that being a '*srey kootch*' (broken woman) automatically means that the former child sex-worker was not properly raised by their parents. In our own contacts with such clients we never found evidence that their values and behaviour significantly differed from that of other Cambodian children with a similar background. Of course, the children who used to live in a brothel tend to be more rebellious than children who stayed with their parents. They tend to be more street-wise and capable to achieve a higher pecking-order in their new surroundings. However, this has little to do with the way they were raised. Therefore, in most cases there is no reason for re-education. Though centres that assume parental duties should continue to raise kids conform the value systems of their society. Providing lessons about what is acceptable behaviour and good manners in the society they will one day return to are in line with this duty, as long as such lessons not become indoctrination.

All centres base their education on Buddhist principles except some that are operated by Christian charities. The latter teach morals and values that are not those of the vast majority of the population. One might wonder how this effects the reintegration of the client into Cambodian society. We support strongly the opinion expressed by the commission working on a regulatory framework for child centres and alternative care that children in residential care should be raised conform the value system they were raised in¹⁰. This means that for example a Cham child should learn morals and values based upon Islamic principles, while a child raised as a Christian should learn Christian values. Children should not be put in a position where s/he has to make a choice for another value system. Doing so is in direct violation of one of the main child rights. Although staff of a Christian oriented centre assured us that their clients have a choice not to attend devotions or prayers we doubt this because in the particular residential environment social group pressure means that a client in effect has little choice¹¹. However, this matter needs much attention only at non-Buddhist oriented childcare centres because in reality shelters receive very rarely children from any other value system than the Buddhist one¹².

Education

All centres provide literacy lessons and most often vocational training to their clients. This is a good measure, especially as many children did not have a chance to attend school, and learn to read and write or learn a professional skill. It becomes a concern when lessons are used as a means to indoctrinate the clients. For example, there is one centre whose teachings are not only based upon religious principles, but also directly linked to religion, but probably they are not the only ones. A reliable source reports about one centre that

⁹ See annual progress reports of HCC, CWCC, CCPCR and other centres.

¹⁰ Regulatory Framework Committee, consisting of representatives of Ministry of Social Affairs, Ministry of Justice, Unicef, IOM, COSECAM, Child Welfare Group and others. The Commission is recognised by the Ministry of Social Affairs as an advisory group in matters of residential and alternative childcare.

¹¹ Not yet released results from a Demand Factors Study on Commercial Sexual Exploitation of Children, Fieldworkers' Perspective, conducted by ECR-Cambodia.

¹² Statistical data about the client's religion is currently not available and most often not recorded by recovery centres. However, such data is important to assess if there is a need for non-Buddhist value education. It is only for this reason that COSECAM's database forms on survivors of commercial sexual exploitation includes a question about the religion of the client.

*'Five mornings a week, girls participate in devotions which include worship, Bible teaching, and prayer. In all of the components (vocational training, education, health, and counselling) scripture and Christian values are integrated into the lessons. For example, the vocational trainers use scripture to teach about work ethics, and the social workers and medical staff will pray for emotional and physical healing. In the evenings, the girls often ask the house mothers to lead them in worship and ask for prayers for their studies. In addition, the girls go to a local church every week and are slowly integrating into the life of the church'*¹³. Here it is clear that children do not have any choice because *'Christian values are integrated into'* the education itself. There is consensus among staff of child recovery centres that this kind of practises is not allowed if it concerns children raised in another religious tradition¹⁴. Besides, it is in direct violation of the Cambodian law that prohibits active proselytising.

Members of a committee working on alternative care mentioned situations where children were punished when they spoke their native language¹⁵. The reasons may be improper, like trying to convert children to another religion, or they may be of good intention, like immersion in a language program. Regardless the intention consensus among relevant NGOs is that such practices are wrong.

A number of centres have a policy of sending children of school age to public school. Not all centres agree with this practice, as they are afraid for negative impacts from kids and teachers at school. We think however that the reintegration process need to start at the moment that the child enters the centre - going to public school seems a good start. Of course, the centre need to take measures that the child will be and feel secured on the way to and at school. The Minimum Standards for Residential Care, introduced at MoSALVY's workshop on Alternative Childcare in October 2003, addresses this issue¹⁶.

The purpose of skill training is to enable the client to find a good job or to start with their own business. There is talk about using the skill training as a therapy - and it might often have such side effects but none of the centres visited demonstrated its use as a form of therapy. This is not unexpected in view of the current lack of properly trained social workers and counsellors. There are two centres that pride themselves using learning certain skills as a form of therapy as well as work related training but we did not get permission to observe the training 'in vitro' and we did not receive documentation that proved the therapeutic value. Although the issue remains important in this paper, we will discuss skill training only as a preparation for work and not discuss its therapeutic application.

Skill Training

Vocational skill training comes in many forms. A series of exchange visits by centre staff to each other's centres provides specific information about the skill training provided at certain centres¹⁷. They visited 13 centres, not only in Phnom Penh but including most child recovery centres located in the provinces. The general conclusion was that many centres offered the same kind of training, e.g. sewing, weaving and applied similar course

¹³ Children and Sexual Abuse and Exploitation, Children at Risk Guidelines: Volume 4, Miles and Stephenson, 2000, Tearfund (p. 53)

¹⁴ See minutes of discussions of the Shelter Group, a platform for child recovery centres meeting every 15th of the month to discuss issues of common concern (contact Mr. Um Rattana at COSECAM for info).

¹⁵ Regulatory Framework Committee, meeting in May 2003.

¹⁶ Minimum Standards for Residential Care, 2003 COSECAM report nr. 005

¹⁷ Exchange Visits to Child Rehabilitation Centres, 2003 COSECAM report nr. 004 (English and Khmer).

models, e.g. basic level while often working in shifts, e.g. mornings or afternoons (hence not whole working days). Training periods varied from 3 to 6 months. There is a tendency among centres to diversify their training and include agricultural skills, hair dressing, servicing meals or learn how to cook for restaurants in their training package. Some centres are quite advanced in this while others are still experimenting. However, even if centres offer various kinds of skill training their clients' choices are often limited due to late enrolment or limited places for some courses. As far as we could assess none of the centres offers a training that goes beyond the basic level. It would require a more specialised assessment by professionals to address the issue of quality and methodology of the training courses offered¹⁸. However, our assessment makes it possible to discuss some other aspects of the skill training on offer at child recovery centres.

A number of centres claim in their programs to do market research to identify the skills that are in demand. We know of at least two centres that apply this approach. One centre used to operate a vocational centre that catered to poor children, not only children that were victim of abuse. Although that centre functioned quite well the NGO had to close it down because of lack of funding¹⁹. Both centres used its market research results to define the packet of skill training courses on offer. However, we read in a 2003 progress report that less than 30% of the girls who received training are still applying their skills and receive sufficient financial income from it to survive²⁰. The report also indicates that a significant proportion of clients start their own business but with a very low success rate. Clients seeking employment succeed only for a relative small proportion in getting employment and manage to keep their jobs. The skill training offered by centres, although vocational seems predominantly to target prospective small entrepreneurs. Other centres visited, report similar or even lower levels of success in these terms²¹. They mention reasons like competition with existing small businesses, low quality of products, non-existent market demand and often a lack of business skills. Perhaps we touch here at the basic reason why the impact of the vocational training is so low. The clients belong in majority to the poorest category of the population (reason for them to search for work and become cheated or trafficked into prostitution) without much or no education or special skills. Not only are they vulnerable but they lack any connection to business circles or would have experience in doing business. Why thus assume that this group would have a good chance to succeed where others with more education and connections often fail? It is clear that recovery centres push for these entrepreneurial initiatives because there are few employment options. However, employment still seems a better option for many clients in the end, provided the vocational training is adapted to the skills and experience employers require.

Training for Employment

It is common knowledge and confirmed by the background dossiers on the clients that most of the 15 to 18 years of age girls admitted to the centres have a very low or no school education. Many cannot read or write when they are admitted. Almost none has any normal employment experience. No one has any business expertise. Despite these disadvantages,

¹⁸ The Exchange Visit program for year 2003-2004 includes trips based upon this approach. Trainers from a number of centres will visit a number of centres that pride them self for their vocational training program to learn about best practices and lesson's learned.

¹⁹ The centre in question is HCC who did operate a vocational centre in Prey Veng province during 2002. It was this centre that scored rather high in terms of training in the opinion of visiting staff from other centres (see COSECAM report nr. 004). HCC has received a grant from the Japanese Embassy to build a vocational centre near to Phnom Penh. They intent to offer a variety of courses to a variety of centre clients and unskilled children.

²⁰ HCC annual report 2002.

²¹ Database Child Recovery Centres, COSECAM.

the skill training offered by the centres is aimed at preparing the girls for the labour market or to start a small business. In some cases centres have agreements with factories or companies to accept clients after they have completed their training as apprentices. For example, the child recovery centre in Prey Nub, a district of Kampong Som is able to send girls to garment factories in the town. However, these factories have special demands and clients are not always skilled enough to be accepted. Besides, there are many girls who learned the same skills and they compete for jobs at these factories. Factories prefer to employ girls with previous employment experience, who know the drill and have the discipline to work regular long hours. The child recovery centre in Prey Nub does not apply these lessons in their vocational training courses. The clients learn basic sewing skills but not the operation of machines used in the factories. The clients work for four hours a day and spend the rest of the time on education and recreation. This is not the heavy-duty regime that is expected from factory girls.

Our point here is not to blame this particular centre. Many other centres even fail to make an agreement with such factories. The point is that both the skill training and the work discipline do not fit to the market demand. One might not agree with the demand put on factory girls but it is in contemporary Cambodia a fact of life. An alternative approach that seems more promising is to create employment opportunities especially for these clients. For example, AFESIP runs centres in Phnom Penh and Siem Reap and targets in particular abused girls. The NGO has started their own garment factory. It seems a proper response to the market situation provided their products find a market. It is likely that the skill training provided at the centre will comply with the demands of the factory because they belong both to the same organisation. Although we were not able to visit the factory and to discuss if and how other centres can benefit from the initiative we feel that the idea is sound²². Another point should be making a career plan for every client early on in the process of recovery. The career plan should be based upon the talents, desires, existing skills and experiences of the client. The plan should also be based on job opportunities in the area where the client will be reintegrated. Once the plan is made and accepted, it is clear what skills are needed for the new profession. The centre should then offer training in this skill or send the client to places where she will be trained in those skills. Some centres have started with such procedures but many will have to follow suit.

After the training, when the client has a job the agency in charge of the reintegration process (the sheltering NGO or it might be a specialised organisation) should not only follow-up to monitor progress but support actively the client with job counselling. One should realise that for most clients working in a factory, shop or hotel is a new and frightening experience. The client has not yet acquired the knowledge about what s/he should and not should do to keep the job. S/he has also not yet gained the discipline and perhaps skills needed to satisfy her superiors. Job counselling should be part of the reintegration process - at least during the first year - to support the client and iron out problems with the employer. Currently, we do not know of any professional job-counselling program. This is a professional speciality that might need to be introduced in the country²³.

²² We wanted to visit the AFESIP centres and factory to learn firsthand about this experiment and also to learn about other capacities of the NGO. A group of staff from various centres visited the Phnom Penh centre during the 2002 Exchange Visit program. They reported about several interesting developments and practices. For this reason, we planned to visit the Siem Reap and Phnom Penh centres in the framework of our ongoing capacity study to learn firsthand about these interesting initiatives. Unfortunately, the NGO discourages visits by outsiders and is in general not very co-operative with other organisations. We will try to include the NGO in our next research visit.

²³ COSECAM has commenced with a project funded by USAID through TAF to address the vocational training needs of clients of child recovery centres. Job counselling will be offered as part of the services.

Training for Business

Creating a market for products made by particular groups of people is an old and general problem in Cambodia. Some developmental organisations have found interesting solutions to beat the market. The NGO Goutte d'Eau located in Poipet provides shelter and care for teenage street boys, among these trafficked and abused children. The NGO initiated an income-generating project in the form of a drinking water factory where their clients are the apprentices. The boys work in the factory and deliver the water to neighbouring villages. The water is sold and the income is used to pay them a salary. The project is on the way to become self-sufficient. Another example of an initiative based upon market principles that might become one time sustainable is the pilot project from the international NGO ZOA Refugee Care in Poipet on the border with Thailand. They have discovered that local small entrepreneurs are training the workers they need. Not only do they this properly but it is also cheap and short. To create job skills no external trainers or learning institutes are required²⁴. The producers are all small entrepreneurs who used to belong to the poorest segment of their communities. These projects show potential to be replicated elsewhere. A number of child centres are also trying to create jobs for their clients²⁵. Other NGOs should use them as examples of how to deal with the problem of lack of job opportunities for their clients.

Some centres include business skills in their training program. However, we could not assess in how far this is an actual part of the training. The training curricula we have seen during our visits do rarely mention business skills but focus on the vocational skills. In addition, even where business skills are mentioned it remains a small part of the training. This is not consistent with the experiences of the NGOs that most trainees fail to set-up a sustainable business. As part of program appraisals we have assessed the causes for failure or success of a small number of clients who started a business²⁶. Although the appraisals were far from in-depth, we found easily five major factors for failure: 1. Lack of basic entrepreneurial talents and skills; 2. Not being part of a business network and/or lacking business connections; 3. Little market demand for the products offered for sale; 4. Fierce competition with well-established entrepreneurs. 5. Repayment of investment loan and interest burdens are too high.

It is thus clear that skill training alone will not assist many clients who want to start their own business. A first requirement for a successful enterprise is a demand for the product and access to a market. It is here where already many clients fail. Before even to start with a skill training for a client the centre should make sure that there is a demand for the product and that there is access to a market. Only when these requirements are met it makes sense to enrol a client at a skill training aimed at starting a business that will have a chance of success. We know that some centres make efforts to assess the market situation in areas where they work. We also know that most centres do not have the capacity to make these efforts a real success - the assessment is not easy and requires quite some marketing research skills besides intimate knowledge of local business conditions. We do not know of the existence of any centre that makes such efforts for every individual client. However, only if the market requirements are met for an individual client s/he has a chance on success.

²⁴ ZOA Refugee Care, Poipet project, research presentation December 2003 in Phnom Penh.

²⁵ The issue is creating new jobs, not replacing a worker with a client. Wathnapheap in Pursat province is an example of an agency that focuses on job creation for their clients.

²⁶ These appraisals were conducted among clients of NGOs receiving grants from SKN by ECR-Cambodia researchers.

Once a client has completed her training, she will need finances to start her business. If this is in the form of a loan, the loan burden should not lead to an early failure. The centre or agency providing the loan should realise that the business will not turn profit for some time, often not within the first year. Demanding repayment of capital and interest during this starting-up phase is detrimental to the success of the business. Further, the client who began a new business will need support in building her business connections. Without such connections, the business is generally doomed. All these factors should have been discussed and made part of a business plan that offers a reasonable chance of success prior to offer a client wanting to start business, vocational skill training. This is at the moment not a practice in any of the visited centres. We doubt if it is practice at any other child recovery centre.

Vocational Training School

A number of NGOs cater to the vocational training needs of their clients and girls or young women who hope that with a good skill they will get a job or succeed with a small business. Above we mentioned HCC's vocational school in Prey Veng and their new initiative nearby Phnom Penh. The Don Bosco Foundation established technical schools in several cities, the most recent one in Poipet. They intend to enrol children (boys and girls) who were trafficked, are homeless or in other ways disadvantaged. The centre in Prey Nub, Sihanouk Ville mentioned above runs also a sewing training school for girls from poor families. We know of other organisations that provide skill training to children, e.g. CSARO for child garbage-pickers. However, we do not know of other child recovery centres that offer vocational training in a school setting to non-clients.

In view of the required operational skills and resources the practice of every child recovery centre having their own version of vocational skill training for their clients is no longer effective enough. Joint ventures are the answer. Now many organisations are reluctant to abandon their established practices and give up their 'territory'. NGOs need to convince themselves that the interests of their clients are best served with such joint ventures.

Among the number of 'best practices' from other parts of the world that could offer a solution to the problem of providing the kind of skill training required by employers is the set-up of a special training school. Such school could employ skilled and experienced teachers in a variety of skills, and continuously adapt to new requirements of the industry. Such school could also arrange with the prospective employers that students would get experience as an apprentice while continuing their skill training. This would increase the change to get a job after the training has been completed. However, this is a solution for urban areas with a sufficient number of clients to enrol in the training program. It is not a solution for clients residing in centres in the rural countryside. Unless special measures are taken, such as relocating clients to the area where the vocational skill they desire to learn is on offer. We suggest to explore the options of creating in each urban centre a vocational school, or if similar schools exist exploring possibilities to adapt the system for clients of child recovery centres. The vocational school should preferably be a joint venture of a number of child recovery centres and should offer a number of skill training courses. The courses should be designed in consultation with prospective employers. Clients from centres located in the urban area might stay in their centre but will attend school during the daytime. In case a client desires to learn a job that is not on offer in the urban area where she is hosted but is in another area the recovery centre should make arrangements that the client will be referred to a centre in that particular area.

The interest, need and demands of the client should be the base for finding a shelter location and not the fact that a certain centre has 'rescued' the child.

Demand for Residential Care

In this paper we focus on child recovery centres - thus excluding long-term residential care or adult residents. Our discussion about a demand for more centres is thus limited to centres that provide shelter and care to abused or neglected children (see categories defined on page 1). The paper on shelters prepared by ADHOC states that '*it is a fact that there are not enough shelters to meet the demand*'²⁷. In the introduction of the paper, it is said that the aim was to examine the conditions at the shelters for victims of domestic violence, rape and trafficking (page 2). We therefore assume that it is meant that there is a demand for shelter for these groups. An inventory of centres with target groups including the three categories mentioned above made early 2003 found 12 organisations most with a boarding capacity for about 30 persons²⁸. In some centres clients stay for less than 6 months, in others they might stay up to two years as a policy²⁹. However, predominantly, clients stay for periods of maximum a half year³⁰. It is thus safe to say that the annual number of residents in centres is twice the number found at any given time. There is thus at least boarding capacity for $12 \times 30 \times 2 = 720$ clients annually. Further, there are some centres that are not included in this account increasing the boarding capacity in the country. We guest mate the national boarding capacity for survivors of child abuse between 750 to 850 persons per year. A recent reliable inventory about the actual numbers of prostitutes in the country measures around two thousand under-aged sex-workers. A large proportion of these under-aged prostitutes are working off a debt and most are not interested to stay in any recovery centre or learn another job, unless they get money to pay back the debt³¹. According to the report perhaps as many as 30% of the under-aged sex-workers would not be interested in being 'rescued'. Thus 70% of about two thousand or 1,400 children are forced to engage in commercial sexual activities, and might in majority be interested to leave the exploitative situation. Currently, there seems to be capacity enough in the country to absorb half of this group. However, rescue efforts are rarely very successful. It is thus not likely that annually more than 50% of the child prostitutes will be rescued. In fact, it seems that the proportion is much lower.

Although a proper estimate of residents belonging to the categories abused and neglected children and women cannot be made without access to data of all centres we have another way to establish if there is a real demand for more centres. AFESIP is reported to have had up to 200 girls and young women at their Phnom Penh centre at a given time and that this stretched their capacity to the extreme³². Also for CWCC, it is reported often to have clients beyond their normal capacity³³. Both these centres do not report to have clients that are not abused or neglected. However, most other centres do have relative high proportions of clients that not belong to the abused or neglected categories. Reports to a sponsor indicate that more than one-third of the population of child recovery centres consists of unskilled clients in need of vocational training³⁴. About ten centres are not

²⁷ Draft Paper on Shelters in the Phnom Penh Area, Women section ADHOC, September 2003, page 4.

²⁸ Sold like Chickens, 2003 COSECAM report nr. 006, Annex A.

²⁹ For example, staff from House of Hope informed us that it is their policy to board clients for a two-year period at least.

³⁰ Database Child Recovery Centres COSECAM.

³¹ Measuring ..., Steinfath, UNDP 2003.

³² Draft Paper on Shelters in the Phnom Penh Area, Women section ADHOC, September 2003, page 6

³³ Personal communication

³⁴ Confidential reports to SKN about 6 centres.

using more than 50% of their annual capacity, equal to about 300 clients. It seems thus that the excess of AFESIP and CWCC could be absorbed by these other recovery centres.

The problem seems to be a proper distribution of clients over the existing centres. Instead of creating more centres clients should be referred to centres that still have capacity. We know that arguments will be raised that some of these other centres do not provide the appropriate care or services. If indeed quality of care and services is a problem instead of creating more centres efforts should be made to improve the quality of such care and services in the existing centres. The country and survivors of abuse would not be served by more centres using-up much needed resources. To avoid misunderstanding, we are here talking about recovery centres for sexual or other kinds of abused children. There might be a need for other kinds of residential institutions or for other kinds of victims, for example for children orphaned because their parents died from AIDS while they are rejected by the traditional safety net for orphans.

Referral of Clients

Above it was mentioned that reputable organisations are hesitant to refer clients to other centres. In fact the problem of referral is often or a practical or a principal matter. The latter issue is under debate and will not easily be resolved. Are rights of children violated if they are prohibited to meet their relatives or kept behind closed gates when the agency fears that otherwise the client will be harmed? ADHOC decided that it is within their mandate to monitor the conditions of children at shelters to ascertain that child rights are not violated. Unfortunately, one of the centres did not agree that it is ADHOC's mandate to monitor their centre³⁵. Although we are of the opinion that every human rights monitoring agency has a mandate to investigate claims of violation, regardless if this by government or private agencies, the main question here is whose mandate is it to decide where victims in need of recovery will go and under what conditions care will be provided?

A group of concerned people met during summer 2002 to discuss this issue. This initiative was taken over by another group during fall of 2002 and led to the concept of a 'clearing house'³⁶. There was an understanding that a semi-government agency, SKK, part of the ministry of Social Affairs would take care of the referral of child victims of abuse to recovery centres or alternative forms of care. Although the agency is operational and NGOs, international organisations and relevant ministry agencies increasingly ask their involvement not everyone is co-operating. It might be time to set rules and make co-operation mandatory. Of course, such measure should be prepared carefully and every relevant organisation should be consulted about the rules and consequences for their own agency. Reaching consensus about this issue is much more preferable than enforcing a rule, but in the end, the welfare and wellbeing of the clients must take precedence.

Deciding on what conditions for clients' care and services are mandatory is not only a matter of practice or principle, but a matter of law. Cambodia is a democratic country and civil society organisations like citizens should be held to respect the rule of law. In a democratic nation rule of law results from consensus and consensus results from what the majority decides. The rules for the conditions under which recovery centres take care of (child) clients should thus be developed through a consensus process. The two workshops

³⁵ Draft Paper on Shelters in the Phnom Penh Area, Women section ADHOC, September 2003, page 2 and 7.

³⁶ The first debate was initiated by UNICEF and others during summer 2002. A second round of debates was organised by COSECAM end of 2002 and early 2003. The issue was again debated at a national workshop on 17 March 2003 (report no. 5 COSECAM).

on residential care (March and October 2003) and the commission drafting a legal framework based upon the outcomes of these workshops have set a trend for this process³⁷. This is a democratic process and every civil society organisation, regardless if they agree or not, should abide with what the majority has decided. It is thus a 'rule of law' that children rescued from abusive situations should be referred through MoSALVY's agency SKK to the most proper child recovery centre if an alternative solution is not feasible, e.g. relatives or foster family.

Effect of Rescue Efforts

A demand for centres is not the same as a need for such institutions. On the one hand one can look at alternatives for residential care, such as foster parents, on the other hand one should also look at the effect of rescuing victims. The issue of non-residential care goes far beyond the scope of this article. It suffices to say that where alternatives are available and practical they should take precedence over any residential solution. However, we have something to say about the effect of rescuing victims of commercial exploitation on the 'trade' and other children.

There are two kinds of child-prostitutes: those literally forced to work as a sex-worker and those coerced to be a prostitute. No Cambodian child sells her body voluntarily³⁸. The latter group are predominantly children whose parents have to pay off a debt and the daughter works to earn money through her sex-work. This is a situation that is most common among child prostitutes who originate from Vietnam³⁹. There is no documentation if this kind of working-off a debt is common among Khmer child-prostitutes - it might be but it is not likely. Only two girls of the 17 former child-prostitutes we interviewed knew in advance that they would become a sex-worker⁴⁰. A great majority was physically forced and they had no said whatsoever in the matter. Most of the from brothels rescued children who choose to stay in the shelters and learn for another way to earn a living belong to this category, while the indentured girls often escape and return to their brothel.

The effect of their rescue is different for these two groups in a sense that the coerced children might experience problems after their rescue that touches them personally. For example, anecdotes in the UNDP study (Steinfatt 2003) illustrate that if the rescued girl is not working-off the family debt it might be that her (younger) sister will be sent to replace her at the brothel. The rescue of children who are abducted or cheated into the trade will not have such effect.

However, the general effect of a rescue of children from commercial sexual exploitation is that there is a greater need for shelters. Organisations who pro-active arrange for rescue without taking adequate measures to shelter and take care of the children afterwards are not acting responsible⁴¹. The victims are not served with a rescue alone! Another effect of a rescue operation is that more girls will enter the trade. The brothel simply 'place an order'

³⁷ Workshop on Minimum Standards and Centre Management, 17 March 2003 (report 006 COSECAM) and Workshop on Residential Care, October 2003 (organised by Ministry of Social Affairs). Regulatory Framework Committee, consisting of representatives of Min of Social Affairs, Min of Justice, Unicef, IOM, COSECAM, Child Welfare Group and others.

³⁸ This may be the case in other countries, like Japan where high-school girls prostitute themselves for pocket money or Thailand where university students sell sex to pay for their education, but this is unheard of in Cambodia. The stigma of 'broken woman' prohibits any girl from voluntarily becoming a sex-worker. If they chose to do it, it is because they already lost their virginity (e.g. boyfriend or rape).

³⁹ See Measurement, Steinfatt, UNDP 2003.

⁴⁰ Sold like Chickens, Sandy Hudd, COSECAM 2003

⁴¹ We do not condemn situations whereby a victim or a customer who pities the child request assistance. What is in our view not appropriate are predetermined actions for rescue without prior arrangements for proper shelter and care.

to replace the rescued children⁴². Does this mean that we should not rescue children who want to leave the exploitative situation? Of course not! Nevertheless, it means that we should take into account what will happen if we arrange for a raid on a brothel. Those organisations that rescue children through raids or in some cases by paying a ransom to the brothel or pimp should be aware of what are the consequences of their actions. It needs a more comprehensive approach to tackle the problem and effectively reduce the number of children trafficked into the commercial sexual industry.

Conclusion

The sub-title of this article Intentions versus Realities was selected because it describes in three words the main problem in the area of child recovery centres. Except for the inevitable rotten apple all people providing care are well intended and offer services for the child victims of abuse and neglect as best as they can. Intentions are good but results often are wanting. What to say about the finding that a significant proportion of the rescued victims after the shelter period return to their former 'job'? Moreover, that more than half and perhaps as much as 75% of the young women who received vocational training do not find a job or fail with their business? What is the net benefit of the rescue for these young people? We have to consider this when designing programs and offer assistance. We have also to consider the effect of rescuing victims on other children. Some organisations take all this into account and weight the advantages for the rescued victims against the negative effect on others. However, most organisations do not have such a comprehensive approach. Unfortunately, a number of agencies are more motivated by their own existence than by the interests of the victims. Alternatively, in other cases they simply do not have the capacity to see the broad picture and do not realise the effect of their actions. In addition, a few agencies are driven by their own agenda's, getting media attention or aiming at donor grants or trying to proselyte.

Within the framework of COSECAM, a coalition of local NGOs addressing the issue of child abuse, the member organisations are working together to overcome these constraints and to make intentions into reality. This article is an effort to move one small step further in that direction.

Phnom Penh,
January 2004

⁴² See Sex-slaves in Asia, Louise Brown, 2000