

Acknowledgements

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RCCI Residential Child Care Institutions

l'IBESR (l'Institut Du Bien-Etre Social Et De Recherches),

The following is an update

The Government of Haiti's Child Welfare Service. l'IBESR (l'Institut Du Bien-Etre Social Et De Recherches), was founded in 1958 as part of the Ministry of Work and Social Affairs (Ministère des Affaires Sociales et du Travail). It has the specific mandate of "responding to the many and varied social afflictions that plague disadvantaged sectors of the Haitian population" and is especially focused on vulnerable women, prostitution, unemployed youth, the physically disabled and, most important of all with respect to the present study, "children in difficult circumstances."

Any issue, organization, or social situation that touches on the lives of Haitian children is, by implication, of interest to IBESR. The mandate to oversee the welfare of Haitian children extends to Residential Child Care Institution (RCCI), the subject of the present study. Within this framework l'IBESR commissioned the present investigation of Residential Child Care Centers. The objective is to develop profiles of the institutions with respect to staff and infrastructure, the individuals and organizations that run the institutions, the families whose children live in the institutions and not least of all, the children themselves.

Review of the Literature

Executive Summary

- 1) Residential Child Care Institutions (RCCIs) are hospices where children live 24 hours per day, 7 days per week. They include boarding schools, orphanages for parentless or abandoned children, group homes for disabled children, therapeutic rehabilitation centers for addicts and psychologically troubled youth, and detention centers for delinquents. The definition is sometimes limited to a residence housing 30 or more children.
- 2) L'IBESR 2012 study of RCCIs in Haiti identified 723 institutions, over 80% of which were defined as "orphelinats." The remainder was crèches, institutions specifically for disabled children, and those identified as serving street children including the recently inaugurated government's 400 bed Welcome Center at Delmas 3. We also know that 3 institutions exist in Haiti specifically for youthful delinquents.
- 3) To understand RCCIs in Haiti, it helps to know that prior to the 19th century abandoned, neglected and delinquent children in contemporary developed countries were frequently apprenticed to craftsmen and wealthier households as domestic servants. Residential Child Care Centers only became a significant feature of Western society in the 18th and 19th centuries. They came about as a reaction to an explosion in the number of street children, a process linked to urbanization and a decline in dependency on labor intensive craft production and agricultural strategies. ⁱ
- 4) Since WWII, evolving official and scholarly interpretations of the impact of RCCIs on child growth and developed has been driven by the division of value systems. On the one side was the educated liberal, largely secular movement. They also were associated with increasing tolerance of alternative life styles, single motherhood and same sex marriage and parenthood. On the other side were the conservative social values typical of the Catholic Church and traditional protestant denominations. The divide between the two value systems crystalized in the debate over abortion. In the late 1960s and throughout the 1970s a series of laws legalized abortion in most developing countries. In the US Roe vs Wade decision was a catalyst in bringing them together the formation of organizations such as the 1976 Moral Majority and the Family Movement. The evangelicals US citizens who belonged to this movement have been most responsible for the recent emergence tens of thousands of RCCIs in developing countries, not least of all those in Haiti. The extent of their power and influence cannot be understated. As a politically active block of voters, they are credited with the success of the Reagan and Bush presidencies in the United States.

- 5) In developed countries adoption was a focal point in the ensuing value struggle. Prior to the legalization of abortion was an era of adoption known as “baby scoop” where “unwed mothers homes” linked to adoption agencies pressured young mothers to relinquish custody of their newborns for adoption into “whole families,” most often middle and upper class Christians. The US, Britain, Spain, Canada, France, Australia and Argentina all had their own versions of baby scoop eras. It occurred within these countries rather than across international border and it later became associated with unethical practices of lying to mothers, closed abortion and falsification of paperwork. With the legalization of abortion, liberalization of reproductive rights, tolerance of alternative marriage and single motherhood, open adoption became the norm, women were significantly less inclined to give up their babies. The era was been remembered as oppressive and government officials in most of the developed countries where it occurred have recently issued public apologies for their complicity. But more importantly for the present research is the impact it had on developing countries and the eventual emergence of RCCIs
- 6) One consequence of the end of the baby scoop era and open adoption was that domestic adoption plummeted. There was a corresponding increase in demand for babies from overseas. Paraguay, Brazil, Guatemala, Nepal, Colombia, Vietnam, Cambodia, and many former Eastern Block countries all became significant sources of adoptees. With them came the first widespread appearance of RCCIs in these countries. Although originally linked to international adoption they would become sustainable orphan tourism and ### even after international adoption was restricted in these countries.
- 7) The impact on developing countries of what some have construed as developed world battle of values systems fought carried to developing world battle field cannot be gainsaid: The massive emergence of secular NGOs endeavoring to alleviate world poverty, unfair government practices, abuse, and environmental degradation has been termed the ‘boom in civil society’ (SustainAbility2003:2), the rise of the “fifth estate” (Eizenstat 2004), a social change equated in impact with the rise of the nation State (Salamon et al. 2003:6-7). In the first decade of the millennium there were an estimated 9 million NGO workers and ten million NGOs annually spending 1.1 trillion dollars. Many are secular. Buried in those figures are groups like WANGO, The World Association of United Nations Non Government Organizations, with core of religious leader that tried to present itself to the United Nations as an umbrella organization for all NGOs, what some scholars interpreted as an attempt to hijack the international civil sector. Even more importantly for the issue of adoption and RCCIs is that embedded in organizations such as WANGO were evangelical alliances such as the 16 million-member Southern Baptist Convention, a US religious order second in size only to the Catholic Church. In the wake of Roe vs. Wade they became champions of what Kathryn Joyce calls the “evangelical contagious call to adopt,” periodically asking members to “prayerfully consider whether or not God was calling them to adopt.” There was also the Christian Alliance for Orphans, a pro-adoption coalition of eighty US-based Christian ministries with 6,300 radio facilities in 164

countries speaking 15 languages, reaching a daily listening audience of 220 million people. These organizations have, in a very big way, been responsible for such transformations as the protestant population in Brazil going from 5% protestant in 1970 to 22% in 2010. Guatemala went from less than 10% to estimates as high as 40% over the same period of time. With the growth in the number of protestants came the concomitant emergence of thousands orphanages in impoverished countries such as Guatemala, Ethiopia, and Haiti.

- 8) It merits emphasizing that prior to the 1980s most developing countries outside of the Eastern Block had only a few state run institutions, reform schools, boarding schools, and a smattering of Catholic orphanages. In this way they resembled pre 19th century developed countries in terms of RCCIs.
- 9) Similar to the baby scoop era, high profits that came with adoption services were ripe ingredients for unscrupulous business practices. With even weaker government regulatory agencies and impoverished officials inclined to accept bribes, it was not long before news of a rash scandals were coming out of developing countries targeted as hospitable to international adoption. A minority of adoption agencies and child recruiters participated in cajoling, tricking, misleading, and outright lying to parents in efforts to gain custody of their children. Journalists uncovered significant wrongdoing associated with international adoption. In Guatemala there were credible reports of babies stolen and suspicion that soldiers even killed parents and sold their babies. In more than one country journalists were intimidated. With the support of UNICEF and through the Hague Adoption Convention, over the past decade governments in these countries have imposed tighter controls resulting in restricted international adoption and a decline in frequency of more outrageous international adoption scandals.
- 10) It is at this juncture that we see an evolution in developing world RCCIs. While most residential care centers appear to have originated in association with adoption, restrictions on international adoption have been succeeded, not by a reduction in the number of RCCIs in developing countries, but rather an explosion in number. Cambodia is an example. After a series of high profile scandals Cambodia restricted international adoption. In 2006 the US and Britain suspended adoptions from Cambodia. Yet, UNICEF found that that from 2005 and 2010 the country experience a 75 per cent increase in the number of residential care facilities, (hosting 11,945 children in 2010). The financial basis for the institutions has been overseas sponsorship humanitarian tourism
- 11) The ideological rationale and substance for donor drives on behalf of both evangelicals, traditional faith based aid organizations as well as the non-faith based humanitarian sector is disease, hunger, poverty, illiteracy, and environmental devastation rampant in the developing world. But the institutionalization of children is more specifically underwritten, in an ideological sense, by the portrayal of equally rampant child abuse, violence, and domestic slavery. Captured in slogans such as “143 million,” the conviction widespread

among evangelicals that there are at least 143 million orphans in the world who are desperately in need of a family, these are misleading and highly questionable figures that scholars have assailed but that a litany of evangelical books—out numbering 10 to 1 non-evangelical literature on orphans—reaffirm. The books peppered with stories of infanticide, abandonment and neglect among third world mothers. While generally against the institutionalization of children, child protection agencies such as UNICEF and Save the Children have lent credibility to the RCCI claims by overemphasizing issues such as child slavery, and defining “orphans” as children who have lost or been abandoned by only one parent

- 12) The best place to begin in understanding the impact of the developed world value campaigns on people in poor countries—and hence the emergence and role of RCCIs-- is by understanding that among people dependent on pre-industrial livelihood strategies the notion of an abandoned child typically does not exist. Parentless or abandoned children are cared for by kin, friends, or neighbors. Grandparents often assumed the role that middle class Western kinships and value systems assign exclusively to mother and father. Even the primacy of the nuclear family is challenged by 4 % of the world’s societies who practice avunculocality (child residence with mothers-bothers). Informal adoption and fosterage occur in many preindustrial societies at rates exceeding 50% of all children.
- 13) The value of child labor—what Lindsay argues is criminalized in UN Charters-- is also the basis for much of the child exchange described above. The importance of child labor in non-industrial agricultural, pastoral and fishing societies articulates with semi-formal patron-client relationships in which children is everywhere apparent. They are also significant currency and link among households that must share labor and seek gender parity if they are to be productive and their members survive.
- 14) With modernization, rapid urbanization, and the importance of education as a means of social mobility, impoverished families use fosterage as a means of extending their own subsistence oriented networks and allowing children to obtain educations. This was a prevailing pattern in pre-20th century Europe and the US. Throughout Africa and the Caribbean impoverished families strategically place their children with better off families. “Crianza” in Spanish Latin America, “School Children” in the British Caribbean, “Criacao” in Brazil, and “restavek” in Haiti are all domestic service in exchange for education. These type of family coping strategies of impoverished families were all considered highly appropriate to the grandparents and great grandparents of people in the contemporary developed world. But as anthropologist Leinaweaver (2007:163) noted after reviewing Peruvian adoption procedures and documents, “adoption lawyers conscientiously define as inadequate the very kin-building practices that remain essential for the hard-working migrants I knew.”

- 15) Anthropologists argue that what often seems to have been overlooked in the heavily class and culture bound prism through which the governing and international elites view the coping strategies of the poor is the importance of child labor, sibling and peer care, how they use child sharing to expand opportunities for the child and for the parents and other members. Legally codified in procedures for adoptions, some scholars argued, have more often been mechanisms for silencing and disenfranchising birth mothers and impoverished foster parents rather than empowering or protecting them. Perhaps more telling of all, is not recognized by legal authorities in developing countries.
- 16) Godparentage is an example of the neglect or trivializing of developing world child care strategies. Child protection agencies and proponents of international adoption alike seldom, if ever, even mention the institution. Yet, it is taken seriously in Latin America and the Caribbean. It defines a child's substitute parent shortly after birth, a type of shadow family or developing world child care insurance policy, a principal feature of which is to anticipate the death or hard times parents may encounter.
- 17) The child protection agencies and developed world evangelicals have also typically blanked out the role of child agency in so called "trafficking", with children as young as 7 years of age reporting having actively sought out urban families and moving across international borders to offer their services in exchange for access to education, language skills, and more vibrant economies. They have criminalized as traffickers the very people who take these children in and help them attain better lives.
- 18) And they have often overlooked the role of people in the developed actively exploiting opportunity. Regarding adoption, "active agency" manifests itself in various ways. One way is that, despite the fact that investigations by virtually all the major intelligence has yielded no substantial, urban myths of organ theft are common in all poor countries where adoption is prevalent. At times this has been more than a quaint urban myth. In Guatemala reached its height in the 1990s with attacks on foreigners erroneously suspected of stealing children, such as environmental consultant June Weinstock who had the misfortune of being the closest gringo in sight when a Guatemalan peasant family momentarily lost track of their child. A panic swept through the village and before it was all over a mob of 500 people attacked Weinstock, ripped her clothes off, stoned her unconscious, and then raped her with a stick. At another level examples abound in newspaper accounts of developing world parents admitting to have given their children over to adoption agencies to go with strangers to the US or France but later claiming they had been tricked. Most accounts explain specifically that they had expected the children to return when they had finished their education and were legal adults. The agency is evident in the fact that adoption or no adoption, at 18 the children can decide to do what they want to do. In effect, there is very good reason to suspect that what the parents are protesting are the advantages they expected to accrue to them as a result of their children's migration. In some cases, the parents have specifically explained to journalists that they expected rewards that were not forthcoming.

Secular child protection agencies have sometimes held such cases up as examples of misdoing and exploitation on the part of the adoption agencies when clearly what the parents resent is not the migration of their children but the fact they did not themselves sufficiently benefit from having strategically relinquished custody of the children.

- 19) RCCIs are part and parcel of the international adoption phenomenon. Both are overwhelmingly associated with developed world evangelicalism, proselytization, and saving bodies and souls. But unlike adoption, there seems to be less ambiguity among the poor. They are seen as mechanisms of accessing education, particularly for impoverished people in rural areas where schools are scarce. They provide an alternative to international adoption, one where parents can maintain contact with children. And they provide an alternative to domestic servitude that protection agencies have rallied against.
- 20) Notwithstanding, most literature put out by secular child protection organizations have brought with them the developed world perspective of the RCCIs as iniquitous to child development. The argument rings true as there is clear and unambiguous relationship between stunted intellectual development and institutionalization of children in the 0 to 3 year age range. The rise of multi-culturalism and tolerance also figure into the anti-RCCI climate. The evangelical will to convert and assimilate people in the developing world resembles the massive early to mid 20th century US, Canadian, and Australian aboriginal boarding school programs that government officials have been recently officially apologizing for. But there are real advantages to the poor with the new RCCIs and they appear not to be viewed with the same suspicion as international adoption. In this way the evangelicals who are on shaky ground when they say, in the context of international adoption, 'UNICEF may be not working in the interest of children,' may indeed have the support of the poor when it comes to RCCIs
- 21) Critics of Child Protection agencies point to the fact that while scholars disparage them for the poor, many developing world elites send their own children to boarding schools and Residential Treatment Centers. Moreover, in the endeavor to discredit RCCIs UNICEF and Save the Children frequently conflate the impact residential care has on the 80% of child residents who are 4 years and older with the impact they have on the 20% who are infants and toddlers. The distinction in needs between the two age groups is so obvious to make some observers suspicious of the motivations behind the anti-RCCIs campaigns. If we eliminate infants and toddlers from the debate, there is evidence that well managed "orphanages" produce adults significantly more successful in the work place than their non-orphanage counterparts. This case has been made for both the developed world and developing countries. Another point is that in both developing and developed countries, studies consistently find that children prefer RCCIs over foster care. Taking the argument even further, children in at least one Kenya study RCCIs saw themselves as advantaged vis a vis their counterparts who remain with biological families.

22) In summarizing what we know from outside of Haiti, several fundamental differences exist between Residential Care for Lower Class children and families in the developed world versus those in the developing world:

- a) In the developed, world Residential Care centers evolved in situ and were related to urbanization and the diminishing dependency on labor intensive livelihood strategies. In the developing world they have largely been imported as a mechanism of evangelical humanitarianism and proselytization.
- b) The movement is almost entirely driven by evangelicals and, to a far lesser extent, secular humanists from overseas working on behalf of the poor but getting financial support from sympathetic donors in the developed world.
- c) While adoption is often viewed as the driving force behind RCCIs, both are better understood as part of Christian or monotheistic struggle against evil, in particular paganism and Satan. Whether Satan exists or not, the battle is very real. It impinges on the material world in terms of massive exchange of 100s of thousands of Christian missionaries, 100s of millions of dollars invested in education and infrastructure, not least of all residential children care centers, as well as visas and university scholarships.
- d) In the developed world Residential Child Care centers are often the place of last resort for parents or state enforced mechanism of rehabilitation (some would say punishment) for wayward and criminal youth. They are mostly state sponsored institutions where difficult and austere living conditions prevail; and the most common scenario in recent decades has been, not parents relinquishing or placing their children in the institutions, but unrelated state officials intervening and arresting the children or removing them from dysfunctional homes. In the developing countries the situation is vastly different. RCCIs are almost entirely sponsored by overseas charities, particularly those associated with evangelicals. Where and when they function well, even middle class families may look to them as coveted places of first resort. They represent a gateway to education, jobs, developed world sponsors, and visas.

23) Haiti exhibits all the features of RCCIs discussed above. There are only three state sponsored RCCIs vs. an estimated 723 private institutions almost all of which are supported by US evangelical protestants. Child sponsorship is a major source of funding. There is also a vibrant industry of “teams”, what some call “orphan tourists,” who come to participate in construction of schools and residences and to commune with the “orphans.” The entire endeavor is underwritten by an ideational rationale that a large portion of children in Haiti suffer extreme abuse, neglect, and exploitation. Child protection agencies such as UNICEF, PADF, ILO and Save the Children have unwittingly reinforced this image with what some see as seriously flawed studies placing 15% to 25% of Haitian children in the category of “child slaves.” The extent of misuse of information to support the industry

came with the 2010 earthquake where original claims of one million orphaned lost and separated children helped unleash massive donations from the developed world. It was an image enthusiastically repeated in the press and evangelical media outlets. Ten weeks after the earthquake UNICEF modified the fervor, but still reported that there may be as many as 50,000 children still lost and separated from their parents. We now know there may not have been more than a couple hundred children lost, orphaned or separated as a direct consequence of the earthquake.

- 24) As found in other countries, the reality of many children living in RCCIs in Haiti may be substantially different than that implied by claims of massive suffering and neglect: 80% have at least one living parent, many are not poor but see it as part of a coping strategy similar to the motivations for “restavek”; meaning a mechanism of social mobility and access to education, particularly for rural children, something lent credibility by a report from French Child Protection agency Terre de l’Homme which found that the number one reason parents place children in Port-au-Prince RCCIs is “scholarization.”
- 25) Despite the existence of IBESR (the Haitian State’s Bureau of child welfare) since 1958, and the presence of UNICEF in Haiti since 1949, and Save the Children since 1976, the faith based RCCIs have until recently been allowed to function with no monitoring or regulation. This appears to be in a process of changing. IBESR and UNICEF have recently been part of pushing through legislation that limits international abortion and are now turning their attention to RCCIs, hence the 2012 inventory of RCCIs and the present study.

Qualitative

During the qualitative phase of the research we contacted a host of experts in the field of international adoption and Residential Child Care Institutions. The informants included people involved in Child Protection organizations, significant scholars in the field, including a team of professors at Duke University in Durham, North Carolina, internationally renowned author and adoption specialist Karen Rotabi, anthropologists and Haitian specialists Gerald Murray and Glenn Smucker, as well as missionaries and health-care specialists with decades of experience in Haiti. Most of the findings from contact with international scholars and specialists are included in the review of the literature section (below). The present section on Qualitative Research covers the remainder.

The most important point that comes from the literature review is that overseeing Haiti's RCCIs requires IBESR to interact with and manage the often competing interests of a host of actors, including the owners and managers of the centers, adoption agencies, NGOs, foreign and domestic religious organizations, and, of course, birth parents and the children themselves. The give-and-take among these groups is perhaps the most important factor in determining whether RCCIs safeguard the interests of children as intended. And there is a complex recent history behind the relationships among these groups and their sometimes incompatible goals.

Clash of the Child-Care Titans

On January 22, 2010, only 10 days after a powerful earthquake had devastated greater Port-au-Prince, UNICEF's Jean Luc Legrand announced at a press conference that, "UNICEF had documented...15 cases of children disappearing from hospitals and not with their own family at the time." Legrand went on to say that,

"it's better for aid workers to help identify and make the effort to locate those kids' relatives — and place them in temporary foster-style care with network-monitored and supported families — than to hand them over to orphanages."

In making this declaration UNICEF had the firm support of the International Red Cross, Save the Children, World Vision and seemingly much of the Haitian Government. The Statement was made in the context of a documented history of child sex trafficking and domestic service that many of the cited institutions as well as journalists have labeled "slavery." On January 28, 2010, the claim seemed to be verified when 10 U.S. Baptist missionaries were caught trying to illegally cross the border into the Dominican Republic with 33 undocumented Haitian children. In the week that followed, Frantz Thermilus, then-chief of Haiti's National Judicial Police, announced in a press conference that,

"There are many so-called orphanages that have opened in the last couple of years that are not really orphanages at all. They are fronts for criminal organizations that take advantage of people who are homeless and hungry. And with the earthquake they see an opportunity to strike in a big way."

Notable in this respect is that while there has never been any documented evidence of organ trafficking there is nevertheless widespread suspicion among the Haitian political elite that organ trafficking occurs and that it is linked to RCCIs. Then-Prime Minister Jean-Max Bellerive told CNN reporter Christiane Amanpour, “There is organ trafficking for children and other persons also, because they need all types of organs.” When the American Baptists were arrested, residential child care centers in Haiti got a flood of unflattering media attention. In describing the institutions, the New York Times reported:

“Many are barely habitable, much less licensed. They have no means to provide real schooling or basic medical care, so children spend their days engaged in mindless activities, and many die from treatable illnesses.”ⁱⁱ

While admitting there are some poorly run and exploitative RCCIs, directors of the institutions — the most prominent of whom, as seen in the review of the literature, are US Christians with links to politically powerful evangelical and Catholic institutions — maintained that UNICEF and the Child Protection agencies were behind the critiques, critiques they saw as unfair. Orphanage owner [Doug Phillips](#) of Rescue Haiti's Children (a project of [Vision Forum Ministries](#)), epitomized the reaction in a February 26th blog post entitled, “Haiti's children held hostage by UNICEF's agenda.” He accused UNICEF officials of “harassing Christian orphanages”, of making “official visits without the authority of the Haitian Government,” of “mounting an international publicity campaign to shut down international adoptions” for which the UNICEF officials “teamed up with the Hollywood actors.” Perhaps most damning of all, Phillips accused UNICEF of making “the emotionally charged claim that adoptions lead to child sex-trafficking,” a thought, Phillips says, “so repugnant that the mere mention of the charge is sometimes enough to shut down debate.” Yet, “to date, there have been no documented cases of child sex-trafficking connected with American adoptions.”

The tension exploded into open conflict that played out in major television, internet and newspaper media. Dixie Bickel, director of the God's Littlest Angels orphanage — which had hosted post-earthquake news crews from CNN, CBC, and ABC — went on the US television show Larry King Live and called UNICEF “the only organization that isn't working for the good of the children.” In the weeks that followed, US Senator Mary Landrieu of Louisiana declared to her fellow lawmakers on the Senate floor that, “Either UNICEF is going to change or have a very difficult time getting support from the US Congress.”

None of this is to say that there was not an urgent need to help children after the earthquake. Both sides were trying to do just that. Reports erupted maintaining that as many as 1 million children had been left orphaned by the earthquake, with as many as another million separated from their families. The reports seemed imminently logical. On January 28, 2010, then-Prime Minister Max Bellerive and First Lady Elizabeth Preval added their concern as well. The first lady said that, “The children, unless they get help, they will have lost their childhoods, their innocence. It is them we must go to first.”

However, IBESR should take note that most of these reports were wrong. While there is trafficking in Haiti, critical analyses have revealed that the numbers are grossly inflated and misunderstood (Fafo 2002). In the five years leading up to the earthquake, the only international sexual predators apprehended in Haiti were linked, not to evangelical organizations, but to some of the very organizations that were sounding the alarm after the earthquake. The year before the earthquake, soldiers working for the UN had been accused of systematic rape and having sex with young adolescents girls. And the Catholic Church – which was proposing to airlift tens of thousands of the children out of Haiti to their Miami Diocese for “safe keeping” – had a string of its own embarrassments. In 2007, the Canadian police arrested Canadian Catholic clergy Denis Rochefort and Armand Huard, the latter once called “a veritable Father Teresa”-- but known to the Haitian “orphans” he was having sex with as “Papi.” -- In 2009, Catholic priest John Duarte was charged in the Canada for allegedly having sex with nine Haitian boys he was “helping.” He would plead guilty to three of the charges. The same year, American Douglas Perlitz was arrested in the US for abusing 23 boys while he ran a Catholic-funded “street kids” organization in the North of Haiti. He would subsequently plead guilty as well.

As for the numbers, ten weeks after the earthquake Marie de la Soudiere, the head of UNICEF's Haitian Children Registry Program, estimated in an interview with CBS's 60 Minutes that the number of orphaned, lost or separated children at “upwards of 50,000.” At that time all the children protection agencies combined had only registered 600 children who were separated from their families. Of these only 20 had been reunited. Moreover, SOS child protection agency lamented at the time that, albeit impoverished, most children who were being taken into « orphanages » were arriving thanks to the active attempts on the part of their parents to exploit the opportunity to get free food, medical care and education for their children.

UNICEF's 2010 annual report showed that of 430 “institutions” a total of 4,948 children “orphaned or separated from their parents” had been registered in the 12 months following the earthquake. Of that figure, only 1,265 had been reunited with their families. Another 506 of them had nothing at all to do with the earthquake: they were separated from their parents before January 12, 2010. Disgusted with similar findings regarding children with parents but kept in RCCIs, and having nothing to do with the earthquake, French President Nicolas Sarkozy said “yes” when asked about aiding Haiti's “orphans,” but he added: “As long as they are true orphans and not children who are taken away from their families”

In summary, IBESR should recognize that it is the most significant decision making organization in the middle of this clash between powerful and determined institutions. On the one hand there is UNICEF. On the other are the RCCIs and adoption agencies. As will be seen in subsequent summaries of the survey findings, Haitian families have their own expectations regarding the centers, as do the children who live in them. Managing this web of relationships deftly, and with great sensitivity, is critical to ensure that the children are protected.

Institutional Survey

As discussed in ## above, the Institutional Survey drew information from 51 centers. With the exception of those serving disabled children (4) and those serving street children (6), the centers were randomly selected from IBESR list of 716 institutions. For logistic and cost constraints, the selection was confined to six of Haiti's ten departments: Artibonite, North, North East, North West, West, and Central Plateau. The target respondent was the director of the institution. In those cases where we were unable to locate the director on the initial visit, questions were confined to infrastructure and other readily available information. We subsequently returned and completed dossiers for all but three institutions. Thus the total sample size was 51 centers; for half of the questions data is available for only 48 institutions.

Profiles of the Children

From Table ##, of the 51 institutions, the average number of children per institution, was fifty-six (56). Not all children sleep in the institution; some sleep with their own or other families near the facility. The size of the institutions ranged 11 to 290 children. Boys outnumbered girls with an average of 35 boys to 20 girls per institution. Four institutions were exclusively male and one exclusively for girls. Ages ranged from several months to 29 years of age. The average age of the youngest child in a given institution was 4 years with range from several months to a minimum age of 7 years. Directors reported an average of 60% of the children as being full orphans with an average of 4 former child domestic servants per institution. These were highly questionable figures in view of findings from the child survey where only 3% reported having been placed in the center because of deceased parents (see ##). Twelve of the institution claimed to accept HIV positive children and 23 had at least one disabled child. However, with the exception of the four institutions specifically serving the needs of disabled children, the actual numbers of disabled and HIV positive children were low: Of the 295 disabled children in the 51 centers visited, 228 were in the four centers specializing in disabled children. The remaining 47 institutions housing 2,642 children had only 66 with a disability.

Table ##: Demographic Profile of Centers from Institution Survey (N=51)			
Variable	Average	Minimum	Maximum
Total number of children	56	11	290
Number of girls	20	0	90
Average of boys	35	0	290
Total number of children sleeping at the Center	51	11	290
Number of girls sleeping a Center	20	0	60
Number of boys sleeping in a Center	34	0	290
Age of the oldest child	18	7	28
Age of the youngest child	4	0	15
Percentage of Children directors claim as full orphans	60%	10%	90%
Children who are former “restaveks”	4	0	50
Children of director, spouse, or employees in center	1	0	7
Children with HIV accepted	23%(12)		
Presence Disabled children	44%(23)		
	Physical	18	

Types of Disabilities per institution	HIV positive	11		
	Blind	10		
	Do not learn well	8		
	Psychological disability	8		
	Deaf	5		
	Other physical disability	2		
	Other illness	0		
	Other	0		

Child Placement

Table ## presents data on the primary reason directors gave for accepting a child. Forty-one percent of the directors (20) cited that the children do not have parents (an interesting contrast with the estimation seen in Table ##, that 60% of the children are full orphans); 29% (14) cited poverty, 13% (6) abandonment or neglect; only 4% (2) cited handicapped (an interesting contrast in that four of the institutions specialize in handicapped children); 4% (2) said they primarily accept the children based on IBESR referrals; 8% (2) street children (an interesting contrast in that 6 were listed in the IBESR directory as specializing in street child). One director simply said that the parents decide. Secondary reasons for accepting children follow a similar patten with poverty or 28% (14), neglect (27% or 13), abuse (25% or 12), and absence of parents (13% or 6) being most commonly cited reasons. These reasons for placement are in notable contrast to data institutionalized children themselves (see page), where “poverty” and “to go to school” covered 68% of all reasons given and abandonment, abuse and parental death combined only accounted for 7% of the explanations that children gave.

<u>Table ##: Child Placement Policies from Institution Survey (N=48)</u>					
<u>Primary condition for accepting children</u>			<u>Secondary condition accepting Children</u>		
Variable	Count	Percent	Variable	Count	Percent
Do not have parents	20	41%	Family is too poor	14	29%
Family too poor	14	29%	Neglected or abandoned	13	27%
Abandoned or neglected	6	13%	Family abuses them	12	25%
Handicapped	2	4%	Do not have parents	6	13%
IBESR sends them	2	4%	IBESR sends them	5	10%
Street children	2	4%	Parents decided	4	8%
Parents decided	1	2%	For decent education	2	4%
No conditions	1	2%	Cannot respond	1	2%
			Handicapped	1	2%
			Street Children	1	2%

De-Institutionalization

Table ## presents reports from directors for first and second most common reasons that children leave the centers. The three most common reasons, each approximately equal in importance and far more cited than any other reasons are that parents retrieve the children (20 Of 48, or 14%), they are expelled for bad

behavior (12 of 48 or 25%), and they come of age (12 of 48 or 25%) --which in most, but not all cases means 18 years of age. The next most common response was that the children do not leave. The same three responses were almost the second most important reasons given for children leaving, only in a different order of importance, expelled or bad behavior (15 of 48 or 31%), parents retrieve them (13 of 48 or 23%), come of age (10 of 48 or 21%),

Table ##: De-Institutionalization:

Most common reason children leave the center -- from Institution Survey (N=48)

<u>Most common</u>			<u>Second most common reason</u>		
Response	Count	Percent	Response	Count	Percent
Parents retrieve them	14	29%	Expelled for bad behavior	15	31%
Expelled for bad behavior	12	25%	Parents retrieve them	11	23%
Comes of age	12	25%	Comes of age	10	21%
Poor school performance	1	2%	Adoption	1	2%
Runaway	1	2%	Finish university	1	2%
Treatment	1	2%	People came to get them	1	2%
Discovered parents lied	1	2%	Poor school performance	1	2%
Do not leave	4	8%	Runaway	1	2%
Cannot respond	2	4%	Turns 18 years of age	1	2%
			Cannot respond	5	10%

Visitation Policies

Table ## presents the results for policies the centers have regarding when children are allowed to visit their families and when family members may come to the center and visit the children. By far the most common policy was for children to be allowed to visit families during summer vacations, 40% directors said so (19); 27% directors (13) said that children could return home to visit whenever the family wanted them to come; 10 directors said the children could never return home, and the remaining responses were once per week, month, year or in case of emergency. When asked when the families were allowed to visit the children, the most common response was when the family wants (54%) followed by summer vacation (15%). The rest of responses were weekends, twice per month, once every two months, once every three months, once per year. One director said that most of the children in his institution had no family.

Table ##: Visitation Policies from Institution Survey (N=48)

When are children allowed to visit their blood relative families			When are blood relative families allowed to visit their children		
Responses	Count	Percent	Responses	Count	Percent
Summer vacation	19	40%	When family wants	26	54%
When family wants	13	27%	Summer vacation	7	15%
Never	10	21%	Weekends	2	4%
Each Sunday	1	2%	Twice per month	1	2%
Once per month	1	2%	Once per month	4	8%
Once per year	1	2%	Once every 2 months	2	4%
Family emergency	1	2%	Once every 3 months	2	4%
Most have no family	1	2%	Most have no family	1	2%
Do not know	1	2%	Once per year	1	2%
			Other	1	2%
			Do not know	1	2%

Infrastructure

Sleeping Facilities

The average number of beds was 50, almost identical to the number of children and indicating that most children have their own bed. The typical institution had 7 rooms; in no case did boys and girls reported to sleep in the same room together; and although it was not clear what was the institutions age segregation protocol, in only a few cases were older children reported to sleep in the same room with younger children.

Sanitation and Water

The average number of toilets per institution was 8: 6 toilets per child; 49 of the 51 (96%) centers had at least one flush toilet; in 30 cases these toilets were located within and in 19 cases outside of the main facility. Two institutions had only latrines and 27 of those with flush toilets also had latrines. Piped water, well water, and water purchased from trucks were the primary source of general purpose water. Only two institutions reported relying exclusively on rain water, something that should not be considered problematic as both institutions were located in high altitude high rainfall areas and had large cisterns. In 100% of the institutions the water source was located in the yard or building, something that, as seen in section ##, is a significant advantage over the ## % of the Port-au-Prince population that has to go outside the yard for water, a chore overwhelming assigned to children. Congruently, as seen later in the Child survey section, 100% of children reported having bathed within 24 hours of the interview. For drinking water, 25 of the centers (49%) purchase treated water; another 25 (49%) purchase purified water; and only one institution reported not treated the water at all.

Recreation

Regarding recreation, 48 of 51 institutions (92%) had some sort of outdoor space (“field”) on the premises for the children to play; 31 (60%) had a slide. Not listed in table (##) is that the centers tended to have ample. The smallest institutions had ~516 m²; but 12 had between 1,290 and 100 m²; 38 of the centers are built on more than 2,000 m², a respectable amount of land in Haiti. Twenty-five percent (49%) of the centers reported having some sort of library on the premises. On average an institution had 2.1 televisions, 2.5 radios, and 1.9 vehicle. Only 4 institutions had no television, 7 had no radio, and 11 had no vehicle.

Range of Wealth, Resources and Children.

Notable is that while the averages and percentages given above provide a useful profile of the typical RCCI in Haiti, they obscure the wide range in size and wealth among the institutions (see right column in Table ##). The number of beds from 11 to 264, bedrooms from 1 to 44, toilets from 1 to 33, televisions from 0 to 10, radios from 0 to 30, and vehicles from 0 to 12.

Table ## : Infrastructure from Institution Survey (N=51)

Category	Measure	Variable	Number or Average	Range	
				Percentage or Low	High
Number and Ages of children	Average institution per	Number of children per center	56	11	290
		Number of Girls per center	20	0	90
		Number of Boys per center	35	0	290
		Age in years of the youngest child per center	4	0.1	12
		Age in years of the oldest child per center	18	7	29
	Institutions	All Female	1	-	-
		All Male	4	-	-
Sleeping facilities	Average	Number of beds	50	11	264
		Rooms for sleeping	7	1	44
	Institutions	Shared rooms for boys and girls	0	0	0
		Shared rooms for youngest & oldest children	0.2	0	1
Cooking	Average institution	Average of Stoves/burners	7	3	20
	Institutions	Has cooking fuel reserve	50	-	-
Sanitation	Institutions with at least one per	Functioning toilets	8	1	33
		Flush toilet	49	96%	
		Indoor Flush toilet	30	58%	
		Outdoor Flush toilet	19	37%	
		Outdoor Latrine	29	56%	
Water	Source General	Piped	17	33%	
		Well	17	33%	
	Purpose Water per Institution	Purchase trucked water	14	27%	
		Rain	2	4%	
		Other	1	4%	
		Location of spigot per Institution	In the building	3	6%
	In the Cistern		2	6%	
	In the yard		46	88%	
	Source Drinking Water per Institution	Treat the water	25	49%	
		Purchase Treated Water	25	49%	
Do not purchase or treat the water		1	2%		
Amusement and Recreation	Average institution per	Field for children to play	48	92%	
		Swings, slides	31	60%	
		Library	25	49%	
		Televisions	2.1	0	10
		Radios	2.5	0	30
		Vehicles	1.9	0	12
	Institution with none of these items	No televisions	4	8%	
		No radios	7	13%	
		No vehicles	11	21%	

Staff

Twenty of the 51 directors are female, 31 male, 48 are Haitian nationals, one American, and two are Canadian. Illustrated in Table ##, staff per institution included an average of 17.8 caretakers, 5.1 teachers, 4.6 cleaning staff, 4.1 watchman, 3.4 cooks, 1.6 nurses, 1.3 social workers, 0.8 doctors, and 5.1 other miscellaneous staff for an average total of 43.8 staff members per institution. The overall average of staff to child ratio in the institutions was 1 staff member to every 1.6 children. But once again the ranges for all categories were rather dramatic. Number of caretakers ranged from 2 to 84, teachers from 0 to 40, cleaning staff from 0 to 42, watchmen from 0 to 50; cooks from 1 to 14, nurses from 0 to 11, social workers 0 to 17, and doctors from 0 to 5. The range of staff per child ratio ranged from one staff member for every 6.7 children to more than two staff members per child. More relevant in terms of actual child care is that ratio of childcare staff to children: overall 1 staff member to every 4.7 children; at the weakest extreme 1 staff to 16.7 children; and in the best staffed institutions slightly less than two childcare workers per child. Even considering that, to be meaningful, these ratios must be conditioned by the fact that all the staff is not present 24 hours per day, the figures compare favorably to UNICEF (2008) and Save the Children’s (2008) minimum recommendations of 7 to 15 adult care givers—depending on the age of the children.

Table ##: Staff from Institution Survey (N=51)			
Variable	Average	Minimum	Maximum
Average Number of Child Caretakers	17.8	2	84
Average Number of Teachers	5.1	0	40
Average Number of Cleaning staff	4.6	0	42
Average Number of Watchmen	4.1	0	50
Average Number of Cooks	3.4	1	14
Average Number of Nurses	1.6	0	11
Average Number of Social workers	1.3	0	17
Average Number of Doctors	0.8	0	5
Average Number of Other staff	5.1	0	107
Average Number of Total Staff	43.8	5	273
Average Children/Caretakers	1 to 4.3	1 to 16.7	1 to 0.6
Average Staff/Child	1 to 1.6	1 to 6.7	1 to 0.4
Centers with at least one staff specially trained in childcare	77% (40)	-	-
Average Number of Staff Specially trained in childcare	4.0	0	3.975
Institutions where adults are present in the rooms at night	92% (48)	-	-

Accounting and Record Keeping

The Institutional survey also focused on how the institution was managed and to what degree it had established and codified its policies. Slightly more than half the directors (54%) reported having computerized accounting systems; 42% kept records on paper; 2 of the institutions (4%) had no means of keeping records. Thirty-four of the directors (71%) reported have a written code of conduct where everyone in the institution could read it; but upon further inquiry only 22 (46%) in fact had one. Fully 100% of the directors reported having a list of all the children in the institution; 5 (10%) were unable to find the list. Forty-two of the directors (88%) said that they had a dossier for every child in the institution; two of them were unable to find the dossiers. Only 28 (58%) said that they kept a record of the exact conditions and reasons under which the child was accepted into the institution; 22 (46%) were able to show us the records. Forty-five directors (94%) stated that they had a standardized method to verify that a child should be accepted into the institution: of these 25 (56%) cited witnesses, 15 (33%), claimed to visit the child's home, and 12 (27%) said the primary means was a signature from the parent. Only 24 (50%) said they had a written code for the conditions under which a child could be discharged from the center; only 17 (35%) could find the code

Table ##: Policies and Practices from Institution Survey (n=48)

Category	Variable	Count	Percent
Method of accounting	Computer	26	54%
	Paper	20	42%
	None	2	4%
Code of conduct written and posted where all can read it	Reports "yes"	34	71%
	Code of conduct verified	22	46%
List of Child in the facility	Reports "yes"	48	100%
	List verified	43	90%
Dossier on every child in the facility	Reports "yes"	42	88%
	Dossiers verified	40	83%
Records on the exact conditions under which children are accepted	Reports "yes"	28	58%
	Documents verified	22	46%
Purported means of verification if child should be accepted in Center	Witnesses	25	56%
	Visit the home	15	33%
	Signature of parent or guardian	12	27%
	No verification	5	10%
	Cannot respond	1	2%
Written code for conditions under which children can leave the center	Reports "yes"	24	50%
	Document verified	17	35%

Contingency Plans

Table ## presents responses from directors regarding Contingency plans in the case that the institution is forced to close or loses support. Seventy-one percent of the Center directors said that they would either call the state, send the children home or they simply did not know what they would do. In short, most directors appear to have not contingency plans. In short, most appear to have no contingency plan. Twenty-three percent said they would turn to another center. Asked about what they would do if they lost assistance, 11 (23%) said they would ask the State for help and 10 (21%), suggesting that these institutions also lacked a financial contingency plan. Ten of the organizations said they would call a partner organization, one said he would close the institution and 2 said they did not know.

Table ##: Contingency Plans if Center Closes.			
Category	Variable	Count	Percent
Anticipated course of action regarding children if director if obligated to close the center	Call the state	17	35%
	Give to another institution	11	23%
	Send them to their homes	10	21%
	Do not know	7	15%
	Other	3	6%
Reported course of action if director lost financial support	Ask the state for assistance	11	23%
	Borrow money	10	21%
	Call a partner organization	10	21%
	Close the institution	1	2%
	Do not know	2	4%
	Other	12	25%

Preparing Children to Leave the Center

Table ## summarize institutional protocols for preparing children to leave the centers and follow-up after they have left. Twenty-eight of the directors (58%) report giving some type of special preparation for children before they are de-institutionalized: of these 17 () say that preparation begins as soon as they enter the center (suggesting that they did not really understand the question or the surveyor did not pose the question appropriately); 8 said one year before the children leave, suggesting that this was the true number of institutions that provided special preparation; 3 (4%) did not adequately answer the question. Regarding follow-up after the children have left, 23 (48%) said there was none; 18 (38%) said they provided financial assistance; 10 (21%) have special homes for the children when they just leave the center; 8 (17%) place them with a family or a job; and 7 (15%) reported paying their school tuition. Only 7 directors cited any means of staying in contact with children after they had left the center completely.

Table ##: Preparing Children to Leave the Center from Institution Survey (n=48)			
Category	Variable	Count	Percent
Children receive preparation before leaving	Reports "yes"	28	58%
Type of preparation (n=28)	Career Training	24	86%
	Special instruction	16	67%
	Other special preparation	2	7%
Time they begin receiving preparation (n=28)	Since they enter the center	17	61%
	One year before they exit	8	29%
	Cannot answer	3	4%
Types of follow up with children after they leave the center (n=48)	Provide financial assistance	18	38%
	Have special homes	10	21%
	Place family or in a workplace	8	17%
	Pay school tuition	7	15%
	None	23	48%
Means of maintaining contact with children after they leave center (n=48)	Children visit center	1	2%
	Church	1	2%
	Internet	2	4%
	Telephone	2	4%
	Visit children at home	1	2%

Medical Care, Education, and Meals

Medical Care

In Table ##, it can be seen that fully 48 of the 51 institutions (94%) have a first aid kit on the premises. Only four of those the surveyors classified as in poor condition. For medical care, 28 (54%) depend on public clinics and hospitals; 23 (46%) on private clinics, hospitals or doctors. Twenty (20) of the

institutional directors or sub-directors (39%) reported that the children had undergone a medical examination within the past 3 months; 17 (34%) reported within the past four to six months; ten (20%) from seven months to one year past; one institution claimed more than one year past and 3 (6%) admitted that the children had never been medically examined.

Education

All the centers reported that the children have access to both primary and secondary school education. Twenty-five of the primary schools were state accredited and 12 of the secondary schools. In section ##, these figures are emphasized with the finding that only two of 159 children (1.25%) reported not being enrolled in school. Access to education was, as will be seen in these later sections, also a common reason for children being in the centers.

Meals

Of the 51 institutions, 44 of the directors or sub-directors interviewed (86%) reported feed three vs. two meals per day; 69% (35) reported providing meat with the main meal.

Table ##: Medical Care, Education and Meals from Institution Survey (N=51)			
Category	Variable	Number of Institutions or Average	
		Count	Perc
Primary access to general and emergency medical care (N=51)	First aid kit present	48	94%
	First aid kit in poor condition	4	8%
	Public Dispensary, or Hospital	28	54%
	Private Dispensary, Hospital, or doctor	23	46%
Last time the children had medical check-up (N=51)	1 to 3 months past	20	39%
	4 to 6 months past	17	34%
	7 months to 1 year past	10	20%
	More than 1 year past	1	2%
	Never	3	6%
Access to education (N=51)	Access to Primary School	51	100%
	Access to Secondary School	51	100%
	Access to State Accredited Primary School	25	48%
	Access to State Accredited Secondary School	12	23%
Meals (N=51)	Institutions feeding 3 meals per day	44	86%
	Institutions feeding only 2 meals per day	7	14%
	Institutions providing Fruit or juice with meals	25	49%
	Institutions providing Meat at main meal	35	70%

Punishment and Abuse

When asked what was the worse form of abuse that could occur in the center, 25 of the 48 directors or sub-directors who responded the question (52%) cited sexual abuse, 8 (17%) cited psychological abuse, 7 (15%) cited violent abuse and 6 (13%) said that there was no 'worse' abuse, meaning that all abuse was bad/ When asked about the last incident of abuse in the center 38 of 48 of those who responded (79%) said that there had never been a case; another 7 (15%) said they did not know; 2(4%) refused to respond. Only one respondent said that there had ever been a case of abuse and this had occurred more than 3 years in the past. When asked about punishments, 25 of the 48 respondents (52%) reported that among the most common forms were restricted playing, 18 (38%) reported kneeling, 10 (21%) reported spanking the hand, 9 (19%). Other lesser reported forms of punishment including restricting food, spanking on the backside, work detail and various forms of standing. Four of the respondents said that the children are not punished. Note that the punishments of choice that directors reported here vary significantly from those of children, see page ##, 75% of whom reported corporal punishment being most common and only 17% of whom reported restricted playing as among the most common.

Category	Responses	Count	Perc
Directors Opinions on worse form of abuse (n=48)	Sexual abuse	25	50%
	Psychological abuse	8	19%
	Violent abuse	7	17%
	There is no worse abuse	6	15%
When last instance of abuse Occurred (n=48)	3 years ago	1	2%
	Cannot respond	2	4%
	Do not know	7	15%
	Never	38	79%
Institutions Employing Various Types of Punishment (n=48)	No playing	25	52%
	Kneel	18	38%
	Spank hand, legs or backside	16	33%
	Stand in corner or on one foot	13	27%
	Put to work	4	8%
	No food	3	6%
	Nothing	4	8%

*There were 3 questions questionnaires for which a director was not located and hence responses many of the most specific operational questions are not available.

Knowledge of the Laws

As seen in Table ##, only 20 (42%) of the respondents reported knowing what is written in the Haitian the laws governing child abuse. Of those, 11 (55%) said that adults were not supposed to hit children and 9 (45%) said adults could hit children, but not too hard. Regarding what should be done in cases of abuse,

all respondents cited contacting a State agency. When asked whether or not they had ever heard of the United Declaration of the Rights of the Child, fully 47 of the 48 directors or sub directors who were asked the question (98%) said yes; 32 (67%) claimed to know the laws regarding child labor. Most of these responded to subsequent questions suggesting they did know the law (see Table ##), but 14 subsequently added, despite seeming to know, that they really did not know the law.

Table ##: Knowledge of Laws from Institution Survey (N=48)			
Category		Count	Percent
Knows law about punishment and abuse		20	40%
What directors who report knowing law believe the law to be (n=48)	Not supposed to hit children	11	22%
	Not supposed to hit children too hard	9	19%
What center is supposed to do accord to the law (n=20)	Contact the police	10	61%
	Contact IBESR or BPM	10	36%
Has Heard of Have you heard the Declaration of the Rights of the Child		47	98%
Knows the law regarding child labor		32	67%
What they think the laws include (n=32)	Do not prevent a child from attending school	29	91%
	Do not place a child in danger	16	50%
	Do not make him expend too much effort	16	50%
	Do not really know	14	44%

Foreign Affiliation, Partners, and Religious Orientation

Table ## illustrates the extent to which the centers are linked to foreign organizations and support. Thirty (63%) of the institutions report having foreign partners, the average number is two per institution; only 18 of which (60%) report children on sponsorship. The most numerous partner organizations are located in the US (33 of 52 organizations or 58% of all); followed by Canada (12 of 30 or 23%), France (5 of 30 or 9%), and Ireland (1 or 2%). Almost perfectly reflecting the religious affiliation of the centers, 34 (71%) of the foreign partners are protestant, eight (17%) Catholic, and four (12%) say they have no specific religious affiliation.

Table ##: Foreign Orientation, Assistance, and Sponsorship from Institution Survey (n=48)			
Category	Responses	Count	Percent
Nation of origin for total number of foreign partner organizations	US	34	63%
	Canadian	12	23%
	French	5	9%
	Irish	1	2%
Religious orientation of principal partner	Protestant	34	71%
	Catholic	8	17%
	None	6	12%
Religious orientation of Center (n=48)	Protestant	31	65%
	Catholic	10	21%
	None	5	10%
	Other	2	4%

Sponsorship

Of the 18 institutions reporting children on foreign sponsorship, the average number of children who have sponsors is 40, or 71% of the children. There is at least some reason to be skeptical of the candidacy of the report. In the Child Survey, 65% of children claim to have one or more foreign friend, 83% of whom send them gifts (see page ##). Moreover, seen in Table ## below, 45 of 48 institutions (94%) receive foreign visitors, 42 (92%) have sleeping facilities for them, all 42 of which have received foreign visitors in the past 6 months. The average number of visitors over this period of time is 92; 98% of them stay for less than 3 weeks and 47% return for additional visits.. The primary reasons for the visitations is to see the children (71%) followed by bring money, gifts, or supplies (67%). In comparison to foreign sponsorship, only 3 organizations (6%) reported having any sponsors who live in Haiti; the average number of children for these three institutions was 11.

<u>Table ##: Foreign Orientation, Assistance, and Sponsorship from Institution Survey (n=48)</u>			
Category	Responses	Count/ncy	Percent
Affiliation with Foreign	Partnered with foreign organizations	30	63%
	Average number of foreign Partners (n=30)	2	4%
Foreign sponsorship (n=48)	Institutions with children on foreign sponsorship	18	38%
	Average of Number children with foreign sponsors per institution	40	-
	Institutions with child sponsors living in Haiti	3	6%
	Average of Number of children with sponsors in Haiti per institution	11	-
Foreign visitors (n=48)	Center receives foreign visitors	45	94%
	Center has sleeping facilities for visitors	42	88%
	Average of Number of rooms for visitors	4	-
	Average of Number of foreign visitors received in past six months	92	-
	Received foreign visitors in the past 6	42	88%
	Average of Number of foreign visitors received in past six months	92	-
	Percentage of visitors who stay for less than 1 week	-	57%
	Percentage of visitors who stay for less 3 weeks	-	98%
	Percentage of visitors directors say return a second time	-	47%
Institution directors citing these reasons as principal motivation for foreigner visitation (n=48)	Visit children	-	71%
	Bring gifts, supplies, or support	-	67%
	Train staff	-	33%
	Evaluate the Center's work	-	33%
	Build up infrastructure	-	24%
	Adoption	-	4%
	Other	-	33%

Adoption

We know from studies elsewhere that there are cases of Haitians, specifically middle and upper class Haitians adopting children (Smucker 20??). However, it is a phenomenon distinct from adoption found in association with the centers, it tends to follow less formal legal process, and the children are overwhelming if not entirely relatives of the adoptee or children who grown up in the adoptee's household. Adoption associated with the centers is international. Only 9 of the 48 centers reported involvement in adoption. These 9 reported a total of 281 adoptions immediately following the 2010 earthquake, when the government temporarily allowed children already in the adoption process to leave the country and before they halted adoptions. Since the earthquake these nine institutions have facilitated the adoption of 156 children; seven of nine institutions report the USA as principal destination for adopted children; six of them only allow Christians families to adopt the children. Two of the nine were unaware that the Haitian government had based new adoption legislation in the past year.

Table ##: Adoption from Institution Survey (n=9)		
Responses	Institutions	
Centers that report facilitating adoption	9	
Average estimated time for adoption process	2 years	
Total children adopted in wake of earthquake	281	
Total children adopted since the earthquake	156	
Centers that only allow Christians to adopt	6 of 9	
Countries to which adopted children principally have gone	USA	7 of 9
	Argentina	2 of 9
	Canada	2 of 9
	France	1 of 9
	Haiti	0 of 9
Knows the Convention on Protection of Children and Co-operation in Respect of Inter-country Adoption	6 of 9	
Knows that Haitian government passed new laws on adoption in the past year	7 of 9	

Monitoring and Communication with IBESR

In Table ##, we see that 24 (50%) of the institutions reported that a IBESR representative visited in the past one to three months; 86% reported a visit with the past year. Thirty-six percent had received a visit from a UNICEF official in the past year. The primary means IBESR staff communicates with the centers telephones (75%), meetings (40%), and letter (29%).

Table ##: IBESR and UNICEF Inspections from Institution Survey (N=48)					
Last time an IBESR inspector visited			Last time a UNICEF inspector visited		
Response	Count	Percent	Response	Count	Percent
1-3 months	24	50%	1-3 months	7	15%
4-6 months	9	19%	4-6 months	4	8%
7 months -1 years	8	17%	7 months -1 years	6	13%
1 years-2 years	6	13%	1 years-2 years	7	15%
3 years	0	0%	3 years	1	2%
4 Years	0	0%	4 Years	4	8%
5 years	0	0%	5 years	1	2%
Do not know	1	2%	Do not know	18	38%

Table ##: How IBESR Communicates with Center from Institution Survey (N=48)		
Mode of Communication	Count	Perc
Telephone	36	75%
Meetings	19	40%
Mail or letter	14	29%
Radio	0	0%
Newspaper	0	0%
Other	3	6%
Center reporting no communication	0	0%

Child Survey

As discussed in the methodology section (pages ##), the Child Survey interviews were conducted with 159 children from 30 randomly selected centers. Teams of two to four surveyors and a team leader visited each center. In some centers the field coordinator performed a magic show to win the interest of the children. Children were subsequently invited to draw a picture of where they would like to live. A random sample of five pictures was selected and the children interviewed using the Child Questionnaire (see Annex ##). The questionnaire was programmed into a Samsung Galaxy Tablet using ODK Platform software. A video of “The Three Little Pigs” was spliced in to hold the child’s interest. After every 10 to 15 questions the surveyor shared another stage of the video with the child. The average age of the children interviewed was 13 years (ages ranged from 7 years old to 20 years old).

Child Placement

In Table ##, it can be seen that on average children arrived in the center at eight years of age and had spent 5 years there. Thirty-two (20%) of the 159 children interviewed had lived in another center prior to their arrival. Seventy-one (45%) had two living parents, 124 (78%) had at least one living parent, 8 (5%) did not know. Fifty-six (46%) of the parents live in rural areas, 37% live in Port-au-Prince or another Haitian city, 11% live in the Dominican Republic, Canada or the US; the remaining 6% live in Haitian towns in the provinces. Seventy-one of the children (42%) reported that they were brought to the center by their mother, father or both; 56 (46%) were accompanied by another close relative; 18 were brought by an IBESR official, aid worker, religious cleric, or someone from the center; one came on his own volition; and 6 (3%) were too young to remember (the categories of adults who accompanied children to the centers are not mutually exclusive, and therefore add up to more than 100%).

Table ##: Profile of Children Interviewed for Child Survey			
Category	Responses	Count	Percent
Sex of respondents	Boy	80	50%
	Girl	79	50%
Age of children	Average of Age of child	13	
	Minimum age of child interviewed	7	
	Maximum age of child interviewed	20	

Who placed the child in the Center	Uncle, aunt, sibling, grand or god parent	56	46%
	Mother	46	29%
	Father	22	14%
	Mother and father	4	3%
	Person from the center	6	4%
	IBESR	5	3%
	Own volition	1	1%
	Other authority, cleric, or aid worker	13	8%
	Do not remember	6	4%

* Missing for this variable = 34 due to an error in recording. Figures extrapolated from data collected

Table ##: Placement from Child Interviews (N=159)			
Category	Responses	Count	Percent
Time in Center (n=159)	Average Age of arrival in center	8	
	Average Years in Center	5	
	Ever lived in another center	32	20%
Status of parents (n=159)	Both parents alive	71	45%
	One living parent	53	33%
	Mother only is alive	39	25%
	Father only is alive	14	9%
	Both parents are deceased	27	17%
	Those with two parents still living together (1 missing)	34	21%
	Does not know	8	5%
Location of parents (n=120)	Countryside	56	45%
	Port-au-Prince	32	26%
	Province City	13	11%
	Province Town	6	5%
	Dominican Republic	4	4%
	Other country	9	7%

In Table ##, it can be seen that 72 (45%) children explained their placement in the center as a consequence of poverty, 36 (23%) said it was so they would have access to school, and only 12 (7%) said their placement was because of abandonment, abuse, or death of one or both parents.

Table ##: Why Children were Placed in Center from Child Interviews		
Responses	Count	Percent
Destitute	72	45%
To go to School	36	23%
Abandoned or abused	7	4%
Parent or parents died	5	3%
Delinquency	2	1%
For a better life	2	1%
Home destroyed in Earthquake	1	1%
Brother is in center	1	1%
First center closed	1	1%
Foreigner who care for me returned to France	1	1%
I was not happy	1	1%
Mother work in center	1	1%
Father owns center	1	1%
Runaway (elaborate story about not finding his way home)	1	1%
Do not know	27	17%

Fear and Punishment

One-hundred-forty-six of the 159 children interviewed (92%) rated the adults in the center as “nice” or “very nice.” Only 13 (8%) rated them as “not nice” or “mean”—six of those came from two institutions.

One-hundred-five of the children (60%) said that they were afraid of no one in the center; 50 (31%) said they were afraid of the director, a nanny, or the spouse of the director. Of those, 41 (76%) explained that the adult spanked or beat him or her, 15 (28%) said that the adult scolded harshly, 3 cited sexual

harassment. Although only two children said they were afraid the adult would send them home, notable is the comment from one child who, when asked to explain what scares her about the director she said,

I'm afraid because the director is always noting everything we do so that he can tell the foreigners that we have been bad. I'm afraid that he will send me home because things are not good right now for my family

When we asked who the children were afraid of in general we got almost identical responses (see Table ##).

Table ##: Affinity and Fear of Staff and Others from Child Interviews			
Category	Responses	Count	Percent
Rating of adults in the center (n-159)	Mean	2	1%
	Not nice	11	7%
	Nice	80	50%
	Very nice	66	42%
Who the child is most afraid of in the center (n = 159)	No one	105	66%
	Director	21	13%
	Nanny	18	11%
	Husband/wife of director	11	7%
	One of the other children	1	1%
	Watchman	1	1%
	Other	10	6%
Why (n=54)	Beats/spanks him/her	41	76%
	Speak harshly	15	28%
	Sexually harasses him/her	3	6%
	Afraid he will send me home	2	4%
	Other (Missing =6)	3	6%
Who the child is most afraid of anywhere (n=159)	No one	99	62%
	Director/supervisor	16	10%
	Nanny	9	6%
	Mother	6	4%
	Father	6	4%
	Husband/wife of director	4	3%
	One of the other children	2	1%
	Parents, Sister, uncle...	3	2%
	Doctor	1	1%
	Other staff	3	2%
	Directors son, daughter, or mother	3	2%
	Police	3	2%
	Demons	2	1%
	God	2	1%
Why (n=60)	Punishes him/her	38	63%
	Speak harshly	9	15%
	Takes his/her belongings	7	12%
	Sexually harasses him/her	4	7%
	Other	2	3%

Infrastructure

Questions regarding infrastructure reflected those seen in the Institutional survey. One hundred fifty-three (96%) of the children reported having bathed the day of the interview and all children had bathed with the past 24 hours; 151 (95%) slept in a bed; 131 (82%) slept alone in the bed; and 49 (31%) felt they worked more in the center than they had at home.

Category	Responses	Count	Percent
Last time bathed (n=159)	Today	153	96%
	Yesterday	6	4%
Bedding (n=159)	Bed	151	95%
	Blanket	2	1%
	Mat	1	1%
	Other	5	3%
Who child shares bed with (n=159)	Alone	131	82%
	Other children	24	15%
	Nanny	4	3%
	Sibling	2	1%
Thinks he/she works more in the center than when at home (n=159)		49	31%

Recreation

In Table ##, it can be seen that 96% of the 159 children interviewed (all but six) had a favorite activity or sport, including soccer, jump rope, basketball, and singing and dance; however, only 44 (28%) had played or performed the activity within the past 24 hours, and for 55 (35%) of the children more than one month had passed since they engaged in the activity.

Category	Responses	Count	Percent
Favorite sports (n=159)	Soccer	69	43%
	Jump rope	17	11%
	Basketball	16	10%
	Singing & Dance	12	8%
	Running	9	6%
	Marbles	5	3%
	Volley ball	5	3%
	Other	18	11%
	Nothing	6	4%
Last time engaged in sport (n=155)	Today	30	19%
	Yesterday	14	9%
	This week	38	24%
	Last week	18	11%
	More than one month past	55	35%

Contact and Visitation

It can be seen in Table ## that 89 (56%) of the children interviewed lived with their mother before living in the center, and 50 (31%) lived with their father (many lived with both, as children were able to register more than one response). Twenty-eight (18%) lived with an aunt or uncle, and 13 (8%) with their grandmother and/or grandfather. Seventy-one (45%) of the children lived in a provincial town before going to the center. Forty-six (29%) came from Port-au-Prince, and 20 (13%) from a provincial city. Fifty-two (33%) of the children had never visited their home since arriving at the center, 20 (13%) had visited their home in the last month to one year, and 20 (13%) had visited their home in the year before that. Seventy-six (48%) of the children said they missed their home but only 46 (30%) said they wanted to return home. One hundred nine (70%) of the children said they did not want to return home. When explaining this 79 (72%) said they have better conditions and comfort in the center and 32 (29%) said they did not want to return home because they wanted to finish school.

Table ##: Contact and Visitation from Child Interviews (N=159)			
Category	Responses	Count	Percent
Significant people who child was living with before coming to Center (respondents = 159 but more than one response possible from each respondent)	Mother	89	56%
	Father	50	31%
	Aunt or uncle	28	18%
	Grandmother	11	7%
	Grandfather	2	1%
	Brother or sister	2	1%
	Godmother	6	4%
	Already in Center	4	3%
	Myself	2	1%
	Stepmother	1	1%
	Cousin	1	1%
	Unrelated family	1	1%
	Do not know	2	1%
Child misses home		76	48%
Family comes to the center		104	65%
Last time the child visited home (n=159)	This week	6	4%
	In the past month	9	6%
	1 month to 1 year past	20	13%
	Last year	20	13%
	Never	52	33%
	Other	2	1%
	Do not remember	9	6%
Location of child's family home (n=159)	Countryside	18	11%
	Provincial Town	71	45%
	Provincial city	20	13%
	Port-au-Prince	46	29%
	None or center	4	3%
Desire to return home (n=155)	Wants to return home to live	46	30%
	Does not want to return home to	109	70%
	Children who have ever tried to return home	6	4%
Reasons given for not want to return home (n = 109 but	I live good here, bed, cloths, comfort	79	72%
	School only	32	29%

Table ##: Contact and Visitation from Child Interviews (N=159)			
multiple responses accepted, meaning that the data represents respondents mentioned category)	Food only	7	6%
	I have family, abusive parents, neglect	6	6%
	My family is poor	5	5%
	Enjoys activities in the center	5	5%
	Friends	3	3%
	My mother insists I stay and finish school	2	2%
	I want to help the other children	1	1%
	Do not know	2	2%
	Nothing	7	6%
Reasons given for wanting to return home (n = 46)	Misses family	27	59%
	So that I can begin to work	4	9%
	Misses friends	2	4%
	There is a person who is mistreating	1	2%
	Does not like the center	1	2%
	Nothing	11	24%

Opinions about the center

The 159 children interviewed were asked about what they liked and didn't like about the center they lived in. Their responses are shown in Table ##. The most positive comments about the center were regarding activities in the center (84), access to school (77), having other children there (68), having access to television and radio (55) and food (54). Fifty-four children said there was nothing they didn't like about the center and the most common negative opinions about the center were regarding the punishments (63), stealing (23) and gossip (20).

Table ##: Things that Children Like vs. Do Not Like About the Center from Child Interviews

Like	Count	Do Not Like	Count
Food	54	One of the adults	4
School	77	Gossip	20
Activities outside the center	30	Other children	3
Activities in the center	84	Stealing	23
Library	23	Punishments	63
Television and radio	55	Corn and Millet	1
Other children	68	Fighting, arguing, children being mean	10
Staff	12	When adults scold us	5
Foreigners who visit	1	The neighborhood	2
Bed	1	Taking the gifts that my mother brings me	1
Bicycle	1	Not enough toys for us to play with	1
Camera	1	No wood to make food	1
Church	3	Punishments	2
Cinema	2	They only send a couple child to learn profession.	2
Cloths	3	When I am sick they do not care for me.	1
Computer	4	When it is night	1
Everything	3	Vacation when don't go anywhere	1
Games	1	Where we are located	1
Going for walks	1	Not enough to eat	1
Going to the beach	1	I like everything	8
Yard to play in	2	There is nothing I don't like	54
Feeling safe	1		
I like the director	2		
I sleep well	1		
I'm happier here	1		
Ipad	1		
Toys	2		
Making food for the other children	2		
Learn to speak English	1		
Learning	1		
Learning a trade	4		
Learning morality	1		
Music and singing	6		
Playing soccer	2		
Freedom from beatings	1		
The house	2		
Swimming pool	3		
Dance	1		
Washing dishes, the yard	1		
Everything I find here I had at home	8		

Family placement vs. Center

Table ## shows children's responses to questions about living in the center compared to living with family. Ninety (57%) said that a child would live best in the center than family in the countryside or in a town. However, only 65 (41%) said a child would live better in the center as opposed to living with their family in Port-au-Prince. This shift is consistent with the finding (see above in Table XX) that 36 (23%) of the children said they were sent to the center for access to school, something more readily accessible for those who were already living in the capital before entering the center. The allure of opportunities that were scarce in the countryside is also evident in the widely shared desire to pursue a professional career and to live abroad (see Tables ## and ## below). The majority of the children, 154 (97%) said that a child with no family would live best in the center instead of living with a family that is not his/hers. One hundred twenty-two (92%) of children also said that if a child has to leave the center and return home they should feel sad about that decision.

Table ##: Children's Opinions About Family Placement vs. Center from Child Interviews			
Category	Responses	Count	Percent
A child who lives with his/her family in the countryside vs. one living in the center, who lives best	Center	90	57%
	Family	53	33%
	Cannot say	16	10%
A child who lives with his/her family in a town vs. one living in the center, who lives best	Center	91	57%
	Family	52	33%
	Cannot say	16	10%
A child who lives with his/her family in Port-au-Prince vs. one living in the center, who lives best	Center	65	41%
	Family	71	45%
	Cannot say	23	14%
A child with no family who lives in a house with a family that is not his/hers vs. one living in the center, who lives best	Center	154	97%
	Family	3	2%
	Cannot say	2	1%
If a child has to leave the center and return home, should that child be happy or sad	Sad	122	92%
	Happy	24	18%
	Do not know	13	10%

Table ##: Hunger, Meals and School from Child Interviews (N=159)					
Categories and Responses		Home		Center	
		Count	Percent	Count	Percent
Hungry (N=159)	Never	37	23%	80	50%
	Often	42	26%	4	3%
	Rarely	17	11%	42	26%
	Sometimes	59	37%	33	21%
Average of Meals per day (N=159)		2.1		2.7	
School enrollment (n = 155)		118		153	

Hunger, Meals and School

Table ## shows that of the 159 children interviewed more children felt hungry at home than at the center. Forty-two (26%) said they often felt hungry at home, compared to four (3%) at the center. Thirty-seven (23%) never felt hungry at home; 80 (50%) said they never felt hungry at the center. The average number of meals per day at home was 2.1 compared to 2.7 meals at the center. Of 155 children, 118 were enrolled at school when they lived at home, while 153 were in school while living at the center.

Foreigners

As seen in Table ## children were asked about contact with foreigners. Of the 104 (65%) said they had a foreign friend, 52 (50%) had five or more. Thirty-one (31%) had seen their friend in the month they were interviewed, 16 (15%) had seen their friend the month before and 46 (44%) had not seen the friend for two months or longer. Of those with a foreign friend, 86 (83%) said the friend sends gifts and 52 (50%) said the friend writes them.

Table ##: Contact with Foreigners from Child Interviews			
Category	Responses	Count	Percent
	Has a friend who is foreigner	104	65%
Number of foreign friends (n=104)	1	23	22%
	2	10	10%
	3	11	11%
	4	8	8%
	5 or more	52	50%
Last time saw friend (n=104)	This week	12	12%
	This month	19	18%
	Last month	16	15%
	Two to three months past	19	18%
	More than three months past	27	26%
	Do not remember	9	9%
	Never	2	2%
Foreign friend(s) (n=104)	Sends gifts	86	83%
	Writes to him/her	52	50%
	Says that he/she will come visit overseas on day	30	29%

Work and Living Aspirations

The children were asked about what job they would like when they grow up. As shown in Table ## there were a range of responses, the most common response with 32 (20%) was a doctor, followed by a nurse (20, or 13%) and an engineer (12, or 7%).

Occupation	Count	Percent
Doctor	32	20%
Nurse	20	13%
Engineer	12	8%
Agronomist	11	7%
Pastor	7	4%
Soccer player	7	4%
Teacher	6	4%
Artist/painter	5	3%
Mechanic	4	3%
Musician	4	3%
Secretary	4	3%
Pilot	3	2%
Police	3	2%
President	3	2%
Athlete	2	1%
Business person	2	1%
Driver	2	1%
Engineer	2	1%
Driver	2	1%
Lawyer	2	1%
Singer	2	1%
Tailor	2	1%
Accountant	1	1%
Computer programmer	1	1%
Cook	1	1%
Dance instructor	1	1%
Lawyer	1	1%
Businessman	1	1%
Journalist	1	1%
President	1	1%
Teacher	1	1%
Farmer	1	1%
Florist	1	1%
Glass maker	1	1%
Heavy equipment operator	1	1%
Journalist	1	1%
Missionary	1	1%
Priest	1	1%
Soldier	1	1%
Stylist	1	1%
Surveyor	1	1%
Other	2	1%
Do not know	1	1%
Total	159	100%

As seen in Table ## children were also asked about where they want to live when they are older. As seen in Table ##, the most common answer from 61 (38%) of the children was the USA, followed by 25 (16%) Canada, 14 (9%) Brazil, 13 (8%) France and 10 (6%) Haiti.

Table ##: Where Children Want to Live when they Grow Up from Child Interviews (N=159)		
Place	Count	Percent
USA	61	38%
Canada	25	16%
Brazil	14	9%
France	13	8%
Haiti	10	6%
Spain	4	3%
Argentina	3	2%
China	3	2%
Cuba	3	2%
Africa	2	1%
Britain	2	1%
Dominican Republic	2	1%
Puerto Rico	2	1%
Belgium	1	1%
Brazil	1	1%
Germany	1	1%
Guadeloupe	1	1%
Iraq	1	1%
Israel	1	1%
Jamaica	1	1%
Mexico	1	1%
Peru	1	1%
Portugal	1	1%
Saint Salvador	1	1%
Switzerland	1	1%
Do not know	2	1%
Total	159	100%

Family survey

Family Survey interviews were conducted in order to better understand what motivated parents and other relatives to place children in centers. To reach a sample of geographically diverse relatives, surveyors asked children who were interviewed to provide the locations and telephone numbers of their parents or other close relatives. To accomplish the task of reaching the family members despite limited time and resources, the relatives were then interviewed by telephone. It must be noted that this process created a bias toward the inclusion of families who remained in close contact with their children after their arrival in the institution, and had at least enough financial resources to be able to afford a mobile phone. Sixty numbers were collected, but about half on the list turned out to be wrong or disconnected numbers. Surveyors succeeded in reaching and questioning 32 people for the survey.

Table ##: Family Questionnaire: Centers from Family Interviews (N=32)		
Name of Center	Location of Center	Interviews
Ambrasse un enfant		1
Centre d'accueil du bon berger		1
Centre De Formation Et De Nutrition Des Enfants		3
Centre de jeunes fondation J.A Clermont		1
Centre De Rehabilitation Sociale Des Gonaives et Ecole		1
Centre Vie Marie Immaculee		1
Divine Ministries in hope for children		3
Fondation Timoun Se Lespwa		4
Foyer de notre dame de fatima		4
Haiti Mission Service		1
Maison Fortune Orphanage haiti		1
Mason D'acceil bon berger		1
Mathieu 28		1
Project papillon		2
Recolte Humanitaire		2
Trinity house		1
Venez enfants et vivez mieux		4

Profiles

As seen in Table ##, of the 32 family members of children living in centers who were interviewed, 17 (44%) were the child's mother, 7 (22%) the child's father, 6 (19%) were a sibling, and the rest were other family members. Three (9%) had post-secondary education, and one other had completed high school. Fifteen (47%) had entered but not completed secondary school. The rest had either stopped attending after completing primary school (5, or 16%), or never finished primary school (8, or 25%). The family members were from a range of occupations but the most common were skilled laborers and market women/vendors. One quarter of respondents had another child or children in centers.

Table ##: Respondent Profiles from Family Interviews (N=32)			
Category	Variable	Frequency	Percent
Sex of respondent	Female	19	59%
	Male	13	41%
Relationship to child	Mother	14	44%
	Father	7	22%
	Brother	4	13%
	Sister	2	6%
	Uncle	2	6%
	Family friend	1	3%
	Grand mother	1	3%
	Step mother	1	3%
Educational level	Post Secondary	3	9%
	High school diploma	1	3%
	Incomplete Secondary school	15	47%
	Primary	5	16%
	Incomplete Primary	8	25%
Occupation	Skilled labor	10	31%
	Market woman/vendor	10	31%
	Professional	4	13%
	Farming	6	19%
	Business	3	9%
	Domestic	2	6%
	Nothing	2	6%
Other Children in Centers or Fosterage	Has other child(or children) in center(s)	8	25%
	Has 3 or more children in center(s)	4	13%
	Respondent has child who is a 'restavek'	2	6%

Child placement

Table ## shows who placed the respondent's child in the center, as well as why and how they did so. Thirteen of the respondents (41%) said the child was placed in the center by the mother, 4 (13%) said by the father, 4 by both parents, and 7 by other family members. The primary reason for children being placed into care, from 21 respondents (66%), was financial or economic reasons. Fourteen respondents (44%) said the child was placed in the center through a person who had influence there. Of those 14 only 4 thought they could have placed their child in the center without this contact. Just over half of family members signed a release for their child when they were placed in the center.

Table ##: Placement from Family Interviews (N=32)			
Category	Response	Freq	Perc
Who placed the child in center	Mother	13	41%
	Both parents	4	13%
	Father	4	13%
	Other family	7	22%
	God parents	2	6%
	Non family	2	6%
Why they placed the child in center	Economic stress	21	66%
	Education	2	6%
	Death of mother or father	2	6%
	Health of child	2	6%
	Mother neglect	1	3%
	Step father/pregnant for other man	1	3%
	No time for child	1	3%
	Other	1	3%
How they placed the child in center	Through a contact with influence in the Center	14	44%
	Through other type of contact: Nun, police...	5	16%
	I went and asked them and they took him	8	25%
	They offered a place	4	13%
	Other	1	3%
Thinks he/she could have placed the child without contact inside		4 of 14	13%
Parents/guardians who signed a release		17	53%

Visitation and contact

Table ## shows how much contact respondents have with their children living in the centers. The most common form of contact was the respondent visiting the child in the center. Twenty of the 32 respondents (63%) had spoken with the child on the phone at some time during the last year. Twenty-six (81%) had visited the child at the center during the last year and eleven of the respondents said the child had visited them during the last year.

Table ##: Visitation and Contact I from Family Interviews (N=32)			
Response	Last time spoke with child on phone	Last time respondent visited child	Last time child visited the respondent
Yesterday	1	0	1
This week	4	0	0
Last week	7	5	0
Last month	7	4	0
3 months ago	1	11	3
More than 3 months	0	3	1
Last year	0	3	6
Do not remember	4	2	3
Never	8	4	18

As shown in Table ##, 28 of the 32 respondents (88%) said they missed the child. Most of the respondents whose child had not visited them said they wanted the child to visit. However, only nine of all respondents would have preferred the child to live at home. Nine (28%) respondents hoped the child would return home, but after he or she finished school. This reflects the responses seen in Table ## which show that one of the biggest benefits of the center reported by respondents is the access to education. If the child were to be brought home, 29 of the respondents said they would find the child's godfather, and very few said they would keep the child at home with them.

Table ##: Visitation and Contact II from Family Interviews (N=32)			
Category	Response	Freq	Perc
Respondents desire to be with the child	Says they miss the child	28	88%
	For those who the child has not visited (n=21), respondent	15	71%
	For all respondents (n=32), respondents who would prefer	9	28%
When respondent hopes child will return home	After finishes school	9	28%
	Depends on Center	4	13%
	When I can care for him	4	13%
	When reaches adulthood	4	13%
	ASAP	2	6%
	Do not know	9	28%
Where does respondent think child will go if they close the center	Home/my house/with me	28	88%
	Ask help from the government	25	78%
	To his godfather	2	6%
	Leave the country	1	3%
	Do not know	1	3%
	Keep him	3	9%
What respondent would do if someone brought the child	Find his God Father	29	91%
	Look for another center	1	3%
	Do not know	1	3%
	Home/my house/with me	2	6%

Adoption and fostering

Table ## shows respondents' attitudes towards centers, adoption and fostering. Twenty-five (78%) of the respondents thought a child would be better off in a center than with another family. Only 6 respondents said they would consider placing their child with another Haitian family if the center was not possible.

Although, respondents said they would change their mind and would consider this option under certain circumstances, including if the family took care of the child as their own, if the family put the child in school, and if the family took financial care of the child. Twenty respondents (62%) said they would agree to the child being adopted by a foreigner. Of these, 7 said they would still agree if they knew they would never see the child again.

Table ##: Adoption, Foster and Restavek from Family Interviews (N=32)

Category	Response	Freq	Perc
What is best for a child: other family or center	Much better to give child to a center	1	3%
	Better to give child to a center	24	75%
	Better to give child to family	1	3%
	Much better to give child to other family	1	3%
	Do not know which one is better	5	16%
Would consider	placing child with other Haitian family if they could not get child into center	6	19%
Would change their mind if,	The family put him/her in school	4	13%
	The family paid the child	1	3%
	The family put the child in school and paid the child	10	31%
	The family took care of the child as if their own	14	44%
	Would still agree if they knew they would never see the child again	0	0%
Adoption by foreigners	Would agree if a foreign family wanted to adopt the child	20	63%
	Would still agree if they knew they would never see the child again	7	22%

Table ## shows reasons why a respondent would or would not allow a foreigner to adopt the child. The most common theme that emerged for why respondents would agree to adoption by a foreigner was the idea that it would be in the best interest of the child, that they can take better care of the child and that the child would have a better future if they were adopted by a foreigner. A common theme for not wanting a child to be adopted by a foreigner is that they don't know the person. Some respondents were worried about the child being abused or mistreated after adoption.

Table ##: Reason a Respondent would/would not allow a foreigner to adopt the child from Family Interviews (N=32)

Why Yes	Why No
Because he will help me	Because I heard they steal children
Because I can't take of him	He will be mistreated after he took him
Foreigners will help him get a better future	He would not know his mother
Foreigners will take better care of him	I don't have money to travel to see my child
Haitian and foreigners are different. He will have a better future	I don't know the person
He will help me in the future	I don't know the person
I can't do anything for her	I don't want to
If I can sit and talk with the foreigner	I put him in the center because things were not easy for me
Only if I see him after	They sometimes have them do prostitution
Only if the child will keep in touch with me	Do not know
The child will visit other countries	Many foreigners use children for bad things
They know me as their mother	So he won't forget me
Because I can't take care of him	
He would have a good life	
It would be better for him	
It would be better for him	
It's a good thing	
It's a good thing for the child	
This is an aid	
When a child is adopted its better for him	

Financial support

Respondents were asked if they would keep the child if they were given money to support the child. Nine (28%) said they would keep the child if given \$50 per month in financial help. At \$100 per month, the number who would keep the child rose to 10 (31%). At \$200 per month, the number increased further, to 13 (41%). The majority, 19 (61%), said they would still send the child to the center even if offered \$200 per month in financial support to keep him or her at home.

Table ##: Respondents who would agree to keep the child if someone gave them the following amounts of support from Family Interviews (N=32)			
Category	Response	Freq	Perc
Would agree to keep the child if received:	US\$50 per month	9	28%
	US\$100 per month	10	31%
	US\$200 per month	13	41%
Would not agree to keep child at \$200 per month		19	61%

Quality of the center

Table ## shows the respondents' opinions of the center in which the child was placed. Most respondents (29, or 91%) agreed that the child was eating well in the center, and 20 (63%) said the child ate better at the center than at home. Fourteen (44%) also said that the child got sick less frequently at the center than in the family home.

The overwhelming majority found the center had greater benefits to offer the child than did the home. With only one respondent citing affection, the majority cited food, access to good healthcare and education, and security. Three simply said, "many things." Some were more specific, saying:

creativity and traveling during the summer

play with toys they didn't have home

playing music, speaking English

wisdom and discipline

Twenty-seven (84%) of the 32 respondents thought the child had a better future because they were in the center, and 26 (81%) of the respondents thought the child was more fortunate than children who were not in centers. Only 12 (38%) respondents said that they thought there was a better place for the child. Of those, 9 (75% of the sub-group but just 28% of the total number of respondents) said the child would be better off with them in the family home.

Table ##: Opinion on Quality of the Center from Family Interviews (N=32)			
Response		Freq	Perc
Child eats well in center		29	91%
Child eats better at center than at home		20	63%
Child was often sick when at home		13	41%
Rating of frequency of illness	sick less often	14	44%
	no difference	14	44%
	sick more often	4	13%
Things that respondents like about the center (n=32)	School	19	59%
	Food	12	38%
	treated well/has good life	11	34%
	Healthcare	3	9%
	Security	2	6%
	Church	2	6%
	contact with foreigners	2	6%
	Everything	1	3%
	discipline/control	1	3%
Thinks the child has better future because she is he/she is in center		27	84%
Child more fortunate than children not in center		26	81%
Respondents who say they are happy the child is in the center		25	78%
Respondents who said there was nothing they did not like about the center		23	72%
Respondent him or herself would live in center if permitted		10	31%
Respondents who think there is a better place for the child		12	38%
What better place	A good Christian family	1	8%
	Another country	1	8%
	At home with us	9	75%
	With the foreigners he visited	1	8%

As shown in Table ##, when the relatives were asked what children have at home that they do not have in the center, their typical responses were, “me”, “mother’s affection”, “family’s affection.” Just as many said nothing.

Table ##: What Children Have in the Center that they do not have at Home from Family Interviews (N=32)		
Response	Freq	Perc
Nothing	17	52%
My, mother or family's affection	11	33%
Liberty	2	6%
Affection	1	3%
Tolerance	1	3%
Do not know	1	3%

As shown in Table ##, the few respondents who were not happy with the center highlighted specific problems. Some specific comments illustrated points worthy of consideration. Five respondents said:

We miss him

Because they do not take good care of the him

The director is not nice to the child

I want my child to live with me

We did not mean for them to keep her

Our mother was not supposed to put him there

The uncle of one child also said:

"A friend has two kids in the orphanage; my brother had a child there who died. I only put him there for a while. When we asked the pastor for him he said he will give him back when he turns 18".

<u>Table ##: Problems with the Center from Family Interviews (N=32)</u>		
Category	Response	Freq
Reasons respondents are unhappy the child is in the center (n=9)	I want my child to live with me	1
	Our mother was not supposed to put him there	1
	The director is not nice to him	1
	We did not mean for them to keep her	1
	We miss her	1
	We miss him	1
Things that respondents do not like about the center (n=9)	Children are not allowed to visit their parents	2
	Children prevented from contacting their parents. I want to talk to my child	1
	My child doesn't tell me if anything is wrong	1
	Misses school because of money	1
	The children are always dirty	1
	The children have too much liberty in the streets	1
	The pastor is not nice to my child	1
	Cannot answer	1

General population opinion survey

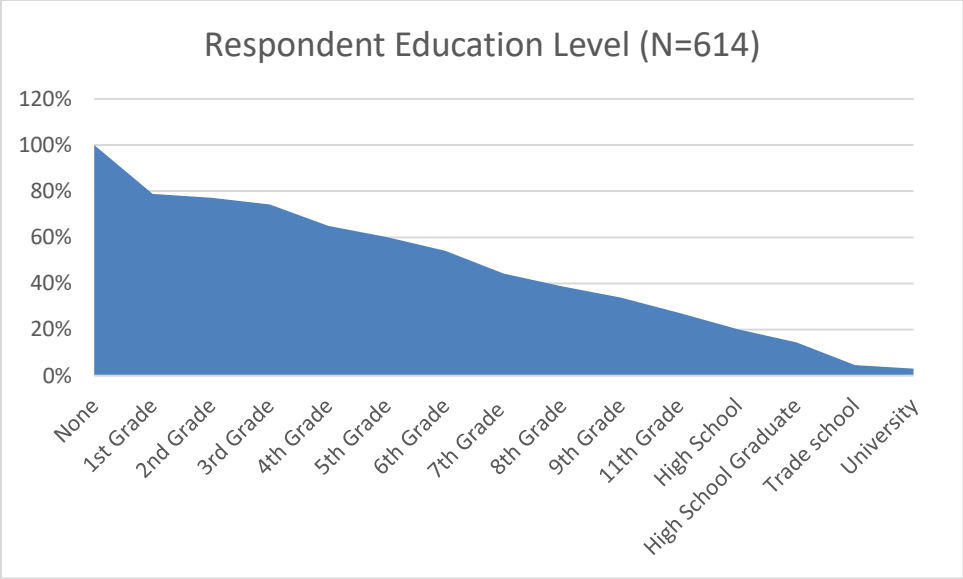
To gauge the attitudes of the general public to the centers, eight surveyors were dispatched to conduct a general population opinion survey. The total of 614 respondents were selected in urban and rural areas across the country. Those interviewed were asked questions about their opinions of centers and adoption.

Demographics

Table ## shows the location of respondents' homes. People from a number of geographical locations were interviewed and there were equal numbers of respondents from different Haitian cities, various countryside locations and towns.

<u>Table ##: General Population Opinion Survey Sampled Respondents (N=614)</u>				
Department	<u>Where the person lives</u>			Total
	City	Countryside	Town	
Artibonite	23	22	8	53
Central Plateau	30	41	35	106
North	0	14	32	46
North West	0	31	37	68
South East	16	31	50	97
West	131	63	50	244
Grand Total	200	202	212	614

Respondents also represented people from differing educational backgrounds and occupational groups. As shown in the graph below, higher education was low with the majority of respondents having not completed or gone beyond high school. The most represented occupation within the respondent sample was a merchant (226 respondents, or 37%). This was followed by farmer and tradesman (Table ##).



<u>Table ##: Respondent Occupations (N=614)</u>		
Occupation	Freq	Perc
Merchant	226	37%
Farmer	80	13%
Tradesman	61	10%
Driver	22	4%
Business	21	3%
Student	16	3%
Teacher Elementary	11	2%
Laborer	10	2%
Teacher High school	10	2%
Professional & Civil	26	4%
Other	18	3%
None	113	18%
Total	614	100%

Knowledge and opinions of centers

The respondents were interviewed about their knowledge and opinions of centers. As seen in Table ##, of the 614 respondents, 223 (36%) know at least one child living in a center. The general opinion of centers was positive with nearly all respondents (96%) saying that they thought centers were overall more good than bad. When asked about the reasons people place children in centers, over half (65%) of the respondents said that it was in the child's best interest to help them advance. Forty-five percent of the respondents said that a family should take a child to a center run by foreigners. The biggest danger of placing children in centers as identified by 164 respondents was sexual abuse. However, just as many (173, or 28%) said there were no dangers in placing children in centers.

<u>Table ##: Knowledge of and Opinions or Centers (N=614)</u>			
Responses		Freq.	Perc.
Respondents who know at least one child living in a Center		223	36%
Respondents who think that Centers are More good than bad		591	96%
Where respondent thinks that most "orphans" originate	Equal	350	57%
	Provinces	145	24%
	Town	119	19%
In who's interest respondent thinks families have in mind when placing child in Center	To help the child advance	398	65%
	To help the family advance	216	35%
Where a family should place their child if they cannot provide for him/her	Center run by foreigners	278	45%
	Center run by Haitians	188	31%
	Haitian family with more financial security	120	20%
	Refused to respond	28	5%
Biggest danger in placing child in a center	Nothing	173	28%
	sexual abuse	164	27%
	bad life for children	141	23%
	selling children	140	23%
	Maltreatment	138	22%
	stealing children's organs	117	19%
	lack of education	97	16%
	Do not know	95	15%
	Never see the child again or forgets family	4	1%

Directors of centers

Respondents were asked about their perceptions of why Haitian people and foreigners start centers. Although the tendency slightly favored foreigner, as shown in Table ##, for both groups, the largest reason was to help the children.

<u>Table ##: Perception on Biggest reason directors start centers: Haitian vs Foreign (N=614)</u>				
Responses	<u>Foreigners</u>		<u>Haitians</u>	
	Frequency	Percent	Frequency	Percent
To make money off the children	157	26%	233	38%
To help the child	446	73%	370	60%
They don't have orphanages	0	0%	4	1%
Other	11	2%	7	1%

Adoption

Table ## illustrates opinions of adoption. Over half of the respondents (62%) thought said it was best to place the child in a center instead of placing the child with another family. Nearly all of the respondents said that they believed most people place their children with other families when they cannot provide for the child. With regards to adoption, 55% said they would let a Haitian adopt their child but fewer (35%) said they would allow a foreigner to adopt their child and take them overseas.

<u>Table ##: Opinions on Adoption</u>			
Responses		Freq	Perc
Which is preferable: to give the child to a family or place him/her in an Center	Another family	231	38%
	Center	383	62%
Adoption	Would let a foreigner adopt their child and take him/her overseas	215	35%
	Would you let a Haitian adopt their child	335	55%
	Would let a foreigner adopt if it meant not seeing him/her ever again	43	7%
A better off family that adopts a child as one of their own, should they also help the family of the child		147	24%
What respondents believe is the primary reason that people place their children with other families	Because they cannot provide	587	96%
	To help child go to school	20	3%
	Other	7	1%

Respondents were also asked about reasons for accepting or refusing adoption. As seen in Table ##, the responses for both accepting adoption by foreign families and Haitian ones were similar. In both situations the primary reason for accepting adoption was that it helps the child. The most common reason for refusing adoption in both circumstances was that the person would miss their child. Forty-one percent of respondents gave this as the primary reason for refusing adoption if those looking to adopt were foreign, while 20% gave this as the reason for refusing adoption by Haitians. This correlates with the information given in Table ## above that shows that more respondents would be willing to allow Haitian families to adopt their child.

<u>Table ##: Primary Reason for Accepting/Refusing adoption of Child (N=614)</u>					
Responses		<u>Foreigner Adoption</u>		<u>Haitian Adoption</u>	
		Frequency	Percent	Frequency	Percent
Yes	Because it advantages the child	126	21%	224	36%
	To help the family advance	89	14%	111	18%
No	I would miss my child	253	41%	120	20%
	Because they could abuse him/her	52	8%	48	8%
	Because it's a shame	14	2%	20	3%
	Other	80	13%	56	9%

Conclusions and recommendations

It is clear from the data gathered on centers, and from responses given by both children and families, that the children living in the centers are better off, in terms of material wellbeing and education, even than the average Haitian child. In 100% of the centers the children have access to power and water on premises. Only ## % of households in Haiti have access to electricity and 7% have access to on premises water source. The significance of having water on premises cannot be gainsaid as and the task of retrieving water typically falls to children, cutting into time that could be better spent engaged in learning or recreational activities. Only 31% of children report doing more work in the center than at home. Ninety-nine percent of primary-school-age children in centers are enrolled in school vs. 76% of children of the same age in the general population. Eighty-nine percent have their own beds in centers, compared to 28.9% in urban households and 10.6% in rural households. Twenty-three percent of children say they have never felt hungry in the home, while 50% say they have never felt hungry in the center. Twenty-six percent say they felt hungry frequently at home, while only 3% (four out of 159 children) say they often feel hungry in the center. Children report receiving an average 2.7 meals per day in centers, compared to 2.1 meals per day in the family household.

Moreover, the children overwhelmingly report preferring the centers. Seventy percent of 155 children say they do not want to go home; 57% say a child lives better at a center than at home in the countryside or a small town, and 92% say a child who has to leave a center and return home should feel sad. This is not

to say that all children were happy. A minority (30%) do want to go home (usually because they missed their family), and there are disturbing cases where directors of the centers are apparently preventing children and parents from being reunited. There are also centers that seem to excessively restrict visitation. Nor is everything perfect with the centers. While most centers clearly have greater resources and are providing for the children better than the average family could, there are areas of neglect,

Variables	Centers (N=51)	Households EMMUS-V 2012 (N=13181)
Sleeps in bed	95%	58%*
Sleeps in own bed/alone	89% ¹	20%*
Flush toilette	96%	8%
Flush toilette or Latrine	100%	56%
Water on premises	100%	7%
Purchase or self-treated water	96%	68%
Electricity	100%	38%
Television in home	92%	29%
Radio in home	87%	55%
Car or truck	79%	5%
Access to primary school	100%	77% ²
Access to secondary school	100%	25% ³
*FAFO 2002		

most notably when children leave the centers. Very few centers have policies of preparing children for adult life outside of the center. Even fewer follow up with the children providing moral support, guidance and sense of identity and belonging as they begin their lives in the adult world. Moreover, in developing standards, the fact that most institutions are materially far better off than the average Haitian household should not limit IBESR in establishing minimum standards for the centers.

Recommendations

Any discussion of residential child-care centers should begin with recognition of the fact that, from the point of view of most families and children, these institutions are not “orphanages.” They are not places filled with children who have no family. They are centers where families send children so they will have access to schooling, health care, nutrition, safe drinking water, and other basic needs their parents and other relatives are unable to provide at home. They are, in the eyes of most parents and children, boarding schools with a social services element, and they should be regulated as such. That means that standards should be met in all of the categories critical to child development – education, health care, nutrition, access to loved ones and other role models, etc. -- and families should be encouraged and supported when they decide a child would be better served by returning to the home.

The centers, as well as IBESR and other institutions that exist for the benefit of children, such as UNICEF, should provide returning reunifying families with some measure of support, which might include, for example, counseling, training, or short-term tuition help, to help them bring their children home from the centers. It should also be recognized that some of the children have indeed been orphaned or abandoned,

¹ Number of children per centers : 56 average – Number of beds per center : 50 average

² enfants de 6 à 11 ans

³ enfants de 12 à 17 ans

or come from families that have little hope of ever being able to provide for them. These children should be provided with additional services to meet their higher level of need.

The regulation of the centers should include the following provisions:

- Every child living in a center should have his or her own bed
- Water should always be provided on premises; treated drinking water should be available at all centers
- All centers should be required to offer access to education
- Centers should be required to meet a set of standards for nutrition (meals per day, servings of meat per week, etc.), health care (minimal frequency of check-ups, etc.), and other basic needs
- Parents should have a right to see children at least once per week
- Parents should have a right to reunite with children, subject to formal request and approval process
- A uniform process for reunification of families should be adhered to, with follow up by social workers, whenever children leave centers to return home
- IBESR should explore a mechanism for encouraging and supporting reunification of families living in Port-au-Prince, where families are more likely to have access to schools, water, and other basic needs without resorting to sending children to a center
- Institutions must provide children with preparations specific to living outside of the institutions on their own
- Children identified as abandoned or truly orphaned (with no immediate or extended willing and/or able to care for them) should be provided with additional services and resources deemed appropriate by IBESR (counseling, supplemental nutrition and health care, remedial education, etc.)
- Abandoned and orphaned children should be receive priority placement on lists of potential adoptees
- Centers should have verified plan what will be done with the children if the center closes

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Annexe 1. Centres sélectionnés pour le questionnaire auprès des enfants

Nom	Adresse actuelle	Type d'institution	Responsable	Téléphone	Statut	Enquêté
1. La main tendre	tabarre 36 A imp biata # 51	Orphelinat	Andre ismaite	3427-6861 / 3671-6281	De bonne qualité	√
2. Projet Papillon	Delmas 33 #5, rue grenadia village colofe	Orphelinat	Jhon Louis Dieubon	3424-0245 / 3458-1474 / 3688-1517 / 2943-1757 (36881517)	de bonne qualité	√
3. Ambrassé un enfant	2, imp paciflor, rue Catalpa Delmas 75	Orphelinat	Delhomme – Thérèse/Max ean Atoine	3624-7079/ 3690-7028/3704-7079	de bonne qualité	√
4. Organisation pour l'Encadrement des Demunis d'Haiti (OEDH)	Carrefour, Waney 87, # 466, Institution Mixte Toussaint Louverture	Orphelinat	Celianie Valmond	3703-3977 / 3554-1868 / 3464-6615 / 3554-1268	?	√
5. Centre de la Mission par la foi pour le secours des enfants demunis	Fontamara 43 # 7, Rue Sassine pres de l'Ecole par la foi	Orphelinat	Danielle Celicourt	3709-4471	à améliorer	√
6. Orphélinat thélusta pour le bien-etre de l'enfants deminus	Petion-ville, rue borno prolongee Mayaman	Orphelinat	Polinice varnia	38049984	à améliorer	√

Nom	Adresse actuelle	Type d'institution	Responsable	Téléphone	Statut	Enquêté
7. Rose Mina de Diegue	Pétionville, Route Freres, rue St-Louis Jeanty # 11, , pres de l'Hopital de la Communauté Haitienne	Orphelinat	Sandra, Rolande, Marie Claude, Osvaldo	3445-5913, 3462-4213, 3623-1676, 3797-8592	à améliorer	v
8. Maison d'accueil bon berger	Pétionville, 54, pernier 40 prolongé	Orphelinat	Casimir Hymler Casimir wilfrid	3664-6252 / 3414-3271	de bonne qualité	v
9. Recolte humanitaire /Harvest for humanites	Kenscoff, 52, Duplan 5, Fermathe	Orphelinat	Narcisse Mie Evelyne	3746-5124	à améliorer	v
10. Lakou Don Bosco	Port-au-Prince, Rue salésiens #1, La saline St Jean Boscot après le carrefour aviation.	Orphelinat	Perre Lefhène	3421-3014	de bonne qualité	v
11. Foyer Notre-Dame de la Nativité	Port-au-Prince, Fontamara 27, Rue Douyon # 8 bis	Crèche	Mme Eveline Louis Jacques, Stephan Louisa	2234-1429 / 3462-5154/3449-2729, 848-448-6394, 3462-5154/3751-3757/3723-5260	de bonne qualité	v

Nom	Adresse actuelle	Type d'institution	Responsable	Téléphone	Statut	Enquêté
12. Foyer Notre Dame de Fatima	Tabarre 36, Rue Sol Solon, Rue la Fleur #38	Orphelinat	Emile Elisabeth	3817-8934 (OK)	de mauvaise qualité	✓
13. La maison du partage	Tabarre, Clercine 16,	Crèche	Magaly François	2812-6475. / 3767-37-70	de mauvaise qualité	✓
14. Kay Bone Timoun	28, BIS IMP JEAN PHILIPPE, PERNIER	Crèche	Joseph Saline Montimor	3841-8624 / 3642-5183	de mauvaise qualité	✓
15. Boy's orphanage	Carrefour, Ruelle Khan #10, rue charpentier, mahotièrè 79	Orphelinat	Gabriel Molien, Massolas Klenor	3462-7185 / 3405-6865 3894-8438/3689-6866	de mauvaise qualité	✓
16. Divine Ministries In Hope For Children	Diquini 63 prolonge Rue Theard #36/ Carrefour, Mahotiere 75, prolongee # 104/,	Orphelinat	Jean Daniel / Miguel Fenelus	3705-7118/ 3746-5192/3431026 8	à améliorer	✓
17. Hands and Feet Project	Jacmel, Cyvadier, rue canadienne #11	Orphelinat	Dr. Ken Pierce	3657-9076/3173-3215	à améliorer	✓
18. Joy in Hope	Jacmel, Route de Meyer,	Orphelinat	Mangine Nicholas Patrick	3878-2886/3743-8858	de bonne qualité	✓

Nom	Adresse actuelle	Type d'institution	Responsable	Téléphone	Statut	Enquêté
	Entrée Ballade night club					
19. Trinity House	Jacmel, route de Wolf 3	Orphelinat	Geilenfeild Michael Petit Homme	3759-1408, 3650-1868	à améliorer	✓
20. Centre des jeunes fondation J.A Clermont	Jacmel, Haut Bassin Caïman/ Monchil II	Orphelinat	Mirlene Vivens	3705-5973 /3406-0311	de bonne qualité	✓
21. VENEZ ENFANTS ET VIVEZ MIEUX	Carrefour, Mon Repos 38 Rue # 544	Orphelinat	Mme Francoise S. bastien / Frantz Bastien	3691-2441 (OK)/ 3931-0065	à améliorer	✓
22. Centre de formation et de nutrition des enfants	Gonaïve, Route nationale #1, 4e section communale	Orphelinat	Jean Nadieul, John Milo	3780-2159, 3929-3036	à améliorer	✓
23. Centre de Rehabilitation sociale des Gonaives + Ecole	Gonaïves, #41, route nationale #1, Descahos	Oprhelinat	Charlenor Dieudonne	3715-0747	de mauvaise qualité	✓
24. Kay Espwa de Imda	Gonaïves, Bretagne 1 # 12	Orphelinat	Dufrene Alfrene	3632-1206	à améliorer	✓
25. Centre Vie Marie Immaculee	Haut de St Marc Barbe	Orphelinat	Mme Dieudonne Batrville	3710-0284	à améliorer	✓

Nom	Adresse actuelle	Type d'institution	Responsable	Téléphone	Statut	Enquêté
26. Haiti Children's Home (HCH)	Mirebalais, Ruelle des enfants, Artiboplage, Chatulee	Crèche	Patricia Smith, Cenob Mathieu	3430-6924, 3724-6147	de bonne qualité	✓
27. Mathieu Vingt-huit	Lajeune - Pignon	Orphelinat	Paulius Lucien	3155-1759	mauvaise qualité	✓
28. Orphelinat Haiti Mission Service	Lajeune - Pignon	Orphelinat	Pasteur Joseph Jeordany	3713-9925	aucune information	✓
29. Maison Fortune orphanage Haiti	Hinche, Ruelle Veronique, Sheppa	Orphelinat	Jean Louis Lefort, Joseph Petrice	3724-8504 / 3915-8005/ 3655-1170	aucune information	✓

Annexe 2 Questionnaire Appel et Directeur (version française)

1-Bonjour/Bonsoir. Nous travaillons pour le compte de l'IBESR. C'est une étude que nous menons et nous allons partager les informations avec des organismes sérieux qui peuvent aider les enfants. Nous aimerions visiter votre local et aussi vous posez quelques questions. Tout ce que vous direz restera secret. Nous vous remercions déjà si vous êtes d'accord, sinon pourriez-vous nous introduire auprès d'une personne pouvant répondre à nos questions? S'il n'y a personne nous allons considérer cela comme un refus.

2- Enquêteur*

3- Département de résidence du répondant*

4- Quartier où se trouve le centre*

5- Quel est le nom de l'institution?*

6- Quel est le statut du centre?*

- fonctionne
- n'existe plus
- existe mais il n'y a pas d'enfants
- déplacer
- autre

7- Le répondant veut répondre ou pas?*

- Oui
- Non

INFRASTRUCTURE

8- Quel type de centre?*

- orphelinat
- crèche
- pour les enfants de la rue
- pour handicapé
- autre

9- Nom du directeur du centre*

9.9. Sexe du directeur du centre*

- Féminin
- Masculin

10- Numero de telephone du directeur du centre*

11- Numero de telephone du centre*

12- Second numero de telephone du centre*

13- Troisieme numero de telephone du centre*

14- Email du centre*

15- Sur combien de "centieme" est bati le centre?*

REPONDANT

16-Nom du repondant10.1- Sexe du repondant*

- Feminin
- Masculin

17- Quel poste occupez-vous au sein du centre?*

- directeur adjoint
- concierge/gerant du centre
- enseignant
- employe du centre
- autre

18- Quel est votre nationalite?*

- Haitien
- Americain
- Canadien
- Autre

ENFANTS

19- Combien d'enfants compte le centre?*

20- Combien de fille?*

21- Parmi les filles, combien d'entre elles dorment dans le centre?*

22- Combien de garcon?*

23- Quel age a le plus jeune des enfants?*

24- Quel est l'age du plus grand des enfants?*

25- Parmi les garcons, combien d'entre eux dorment dans le centre?*

26- Combien d'enfants au total dorment dans le centre?*

27- Y a-t-il des enfants handicapés dans le centre?*

- Oui
- Non

28- Acceptez-vous les enfants seropositifs ou atteints du VIH?*

- Oui
- Non

ENFRASTRUCTURE

29- Avec quel matériaux est bâti le centre?*

- mur et plafond en béton
- mur et plafond de tôle
- en bois et tôle
- autre

30- Combien de toilette y a-t-il?*

30.1- Quel type de toilette?*

- WC
- toilettes en bois
- toilettes en béton
- aucun

31- Ou sont placés les toilettes?*

- à l'intérieur
- dans la cour

32- Combien de toilettes est en service en ce moment?*

31- Ou trouvez-vous de l'eau pour l'utilisation quotidienne?*

- tuyaux
- camion
- à la rivière/source
- pluie
- puit
- fontaine
- autre
-

33- Combien de temps prenez-vous pour aller chercher de l'eau?*

- dans la cour
- moins de 15 minutes

- moins de 30 minute
- 2 heures
- plus d'une heure

34 -Ou trouvez-vous de l'eau pour boire?*

- tuyaux
- camion
- a la riviere/source
- pluie
- puit
- fontaine
- nous l'achetons tout traitee

35- Traitez-vous cette eau?*

- Oui
- Non

36- Combien de television y a-t-il dans le centre?*

37- Combien de radio y a-t-il dans le centre?*

38- Y a-t-il une bibliotheque dans le centre?*

- Oui
- Non

39- Y a-t-il un espace de jeux (balancoires, bac a sable, etc...) pour les enfants?*

- Oui
- Non

40- Y a-t-il un/des terrain (s) ou les enfants peuvent jouer?*

- Oui
- Non

41- Le centre a-t-il une voiture a sa disposition?*

- Oui
- Non

42- Y a-t-il une trousse de premiers soins?*

- Oui
- Non

43-Dans quel etat se trouve la trousse de premiers soins?*

- mauvais

- bien
- bon
- tres bon

44- Y a-t-il un code de conduite écrit et publié où tous les employes peuvent le voir?*

- Oui
- Non

45- Y a-t-il un lieu pour resevoir les visiteurs?*

- Oui
- Non

RESPONSABILITE

46- Ou les enfants vont-ils pour les soins medicaux?*

- hopital prive
- hopital public
- dispensaire
- clinique
- Medecin "feuille"
- Autre

47- En cas d'urgence, ou conduisez-vous les enfants?*

- hopital prive
- hopital public
- dispensaire
- clinique
- Medecin "feuille"
- Autre

48- Quand a-t-on fait un bilan de sante pour les enfants?*

- depuis un mois
- depuis 3 mois
- depuis 6 mois
- depuis 1 an
- depuis 1 an 6 mois
- depuis 2 ans
- jamais

DISIPLINE

49- Quel genre de punition?*

- a genou

- a genou sur une grage
- corvee
- Interdiction de jouer
- Interdiction de manger
- debout sur un pied
- debout dans un coin
- taper
- donner une fessée
- donner une fessée
- autre genre de fessée
- rien
- ne peut répondre
- autre

NOURRITURE

50- Combien de grosses casseroles y a-t-il a la cuisine?*

51- Combien de casseroles de taille moyenne y a-t-il a la cuisine?*

52- Combien de petites casseroles y a-t-il a la cuisine?*

53- Y a-t-il une reserve de charbon ou de gaz pour la cuisson?*

- Oui
- Non

54- Combien de repas prennent les enfants par jour?*

- un par jour
- 2 par jour
- 3 par jour

55- PAM distribue-t-il de la nourriture?*

- Oui
- Non

56- D'autres ONG donnent-elle de la nourriture pour les enfants?*

- Oui
- Non

57- Donne-t-on des fruits aux enfants lors des repas?*

- Oui
- Non

58- Est-ce qu'on leur donne du jus et de la viande a chaque diner?*

- Oui
- Non

DORMIR

59- Combien de chambre y a-t-il?*

60- Combien y a-t-il de lit au total?*

- Oui
- Non

61- Est-ce que les tous petits dorment-ils avec des enfants plus grands?*

- Oui
- Non

62- Pouvons prendre une photo de la chambre ou dorment les enfants?*

- Oui
- Non

63- Y a-t-il un adulte qui dort dans la chambre avec les enfants la nuit?*

- Oui
- Non

TECHNIQUE DE SOIN

64- Combien de personne y a-t-il pour prendre soin des enfants?*

65- Combien de gardiennes y a-t-il?*

66- Combien d'infirmieres y a-t-il?*

67- Combien de medecin y a-t-il?*

68- Combien de travailleur social y a-t-il?*

69- Combien de cuisiniere y a-t-il?*

70- Combien de menagere y a-t-il?*

71- Combien d'enseignant y a-t-il?*

72- Combien d'autre personne y a-t-il que nous n'avons pas citer?*

73.-Quel est le plus haut nivo atteint par le personnel le plus qualifie du centre?*

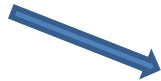
74-Quel est le plus haut nivo atteint par le second personnel le plus qualifie du centre?*

75- Y a-t-il du personnel ayant une formation special concernant la gestion des enfants?*

- Oui
- Non

76- Vous parlez au directeur ou a une autre personne pouvant repondre a toutes les autres questions?

- Oui
- Non



SI NON, ARRÊTER

SI OUI, CONTINUER

77- Qui est le propriétaire du bâtiment?*

- pour le fondateur du centre
- pour l'organisation
- pour le directeur
- pour l'état
- ne répond pas
- location
- autre

78- Qui a financé la construction de l'institution?*

- partenaire étranger
- l'état
- l'église
- la communauté
- les fondateurs
- ne sait pas
- autre

79- Qui est le propriétaire du terrain?*

- pour le fondateur du centre
- pour l'organisation
- pour le directeur
- pour l'état
- ne répond pas
- location
- autre

80- Avez-vous des institutions dans d'autres pays comme partenaires?*

- Oui
- Non

81- Quel organisme est votre plus grand partenaire? *94- A quelle religion adhérez-vous?*

- catholique
- adventiste
- protestant
- pentecotiste
- aucun
- autre

82- A quelle religion adhérez-vous?*

- catholique
- adventiste
- protestant
- pentotiste
- aucun

EDUCATION

83- Y a-t-il une école primaire associée au centre?*

- Oui
- Non

84- Y a-t-il une école secondaire associée au centre?*

- Oui
- Non

85- Y a-t-il des enfants qui sont sponsorisés par des étrangers?*

- Oui
- Non

ETRANJÈ

86- Combien?*104- Y a-t-il des enfants qui sont sponsorisés par des haïtiens?*

- Oui
- Non

87- Combien?*106- Recevez-vous la visite de touristes parfois?*

- Oui
- Non

88- Quel est le principal objectif de ces visites?*

- former le personnel
- visiter les enfants
- choisir des enfants à adopter
- apporter des choses aux enfants
- visiter l'organisation
- évaluer le travail qui est fait
- Travailler dans l'infrastructure
- autre

89- Quel pourcentage de ces visiteurs reviennent une seconde fois?*

90- Quel pourcentage de ces visiteurs reviennent une troisième fois?*

91- Est-ce qu'il y a une enquête pour déterminer si ces visiteurs sont des criminels?*

- Oui
- Non

92- A-t-on l'habitude d'adopter des enfants dans le centre?*

- Oui
- Non

93- Connaissez-vous la "Convention de la Haye sur la Protection des enfants et la coopération en matière d'Adoption internationale"?*

- Oui
- Non

94- Vous rappelez-vous de la dernière fois qu'une loi concernant l'adoption a été votée?*

- Oui
- Non

95- Quand les enfants ont-ils le droit de visiter leurs parents?*

- quand eux ou leurs familles veulent
- en vacances
- autre

96- Quand les familles ont-elles le droit de visiter les enfants (famille biologique)?*

- quand eux ou leurs familles veulent
- en vacances
- autre

PRISE EN CHARGE

97- Combien d'enfants compte le centre?*

98- Combien de filles?*

99- Combien de garçons? 132- Avez-vous une liste de tous les enfants du centre?*

- Oui
- Non

100- Avez-vous un dossier de tous les enfants du centre?*

- Oui
- Non

101- Acceptez-vous n'importe quel enfant?*

- Oui
- Non

102- Est-ce vous qui chechez les enfants ou c'est leur parent ou d'autres personnes qui vous amènent les enfants?*

- nous partons à leur recherche
- famille ou d'autres personnes
- la même
- ne peut répondre

103- Quelle est la première condition pour être admis au centre?*

- leurs parrains sont morts
- leur famille les néglige ou les a abandonné
- leur famille abuse d'eux
- leur famille n'a pas de moyen
- pour une meilleure éducation
- ne peut répondre
- autre

104- Quelle est la seconde condition pour être admis au centre?*

- leurs parrains sont morts
- leur famille les néglige ou les a abandonné
- leur famille abuse d'eux
- leur famille n'a pas de moyen
- pour une meilleure éducation
- ne peut répondre
- autre

105- Est-ce que ces conditions sont écrites quelque part?*

- Oui
- Non

106- Quelle est la première raison pour un enfant de laisser le centre?*

- leur parrain a plus de moyen désormais
- trop âgé
- d'autres personnes les prennent
- ne peut répondre
- autre

107- Quelle est la seconde raison pour un enfant de laisser le centre?*

- leur parrain a plus de moyen désormais
- trop âgé
- d'autres personnes les prennent

- ne peut repondre
- autre

108- Est-ce que ces conditions sont ecrites quelque part?*

- Oui
- Non

109- Apres combien de temps pouvez-vous reviser votre point de vue concernant l'admission d'un enfant?*

- hebdomadairement
- tous les mois
- tous les 2 mois
- tous les 3 mois
- tous les 6 mois
- chaque annee
- plus que chaque annee
- jamais
- ne sait pas
- autre

110- Est-il necessaire de fournir une preparation speciale aux enfants qui quittent le centre?*

- Oui
- Non

111- Fournissez-vous une preparation speciale aux enfants qui quittent le centre?*

- Oui
- Non

112- Suivez-vous les enfants apres leur sortie au centre?*

- Oui
- Non

113- Sur chaque 10 enfants, combien ont une mere ou un pere ou les deux parents?*

114- Combien d'enfants etaient en situation de "reste avec" avant d'etre admis au centre?*

115- Combien d'entre les enfants ont des employes comme parents?*

ABUS, CONNAISSANCE DE LOI

116- Selon vous quel serait le plus grave abus qui puisse survenir a un enfant dans un centre?*

- abus sexuel
- abus violence

- abus psychologique
- rien
- autre

117- Quel autre abus selon vous?*

- abus sexuel
- abus violence
- abus psychologique
- rien
- autre

118- Quel est la dernière fois vous avez eu à faire face à des abus?*

- abus sexuel
- abus violence
- abus psychologique
- rien
- autre

119- Quand cela s'est passé?*

- cette année
- l'année dernière
- il y a 2 ans
- il y a 3 ans
- il y a plus de 3 ans
- ne s'en souvient pas
- ne peut répondre
- ne sait pas

120- Qu'avez-vous fait?*

- appel les casec et les asec
- contacter la police
- contacter l'IBESR
- ne peut répondre
- ne sait pas
- autre

121- Connaissez-vous la loi concernant les punitions infligées aux enfants?*

- Oui
- Non

122- Y a-t-il une récréation pour les enfants tous les jours?*

- Oui

- Non

123- Les enfants ont-ils des devoirs a faire chaque jour?*

- Oui
- Non

124- Connaissez-vous la loi sur le travail des enfants?*

- Oui
- Non

125- Avez-vous jamais entendu parler de la "Declaration des droits des enfants"?*

- Oui
- Non

126- Quelle methode de comptabilite est mise en place?*

- calcul mental
- comptabilite informatise
- comptabilite sur papier
- ne peut repondre
- il n'y en a pas
- autre

127- Avez-vous l'habitude de voyager a l'etranger?*

- Oui
- Non

128- Quelle strategie d'urgence est mise en place en cas de manque d'argent?*

- emprunter de l'argent
- le remplacer par le directeur adjoint
- demander de l'aide a l'etat
- faire appel a une organisation partenaire
- fermer l'institution
- ne sait pas
- autre
- aucun

129- Que feriez-vous avec les enfants si vous deviez fermer le centre?*

- les donner a d'autres institutions
- les renvoyer chez eux
- faire appel a l'etat
- ne sait pas
- autre

130- Par quel moyen recevez-vous des informations du GDH ou de l'IBESR?*

- par mail
- par telephone
- par radio
- journal
- quand il y a une rencontre
- lettre
- autre

131- Le personnel du centre a-t-il reçu une formation dans le cadre de ce travail?*

- Oui
- Non
- Quelques uns

132- C'est quand la dernière fois que vous avez eu la visite d'un représentant de l'IBESR?*

- 1 jour
- 2 jour
- 3 jour
- 1 semaine
- 2 semaine
- 3 mois
- 6 mois
- plus de 6 mois
- ne peut pas répondre

133- C'est quand la dernière fois que vous avez eu la visite d'un représentant agréé?*

- 1 jour
- 2 jour
- 3 jour
- 1 semaine
- 2 semaine
- 3 mois
- 6 mois

- plus de 6 mois
- ne peut pas répondre

134-C'est quand la dernière fois que vous avez eu la visite d'un inspecteur de l'UNICEF?*

- 1 jour
- 2 jour
- 3 jour
- 1 semaine
- 2 semaine
- 3 mois
- 6 mois
- plus de 6 mois
- ne peut pas répondre

135-C'est quand la dernière fois que vous avez eu la visite d'un inspecteur quelconque d'une organisation de la protection de l'enfance?*

- 1 jour
- 2 jour
- 3 jour
- 1 semaine
- 2 semaine
- 3 mois
- 6 ois
- plus de 6 mois
- ne peut pas répondre

136- Coordonnées GPS*

- latitude (x.y °)
- longitude (x.y °)
- altitude (m)
- accuracy (m)

Annexe 3 Appel et Directeur (version créole)

Bonjou/Bonswa. N ap fe yon etud pou IBESR. Etud sa n ap fe ak oganis ki serieu epi ki vle ede ti moun. Objektif se pou konpran instititsyon ki ede ti moun, sa yo manke, sa yo gen pou ofri. Enfomasyon antretyen sa ap rete konfidansyel. Kelkeswa saw di IBESR pap itilize saw di yo kont ou oubyen poul ka konplete yon lot anket. Siw paka reponn kesyon yo, silvouple refere nou yon moun ki kalifye ki ka fe sa. Si pa gen lot moun, nap konsidere sa tankou yo refi.

1- Ankete*

1.2- Depatman kote repondan rete*

2- Katye kot sant la ye*

3- Ki non sant lan?*

5- Ki stati sant lan?*

7- Vle oubyen kapab reponn?*

Wi

Non

7.1- Ki tip sant li ye?*

ofelina

krech

pou ti moun lari

pou andikape

lot

8- Non direkte sant lan*9. Direkte se fi o gason?*

Fi

Gason

9.1- Telefonn direkte sant lan*

9.2- Telefonn sant lan*

9.3- dezyem Telefonn sant lan*

9.4- twazyem Telefonn sant lan*

9.5- Email sant lan*

9.6- Sou ki kantite sant yem te sant lan ye?*

REPONDAN

10- Non repondan an 10.1- Seks repondan an*

Fi

Gason

11- Ki pos ou okipe nan sant lan?*

direkte

epous direkte

direkte adjwen

konsyej/jeran sant lan

anseyan

Anplwaye sant lan

Lot

12- Ki nasyonalite w?*

ayisyen

ameriken

kanadyen

Lot

TIMOUN

13- Konbyen timoun ki genyen nan sant lan?*

14- Konbyen fi?*

15- Nan fi yo, konbyen ki domi nan sant lan?*

16- Konbyen gason domi nan sant?*

17- Ti moun ki pi piti a, ki laj li genyen?*

18- Ti moun nan ki pi gran, ki laj li genyen?*

19- Nan gason yo, konbyen ki domi nan sant lan?*

20- Konbyen timoun ki domi nan sant lan en tou? * 21- Eske gen timoun ki andikape nan sant lan?*

Wi

Non

24- Eske nou akseptè ti moun ki gen SIDA/VIH?*

Wi

Non

INFRASTRUKTI

26- A ki materyo batiman an fet?*

blok epi kouvri ak beton

blok epi kouvri ak tol

An bwa epi kouvri ak tol

lot

27- Konbyen twalet ki genyen? *28- Ki tip twalet yo ye?*

twalet modèn (WC)

twalet an bwa

twalet an beton

okenn twalet

29- Ki kote yo plase twalet yo?*

andedan edifis la

deyo nan lakou

30- Konbyen twalet ki fonksyonel nan moman an?*

31- Kote nou plis jwenn dlo pou sevis kay la?*

tiyo

nou achte kamyon dlo

nan rivye/sous dlo

lapli

pi

fontèn

lot

32- Konbyen tan ou pran pouw al pran dlo sa ?*

nan lakou a

mwens ke 15 minit

mwens ke 30 minit

1 ed tan

plis ke 1ed tan

33 -Kote nou jwenn dlo poun bwe?*

tiyo

nou achte kamyon dlo

nan rivye/sous dlo

lapli

pi

fontenn

nou achte dlo tou trete

34- Eske nou trete dlo nou bwe a?*

Wi

Non

36- Konbyen televizyon ki genyen?*

37- Konbyen radyo ki genyen?*

Wi

Non

39- Eske gen yon bibliotek nan sant lan?*

Wi

Non

41- Eske gen balanswa, glisad, espas ki rezeve pou timoun jwe?*

Wi

Non

42- Eske gen teren/lakou pou timoun jwe?*

Wi

Non

43- Eske gen machin pou sevis sant lan?*

Wi

Non

44- Si gen first aid kit la?*

Wi

Non

45- Eta first aid kit?*

pa bon ditou

ok

bon

bon net

46- Kod de kondwit ekrit epi byen plase pou tout anpwlaye we l?*

Wi

Non

51- Eske gen kote pou resevwa vizite?*

Wi

Non

RESPONSABILITE

53- Kote timoun yo jwenn swen sante?*

swen sante

lopital prive

lopital piblik

dispense

linik

dokte fey

lot

54- Kote yo mennen timoun yo nan ka ijans?*

lopital prive

lopital piblik

dispense

linik

dokte fey

lot

55- ki denye fwa yo te fe bilan sante pou timoun yo?*

depi yon mwa

depi 3 mwa

depi 6 mwa

depi 1 lane

depi 1 lane 6 mwa

depi 2 lane

sa pa janm fet

DISIPLIN

56- Ki metod de pinisyon nou konn sevi avèk ti moun yo?*

ajenou
ajenou sou graj
kove
entediksyon jwe
entediksyon manje
kanpe sou yon pye
kanpe nan kwen
kale sou min
kale sou janm
kale sou deye
kale lot
anyen
pa ka repon
lot

MANJE: Al kanpe nan kwizin

57. Konbyen gwo chodye yo genyen nan kwizin?*

58. Konbyen mwayen choye yo genyen nan kwizin?*

59. Konbyen ti chodye yo genyen nan kwizin?*

60. Eske yo gen resev de chabon oubyen gaz pou kwit manje?*

Wi
Non

61- Konbyen repa timoun yo pran pa jou?*

youn pa jou
2 pa jou
3 pa jou

62- Eske PAM konn bay manje?*

Wi
Non

63- Eske lot ONG konn bay manje pou yo?*

Wi
Non

64- Eske yo ba yo fri (fig, pom, rezen, eks...) nan manje yo?*

Wi

Non

65- Eske yo ba yo vyann ak ji chak manje midi?*

Wi

Non

ZAFE DOMI: al kanpe nan yon nan chanm kot ti moun yo domi

66- Konbyen chanm domi ki genyen?*

67- Konbyen kabann ki genyen an total?*

68- Eske ti fi ak ti gason domi nan menm chanm?*

Wi

Non

69- Eske ti moun piti domi ak sa ki pi gran nan menm chanm?*

Wi

Non

70- Eske yo dako pou pran foto chanm kot ti moun yo domi?*

Wi

Non

72- Eske gen yon granmoun ki domi nan chanm nan lannwit?*

Wi

Non

TEKNIK SWEN/ PESONEL

73- Konbyen moun kap travay spesyalman pou pran swen timoun yo?*

74- Konbyen gadyenn ki genyen?*

75- Konbyen enfimye ki genyen?*

76- Konbyen dokte ki genyen?*

77- konbyen travaye sosyal?*

78- Konbyen kizinye ki genyen?*

79- Konbyen menaje ki genyen?*

80- Konbyen anseyan ki genyen?*

81- Konbyen lot moun ki genyen ke nou pa site?*

82.-Nan tout moun nan sant, moun ki rive pi lwen nan zafe lekòl la, ki nivo li fe?*

Kindergarten
1eme ane fondamantal
2eme ane fondamantal
3eme ane fondamantal
4eme ane fondamantal
5eme ane fondamantal
6eme ane fondamantal
7eme Seconde
8eme Sekonde
9eme Sekonde
3eme Sekonde
Segonn
Reto
Filo
Inivesite
Lekòl pwofesyonel
Okenn

83-Epi apre moun sa, sak gen plis lekòl, ki nivo li fe?*

Menm baga ke anvan

84- Eske gen travay oubyen responsab ki gen fomasyon espesyal nan dirije ti moun?*

Wi
Non

86- W ap pale avèk dirèkte o yo ka jwenn dirèkte o lot moun pou repon tout res kesyon yo?

Wi
Non

87- Ki met batiman an?*

fondate oganizasyon an
oganizasyon an
dirèkte a
leta
pa ka reponn
lwe
Lot

88- Kiyes ki te finanse konstriksyon enstitisyon an?*

Patne etranje

Leta

Legliz

kominote a

fondate yo

pa konnen

lot

89- Ki met te a?*

fondate oganizasyon an

oganizasyon an

direkte a

leta

pa ka reponn

lwe

Lot

90- Eske nou gen patenarya ak lot enstitisyon nan lot peyi?*

Wi

Non

93- Ki pi gwo oganizasyon ki patnew?*

94- Ak ki relijyon li mache?*

katolik

advantis

protestan

pankotis

okenn

Lot

95- Epi sant sa, ak ki relijyon li mache?*

katolik

advantis

protestan

pankotis

okenn

Lot

EDIKASYON

96- Eske nou gen yon lekòl prime ki asosye avek sant la?*

Wi
Non

100- Eske nou gen yon lekòl segondè ki asosye avek sant la?*

Wi
Non

102- Eske gen timoun ki gen blan kom sponso ki voye ed bay yo?*

Wi
Non

103- Konbyen? *104- Eske gen timoun ki gen Aysiyen an Ayiti ki sponso yo?*

Wi
Non

105- Konbyen? *106- Eske nou konn resevwa vizite ki sot lot bo?*

Wi
Non

109- Ki prensipal objektif vizit sa yo?*

fe fomasyon pou pesonel
vizite timoun
chwazi timoun pou adopte
pote bagay pou timoun yo
vizite oganizasyon an
evalye travay kap fet
travay nan enfrastruktir
Lot

111- Nan chak 10 vizite, konbyen tounen yon dezyèm fwa?*

112- Nan chak 10 vizite, konbyen tounen yon twazyèm fwa?*

113- Eske gen yon anket ki fet sou vizite sa yo pou evalye si yo gen kriminal ladan?*

Wi
Non

114- Eske yo konn adopte timoun nan sant lan?*

Wi

Non

117- Eske ou konnen "Convention de la Haye sur la Protection des enfants et la coopération en matière d'Adoption internationale " ?*

Wi

Non

119- Eske ou sonje ki le te denye fwa leta pase yon nouvo lwa sou adopsyon?*

Wi

Non

125- Ki le ti moun gen dwa vizite fanmi yo (fanmi natal)?*

Le yo oubyen fanmi vle

Sou vakans

lot

127- Epi ki le fanmi gen dwa vin visite ti moun yo (fanmi natal)?*

Le yo oubyen fanmi vle

Sou vakans

lot

129- Konbyen timoun ki genyen nan sant lan anko?*

130- Konbyen fi?*

131- Konbyen gason?*

132- Eske ou gen yon lis de tout ti moun ki nan sant la?*

Wi

Non

136- Eske ou gen yon dosie sou chak ti moun ki nan sant la?*

Wi

Non

141- Eske ou aksepte kinpot ti moun ?*

Wi

Non

142- Eske se nou ki plis cheche timoun yo, oubyen se paran oubyen lot moun ki vin kote nou avek timoun yo?*

nou ki plis cheche yo
fanmi o lot moun ki pote bay nou
menm bagay
pa ka reponn

143- Nan lis anba di m ki kondisyon ou plis aksepte timoun nan sant lan?*

parenn yo mouri
fanmi neglije o abandone yo
fanmi ap abize yo
fanmi pa gen mwayen
pou bon edikasyon
pa ka reponn
lot

145- Nan lis anba di m ki dezyem kondisyon ou plis aksepte timoun nan sant lan?*

parenn yo mouri
fanmi neglije o abandone yo
fanmi ap abize yo
fanmi pa gen mwayen
pou bon edikasyon
pa ka reponn
lot

147- Eske ou gen sa ekri yon kote, egzakteman anba ki kondisyon ou aksepte yon ti moun?*

Wi
Non

151- Pou ki primye pi gwo rezon ti moun yo kon sot nan sant la?*

paren vin gen mwayen
rive nan laj
lot moun pran yo
pa ka reponn
lot

153- Pou ki dezyem pi gwo rezon ti moun yo ka sot nan sant la?*

paren vin gen mwayen
rive nan laj
lot moun pran yo
pa ka reponn
lot

155- Eske ou gen ni ekri yon kote egzakteman anba ki kondisyon yon ti moun sipoze sot nan sant la?*

Wi
Non

158- Apre ou pran yon timoun, nan konbyen tan nou konn revize rezon li avek nou?*

chak semenn
chak mwa
chak 2 mwa
chak 3 mwa
chak 6 mwa
chak ane
plis ke chak ane
janme
pa konnen
lot

159 - Eske li nesese pou bay ti moun yon kalite de preparasyon espesyal pou soti nan sant la?*

Wi
Non

160 - Eske nou bay ti moun yon kalite de preparasyon espesyal pou soti nan sant la?*

Wi
Non

165 - Eske ou swiv ti moun yo apre yo sot nan sant la?*

Wi
Non

169- Nan chak 10 timoun ou genyen konbyen ou ta di gen maman oubyen papa oubyen toude?*

170- Konbyen timoun ki te restavek anvan yo vin nan sant lan?*

171- Konbyen timoun ki la ki pitit o fanmi youn nan anplwaye yo obyen fanmi direkte o epous li?*

172- Nan opinyon pa w, ki kalite de abus ki pi grav ki ka fet nan yon sant?*

abi seksyel
abi vyolans
abi sikolajik
anyen
lot

174- E apre sa, , ki kalite de abus ki pi grav ki ka fet nan yon sant?*

abi seksyel
abi vyolans
abi sikolajik
anyen
lot

176- Epi denye fwa nou te gen yon ka de abus nan sant la, ki sa li te ye?*

abi seksyel
abi vyolans
abi sikolajik
anyen
lot

178- Ki le li te ye?*

ane sa
ane pase
2 an pase
3 an pase
plis ke 3 an pase
pa sonje
pa ka reponn
pa konnen

179- Ki sa nou te fe?*

rele asek o kasek
kontakte lapolis
kontakte IBESR
pa ka repon
pa konnen
lot

183- Eske ou konnen lwa ki govenen pinisyon ke gran moun ka bay ti moun yo?*

Wi
Non

191- Eske ti moun gen yon rekreyasyon yo fe chak jou?*

Wi
Non

193- Eske ti moun yo gen yon kalite de devwa yo sipose fe chak jou?*

Wi
Non

195- Eske ou konnen lwa de travay ti moun yo?*

Wi

Non

197- Eske ou janme tande de Declaration de Dwa Ti Moun?*

Wi

Non

99- ki metod kontabilite pwinsipal ki an plas?*

konte nan tet

kontabilite enfomatize

kontabilite sou papye

pa ka repon

pa genyen

lot

200- Eske ou konn vwayaje lotbo?*

Wi

Non

203- Ki strateji ijans ki genyen si ou mouri oubyen si ta manke lajan?*

prete lajan

mete direkte adjwen an nan plas li

mande leta ed

rele yon oganizasyon ki patne nou

nap femen enstitisyon an

pa konnen

lot

okenn

204- Ki sa ou t ap fe ak timoun yo si ou oblije femen sant lan?*

bay lot institusyon

voye yo lakay pa yo

rele leta

pa konnen

lot

205- Koman ou resevwa enfomasyon GDH oubyen de IBESR?*

pa mail
pa telefonn
nan radyo
nan jounal
le gen rankont
yo voye let
lot

206- Eske moun kap travay yo resevwa fomasyon espesyal pou travay avek ti moun yo?*

Wi
Non
kek ladan

209- Ki denye fwa yon reprezantan IBESR te vin vizite nou?*

1 a 3 mwa
4 a 6 mwa
7 mwa a 1 ane
1 ane a 2 ane
3 ane
4 ane
5 ane
plis ke 5 ane
pa ka reponn
Lot

210- Ki denye fwa yon reprezantan agree te vin vizite nou?*

1 a 3 mwa
4 a 6 mwa
7 mwa a 1 ane
1 ane a 2 ane
3 ane
4 ane
5 ane
plis ke 5 ane
pa ka reponn
Lot

211-Denye fwa yon inspekte de UNICEF vizite nou, ki le li te ye?*

- 1 a 3 mwa
- 4 a 6 mwa
- 7 mwa a 1 ane
- 1 ane a 2 ane
- 3 ane
- 4 ane
- 5 ane
- plis ke 5 ane
- pa ka reponn
- Lot

212-Denye fwa kinpot inspekte de kinpot lot oganis te vizite ou, ki le li te ye?*

- 1 a 3 mwa
- 4 a 6 mwa
- 7 mwa a 1 ane
- 1 ane a 2 ane
- 3 ane
- 4 ane
- 5 ane
- plis ke 5 ane
- pa ka reponn
- Lot

213 - Pran koodone GPS*

GPS coordinates can only be collected when outside.

- Satellite
- latitude (x.y °)
- longitude (x.y °)

Annexe 4. Questionnaire « gens de la rue » (version française)

Questionnaire Pour Stratifié 600 Interview, Enquête Péri-Urbain, Urbain Et Rural

Bonjour/Bonsoir. Nous faillons une etude....

1- Enqueteur*

2. Departement de residence du repondant*

2.1. Quartier de residence du repondant*2

3.1. Sexe du repondant*

Feminin

Masculin

3.2 Occupation principale du repondant*

4. Niveau d'education*

5. D'apres vous, un orphelinat est-il benefique?*

plus de mal

plus de bien

6. Connaissez-vous des enfants qui sont dans des orphelinats?*

Oui

Non

7. Pensez-vous que la plupart des enfants dans les orphelinats viennent des provinces?*

province

ville

La meme

8- Tenant compte de ces deux raisons, quel serait la premiere raison pour laquelle les gens envoient des enfants dans des orphelinats?*

plus a l'avantage des enfants

plus pour aider la famille a l'avenir

11. Si une personne a un enfant dont elle ne peut pas en prendre soin et n'a aucune aide pour le faire, avec qui doit-elle confier cet enfant?*

famille riche haitienne

orphelinat appartenant a des haitiens

orphelinat appartenant a des etrangers

Refuse de repondre

12. Quel est le deux plus grands dangers pour les enfants dans les orphelinats en Haiti? (plusieurs choix possibles)*

- abus sexuel
- vol d'organes
- manque d'education
- ils vendent les enfants
- ils maltraitent les enfants
- les enfants vivent mal
- autre

14. Selon vous, qui possede plus d'orphelinat en Haiti?*

- Etranger
- Haitien
- La meme

15. Quel est la principale raison pour laquelle les etrangers creent des orphelinats?*

- pour aider l'enfant
- pour gagner de l'argent
- autre

16. Quel est la principale raison pour laquelle les haitiens creent des orphelinats?*

- pour aider l'enfant
- pour gagner de l'argent
- Ils n'en font pas
- Autre

17. Seriez vous ddu mem avis si on disait "Les orphelinats sont une affaire d'etranger"?*

- Oui
- Non

18. Seriez-vous pret a laisser un etranger adopter votre enfant et partir pour un autre pays avec?*

- Oui
- Non

22. Seriez-vous pret a laisser un Haitien adopter votre enfant?*

- Oui
- Non

28. En general, est-il preferable d'envoyer un enfant chez une personne au lieu de le placer dans un orphelinat?*

- Autre fanille
- orphelinat

24.1 Si une famille accepte qu'une autre famille adopte un de ces enfants, pensez-vous que l'autre famille doit supporter économiquement la famille de l'enfant adopté?*

Oui

Non

29. Quelle est la principale raison pour laquelle une personne accepte de placer son enfant chez quelqu'un en "restavek"?*

parce qu'ils n'ont pas de moyen
pour aider les enfants à aller à l'école
autre

31. Nom du répondant*

31.2 Numéro de téléphone du répondant*

32. Coordonnées GPS*

latitude (x.y °)

longitude (x.y °)

altitude (m)

accuracy (m)

Annexe 5. Liste des familles sélectionnées pour le questionnaire auprès des familles

Nom du centre	Nom des enfants	Adresse de la famille	Nom du/des parents ou relatifs	Téléphone	Survey	Explanation
Projet	Makenson	?	Crystinana (ti	48398302	No	no answer
Ambrassé un	Pierre Louis	BON REPOS	Ketya	34562487	survey	Upload
Ambrassé un	Guervara	?	Orelus	48581814	No	wrong
Ambrassé un	Charles	Port-à-	Marie	373778976	No	no answer
Projet	Emmauella	Leogane	Magaret	31454269	survey	Upload
Projet	Wideline	Silo		31552595	No	Number out
Papillon	Joacine			38196328		of service
Projet	Jesula	Martissant	Sivil	28107794	No	wrong
Projet	Labossire	Cite Soleil		28107794	No	wrong
Projet	Wood	Croix des	Guerda Clervil	47231547	survey	Upload
Maison	Auguste	Delmas 60	Dieula Louis	3619-3677	No	no answer
Maison	Frantzo	Cebonet	Kafou fey,rue	3719-7952	No	wrong
Maison	Jean felix	delmas 33	Jean felix	3829-0150	survey	Upload
Maison	Steevenson	kafou fey	Pierre berthia	3468-1823	no	Tel no service
Recolte	Erica Chery		Damercile	3824-4114	survey	Upload
Recolte	Mahotiere	morne a	Jean Marie	3749-6439	survey	Upload
VENEZ	Moricette	Rivière	Moricette	38609550	survey	Upload
VENEZ	Alexandre	carrefour	Legrand James	3 944 00 05	survey	upload
VENEZ	Elisseau	PauP	Dukens	3 347 3783	survey	upload
VENEZ	Alexandre	Rivière	Benissaint	3 191	survey	upload
Foyer de	Carline	Unknown	Pierre Destin	3824-4916	survey	upload
Foyer de	Dianetelle	Unknown	Fenel Surin	4841-4742	No	out of service
Foyer de	Selene	Unknown	Monique	3630-1315	survey	upload
Foyer de	Guy Claude	Unknown	Katiana	4693-8308	survey	upload
Trinity	Unknown	cayes	Rice Fritza	338 116	no	parents own
Trinity	Jean Clarens	wolf, jacmel	Paul Cyprien	3 795 3787	survey	upload
Maison	Unknown	Raymond	Charles	3 115 1726	no	no answer
Maison	Unknown	marché	Duvivier	3 712 2657	no	no answer
Centre	Frantzo	Kafou	Cebonet	3719-7952	no	Father
Centre	Jean felix	delmas 33	Jean felix	3829-0150	survey	upload
Centre	Steevenson	kafou fey	Pierre berthia	3468-1823	no	voicemail
Divine	Marcelin	delmas 19	Yolene	38052765	survey	upload
Divine	Altema	Cayes	Evelyne	48326504	survey	upload
Divine		Mole	Jean Daniel	37057118	no	unavailable
Divine	Faustin	grand goave	junior Faustin	39224168	survey	upload
Fondasyon	Georges		Joseph Sonia	3476-9842	no	out of service
Fondasyon	Josue Colas		Francois	3698-0098	survey	upload
Fondasyon	Adma		Adma	3109-8395	no	out of service

Nom du centre	Nom des enfants	Adresse de la famille	Nom du/des parents ou relatifs	Téléphone	Survey	Explanation
Fondasyon	Edwins		Elene Pierre	3769-3571	survey	upload
Fondasyon	Carlos		Mona Orphee	3473-2732	no	wrong
Fondasyon	Rene Lucner		Rene Maxo	3481-4487	no	no answer
Fondasyon	Maxi Wilner		Rosana Maxi	3453-4117	no	voicemail
Fondasyon	Cindy		Marie Lourde	3726-5037	survey	upload
Fondasyon	Degramond		Clermicia	3673-6049	survey	upload
Maison	Plaisimé	Bois Verna	Plaisimé	4 216	survey	upload
Maison	Louis Marie	Bassin Zim	Vital Telose (	48652040	no	voice mail
Mathieu	Pierre Louis	La Pila	Delouche	4 606	survey	upload
Mathieu	Pierre	Lajeune	Lucien Judna (	3185	no	wrong
Haïti Mission	Dany Joizil (	Au cap	Pierre Edwige	32946650	no	wrong
Haïti Mission	Bernard	PauP	Bernard	32292458	Survey	upload
Haïti Mission	Holy Kenley	Lajeune,	Hilaire	33330435	no	child of
Haïti Mission	Mercier	La Pilat	Mercier	37400876	no	left
Haïti Mission	Antoine	Ranquitte	Pierre Lucknas	36100180	survey	upload
Centre de	Pierre	Rte des Rails	Pierre Joseline	36378553	survey	upload
Centre de	Michel	Pont	Michel	36281011	Survey	upload
Centre de	Erius	Tarasse (	Damis Chalice	32773415	no	wrong
Kay Espwa	Du Frantz	Jean Rabel	Jean Francois	44360606	no	voicemail
Kay Espwa	Tullien	St Marc	Joseph Marc (	3 688	no	voicemail
Centre de	Michel	Mandrin	Jean Louis	37241128	survey	upload
Centre de	Cadet	Descahos	Pasteur	37150747	no	voicemail
Centre Vie	Primé	PauP	Primé Martha	3 715 1874	survey	upload

Annexe 6. Services d'adoption agréés contactés aux Etats-Unis

Organisations qui ont répondues à la demande d'information concernant l'adoption en Haïti :

- America World Adoption
- European Adoption Consultants

Organisations qui n'ont pas répondues à la demande d'information concernant l'adoption en Haïti (par email et/ou téléphone)

- All Blessings International
- All God's Children International
- Building Arizona Families
- Carolina Adoption Services
- Love Basket
- MLJ Adoptions Inc.
- Wasatch International Adoptions

Annexe 7. Liste des centres pour le questionnaire auprès des directeurs

	Nom du centre	Département	Commune	Type de centre	Date de création
1	Eden Garden Orphanage	Artibonite	Saint-Marc	Centre	Mai 1998
2	Amis De Jesus	Ouest	Kenscoff	Centre	Mars 18, 2010
3	Boy's Orphanage	Ouest	Carrefour	Centre	Mai 16, 1966
4	Centre Chrétien De L'Enfant Haïtien	Ouest	Delmas	Centre	Mars 17, 1987
5	Centre De Formation Et De Nutrition Des Enfants	Artibonite	Gonaives	Centre	Mars 31, 1997
6	Centre De Réhabilitation Sociale Des Gonaïves Ecole	Artibonite	Gonaives	Centre	Mars 01, 2003
7	Centre Vie Marie Immaculée	Artibonite	Gonaives	Centre	Janvier 10, 2010
8	Kay Espwa De Imda	Artibonite	Gonaives	Centre	Juillet 2010
9	La Maison Du Sourire	Ouest	Leogane	Centre	Février 1987
10	Lamb Centre Ministries Children Home/Hope Vision	Nord-Ouest	Port-De-Paix	Centre	Novembre 2012
11	Maison Des Enfants De Dieu	Ouest	Delmas	Centre	Awaiting response
12	Maison Fortune	PlateauCentral	Hinche	Centre	Février 19, 2000
13	Ministère D'Évangélisation Et De Secours Sans Frontière	Nord-Est	Ouanaminthe	Centre	Janvier 2000
14	Nous Et Les Autres	Nord	Cap Haïtien	Centre	Awaiting response
15	Orphelinat Thelusta	Ouest	Pétionville	Centre	Juillet 2011
16	Orphelinat Ledier	Plateau Central	Mirebalais	Centre	Octobre 13, 2001
17	Orphelinat Le Foyer D'Enfant Esprit De Vérité	Nord-Est	Ferrier	Centre	Octobre 22, 1982
18	Orphelinat Odasca	Ouest	Carrefour	Centre	Octobre 15, 1995

	Nom du centre	Département	Commune	Type de centre	Date de création
19	Zanmi Lakay	Ouest	Pétionville	Centre	Juillet 2010
20	Orphelinat Les Enfants de Jésus	Ouest	Kenscoff	Centre	Août 2005
21	Fondation pour les enfants d'Haiti	Ouest	Delmas	Centre	Awaiting response
22	Foyer accueil Lasalien	Nord-Ouest	Port-De-Paix	Centre	Octobre 4, 2008
23	Foyer des orphelins d'Haiti	Ouest	Port-Au-Prince	Centre	Juin 12, 2007
24	Foyer d'espoir pour enfants d'Haiti	Ouest	Port-Au-Prince	Centre	
25	Haiti children's home	PlateauCentral	Mirebalais	Centre	
26	Haiti Mission Service	Nord	Pignon	Centre	
27	Harvest for Humanity	Ouest	Kenscoff	Centre	
28	Hope children home	Nord-Ouest	Port-De-Paix	Centre	
29	Kenbe timoun yo nouvelle mission	Nord-Ouest	Saint-Louis-Du-Nord	Centre	
30	Foyer Lakay	Ouest	Cite Soleil	Centre	
31	Maison d'accueil bon berger	Ouest	Pétionville	Enfants des rues/délinquants	
32	Maison l'Espoir	Nord-Ouest	Port-De-Paix	Centre	
33	Mathieu 28	Nord	Pignon	Centre	
34	North western children's home	Nord-Ouest	Saint-Louis-Du-Nord	Centre	
35	Organisation pour l'encadrement des démunis D'Haiti	Ouest	Carrefour	Centre	
36	Crèche Ciel bleu	Ouest	Croix-Des-Bouquets	Crèche	
37	Les Petits Anges de Dieu/ God's littlest Angels	Ouest	Pétionville	Crèche	
38	Brebis de st. Michel de L'attalaye	Ouest	Pétionville	Crèche	

	Nom du centre	Département	Commune	Type de centre	Date de création
39	Children Of The Promise	Nord	Cap Haitien	Crèche	
40	Foyer Notre Dame De La Nativité	Ouest	Port-Au-Prince	Crèche	
41	Rivers Of Hope	Ouest	Pétionville	Crèche	
42	Rose Mina De Diegue	Ouest	Pétionville	Crèche	
43	Wings of Hope	Ouest	Kenscoff	Handicapés	
44	Location Mefibrochet	Ouest	Croix-Des-Bouquets	Handicapés	
45	Maison Des Benedictions	Nord	Quartier-Morin	Handicapés	
46	Centre de la mission par la foi pour le secours	Ouest	Carrefour	Enfants en domesticité	
47	Centre d'accueil de Carrefour	Ouest	Carrefour	Enfants des rues/délinquants	
48	Centre D'Accueil Des Enfants Démunis D'Haiti	Ouest	Croix-Des-Bouquets	Enfants des rues/délinquants	
49	Fondation Timoun Se Lespwa	Ouest	Leogane	Enfants des rues/délinquants	
50	Foyer Lakay	Nord	Cap Haitien	Enfants des rues/délinquants	
51	Kay Timoun	Ouest	Leogane	Enfants des rues/délinquants	

Annexe 8. Echantillon original des institutions sélectionnées au hasard pour le projet

	Nom	Adresse Actuelle	Type d'institution: orphelinat, creche, autre (précisé)	Responsable	Téléphone
PauP	30. New Life Link (foyer d'espoir pour les enfants d'Haiti)	Port-au-Prince, #261, route des Dalles, Fort Mercredi pres du Fort Mercredi/bolosse, fort mercredi #80, carrefour feuilles	Orphelinat	J. Jacob Bernard, Miltha St-Fleur	3457-7989/ 3862-0650/ 3103-6070
	31. Little Children of Jesus Home	Port-AU-Prince	Orphelinat		
	32. Institution Notre Dame Victor + Ecole Oeuvre Notre Dame des Victoires	Lalue #128	Orphelinat	Soeur Marie Veronique Robious	3835-8857/ 3556-8840
PV	33. Foyer du Soleil	Nouvelle Adresse d'apres Ambassade de France: Thomassin 25, rue de l'eglise n25, face a l'epicerie.		Dr. Elcy Lubin Faucher	3555-7331 / 3401-2912
	34. Foyer des Enfants demunis	Route de Freres, dans les Gallets Impasse Egal #27, Pres Pont Metallique/ rue la pepinière prolongée bas Duval imp, union #1		Pasteur Franckel	3709-9074 / 3465-0886
	35. Orphélinat thélusta pour le bien-etre de l'enfants deminus	Petion-ville, rue borno prolongee Mayaman	Orphelinat	Polinice varnia	38049984
Delmas	36. Centre Chretien de l'Enfant Haitien	Delmas 65, Ruelle Jasmin Henec # 21 Bas Caritas, A droite		Past. Edma Luc	3744-4237 / 3461-9774

	Nom	Adresse Actuelle	Type d'institution: orphelinat, creche, autre (precisé)	Responsable	Téléphone
	37. Childr en fondation of Haiti	INEXISTANT (Delmas 19, 2eme Ruelle Jeune, # 34, DEMENAGE (Enfants evacues a SOGED)			
	38. Orphelinat Fondation rom pour les enfants miserables FREM	Delmas 31, Rue Catherine Flon # 4 maintenant avant Delmas 31 Rue magloire # 25.	Orphelinat	Altenor Carole	3417-6940 / 3708-8439 / 3417-6937 / 3798-4227
	39. Collectif des enfants demunis Tiburon pour la ronde Nationale (CEDTRON)	Delmas 18, Rue Dartiguenave et Candio #8		Gedelene Henri, Jean Claude Cetoute	3667-3245, 3677-4992
Site Soley	40. Centre d'accueil pour les enfants necessiteux	Cite Soleil, Village des Rapatries, Fontaine Rte Neuve, Cite Soleil, Cité soleil, village des rapatries 2eme boulevard rue jean price mars.		Pasteur Phele Rolin:	3654-6581 / 3846-6193
Kafou	41. Foyer du Bel Amour	Paloma Rue la Paix # 9,	Orphelinat	Laurie Agenor	34-51-98-35 / 3407-7838 / 3901-2102 / 3791-1843 / 3451-9825
	42. Orphelinat Odasca	Debrosse Prolongee Villa Jasmin Trutier #3, autre indice Eglise Pasteur Christian, Ecole Odascat	Orphelinat	Osirius Austin, Wania Austin	3727-5651, 3923-0077
	43. Des mains unies pour sauver les enfants deminus	Diquini 63 a cote du lycee Henry Christophe	Orphelinat	Aloude Jouissance	3687-8300
Tabar	44. Nid d'Amour	Tabarre, #8, Village Montfleuri, Tabarre 48		Edith Salomon	3755-2380
	45. Orphelinat Gaira (Village Theodat)	Clercine 22, Impasse Cenor, Pres Village Theodat		Pierre Richard Mirand, Prima Jordanie	3759-3689

	Nom	Adresse Actuelle	Type d'institution: orphelinat, creche, autre (précisé)	Responsable	Téléphone
Kenskoff	46. Grace Children's Home	Fort Jacques 4 #12, a l'entrée du sous commissariat de Fermathe (verifier l'adresse 3,, Plaza Port de Paix		Marc Hubert Georges, Renold Jean Bazin:	3489-1237/2246-5526, 3475-2624/3802-3879 pharrington@cox.net
	47. AMIS DE JESUS	KENSKOFF97 IMP MALVAL #8	Orphelinat	Nicolas Maxilien / Jean	36927709 / 3705-1003
Kwa de bouke	48. Organisation pour le developpement de l'etre humain (ODETH)	Croix des Bouquets, Marin 16 # 5, Route de Bon Repos, La Plaine.		M. Emmanuel Deronville	3841-6242 / 3590-4754 3415-6059
	49. Maison de la Grace	Lilavois 1, rue de la Paix # 15 Lilavois 3, # 26	Orphelinat	M. Louissaint Joseph	3860-6456 / 3722-1775
	50. Centre d'accueil des enfants demunis d'Haiti (CAEDHA)	Rte Nationale #1, Lilavois 53, Carrefour Marassa entre Famosa et Institution Mixte MEGA, Carrefour Chada Dos BNC #66		Solange Pierre, Esnel Auguste	3475-5520 / 3763-3326 / 3727-3452 / 3419-8131
	51. bonafides	Bon Repos, Entrée Lizon 22 # 36 Bis			
Leogan	52. Lamb Center Ministries Children Home	Ave St Mathieu Rte Nationale #2 Macombe #265		Jeannot Desseus	3775-9652 / 3751-4139
	53. La maison Notre Dame de la Charite	Leogane, Haut Mithon	orphelinat	Soeur Elianne St Jacques	3780-9493
	54. Operation Love the Children (OLTCH)	Route nationale #2 avant le pont			
	55. New Voice			Gesner Nozil	37874582
	56. Maison notre Dame de la Charite			Saint Jacques Elianne	
Gonaive	57. Centre de formation et de nutrition des enfants	Route nationale #1, 4e section communale, Gonaive	Orphelinat	Jean Nadieul, John Milo	3780-2159, 3929-3036

	Nom	Adresse Actuelle	Type d'institution: orphelinat, creche, autre (précisé)	Responsable	Téléphone
	58. Centre de Rehabilitatio n sociale des Gonaives + Ecole	#41, route nationale #1, Descahos	Orphelinat	Charlenor Dieudonne	3715-0747
	59. Centre Vie Marie Immaculee	Haut de St Marc Barbe	Orphelinat	Mme Dieudonne Batrville	3710-0284
	60. Maranatha Children Room	La Carenne # 79	Orphelinat	Mackendy Philogene, Nordeus Anoux	3662-9346 / 3629-4815
	61. Kay Espwa de Imda	Bretagne 1 # 12	Orphelinat	Dufrene Alfrene	3632-1206
Kap	62. Croix Rouge	Max Laroche, Rue 12	ORPHELINAT	Laurence	
	63. Maisons des Benedictions	Quartier Morin	Centre d'Accueil	Past Sadock Heriveaux	34614340 / 38916073
	64. Foyer des enfants de Berhee	Ruelle Casimir #48 Char	ORPHELINAT	M Gédéus Hertz	
	65. Nous et les Autres	Petite Anse	ORPHELINAT	Mgr Jacques Mary Charles	36567744 / 34616146
Ouanami nthe	66. Orphelinat le foyer d'enfant Esprit de verite	Rue Marie Therese, Ferrier	ORPHELINAT	Martel Maxime	38205863
	67. Ministere d'evangelisati on et de secours sans frontier MESSEF	Ouanaminthe, Quartier Manquette, SC de Savane Longue	ORPHELINAT	Altesse Augustin	3703-3035 / 33684711
	68. Eben Ezer	Ruelle Zanna, Cite Planteau	ORPHELINAT	Nitelus Noel	3724-7359
	69. Orphelinat Bethanie	Ferrier, Rue Marie Therese	ORPHELINAT	Pasteur Zénas Pierre	3643-7118
Mirabalais	70. Orphelinat Ledier 1	Mirbalais		Pasteur Yves	
	71. Orphelinat Ledier 2	Mirbalais		Pasteur Benoit	
	72. Enfant arivage et Aff. sociales	Hinche		Garry Aff. sociales	
	73. Maison Fortune	Hinche (Sheepa)		Jean Louis Lefort	

CRECHE

	Nom	Adresse Actuelle	Responsable	Téléphone
PauP	74. Foyer Notre Dame de la Nativite	Port-au-Prince, Fontamara 27, Rue Douyon # 8 bis	Mme Eveline Louis Jacques, Stephan Louisa	2234-1429 / 3462-5154/3449-2729, 848-448-6394, 3462-5154/3751-3757 comtessline@hotmail.com, phane001@yahoo.com
PV	75. Brebis de st. Michel de L'attalaye (BRESMA)	Petionville, Route de Freres - Rue St. Louis Jeanty, Impasse st. Cyr #13 apres le pont/ Delmas 105 rue	Margareth St. Fleur et Winer Henrique, Clairnise or Alberte/ Caroline Saint Cyr	3760-3915 / 3445-6262 / 3713-1358 / 3552-2099, 3400-979
Delmas	76. Faith-Hope-Love Enfant Rescue	Rue Dalia #4 Delmas 75	Doroty Pearce, Jesula Joseph/ Chery Samuel Emile	3529-1962 / 36 19-4488 / 3412-5976
	77. Foyer de Sarah	Delmas 75	Jeune eddy, Luc Jeune	3720-1917 / 3892-1392
Tabarre	78. Auberge de la Fraternite	Tabarre 48, #39, Rue Solidarite	Jn Baptiste Murielle	3410-5460 / 3534-4113 / 3410-8466 / 3448-8466
Cape H	79. Children of the Promise	Cap-Haitien Lagosette	Nick Stolgerg, Cenatus HERN	38892447 / 36660633
Montrouis	80. CANAAN, Les precieux bigoux du Seigneur	Montrouis, 1ere Section communale St Marc	Gladys Mecklembourg, F. Henry R. Gaetjens	3667-2864, 3730-6865
Jacmel	81. Petit Ange de Jacmel	Breman a l'interieur a gauche du conseil communautaire	Wilbert Placide, Pascaline L. Placide	3717-5170, 3824-2689
	82. Foyer des Petits Demunis	Leogane, Chatuley	Mme Morin B. Sherly	36743306

FOYERS POUR HANDICAPES

Institution	Commune
CERMICOL	Delma 33
Prison civile de Pétiion-ville	Petion Ville
CAC Centre d'Accueil de Carrefour	Carrefour
Family Circle Boys Home	Port-au-Prince
HSKI Complex	Jacmel
The Haiti Micah Project	Mirabalais
Zanmi Lakay	Delmas
Fort National	Port-au-Prince
Salesion Mission	Cite Soleil
Fondation Timoun se lespwa	Léogâne
Les petits démunis	Léogâne
Foyer des Petits Démunis	Léogâne
Greta Home Academy	Léogâne
Kay Timoun	Léogâne
La maison du sourire	Léogâne
Ophelinat Chretien de Leogane	Léogâne
La maison Notre Dame de la Charité	Léogâne
Maison des Enfants de Dieu	Delmas
Foyer Lakay	Cap-Haïtien
St. Vincent's Center	Port-au-Prince
Jacmel	Port-au-Prince
Orphelinat Wings of Hope	Kenskoff
The Miriam Center	St Louus
Maison des Enfants Handicapés	Petion Ville
Orphelinat Wings of Hope	Kenskoff

FOYERS POUR ENFANTS DE LA RUE ET LES PRISONS POUR MINEURS

Nom	Adresse Actuelle	Responsable	Téléphone
Foyer Notre Dame de la Nativite	Port-au-Prince, Fontamara 27, Rue Douyon # 8 bis	Mme Eveline Louis Jacques, Stephan Louisa	2234-1429 / 3462-5154/3449-2729, 848-448-6394, 3462-5154/3751-3757 comtesline@hotmail.com, phane001@yahoo.com
Au Bonheur Des Enfants	Port-au-Prince, Canape Vert #53	Andre Sonia	3462-2998/ 3436-8308
Horizon de L'espoir	Port-au-Prince, Rue Carlstrain # 25 - Bois Verna, ruelle Carlstroum #25	Katlelen Douyon	3454-8615 / 3550-1656/ 3705-4242/ 3724-9457
Foyer de Sions	DEMENAGE a Fontamara 43, Rue Village Royale # 10 Pas loin de Royal Haitian	Mme Marjorie Mardy,	3720-9869 /3448-9192, 3747-3138/ 3720-9869 sion-in-haiti@yahoo.fr
Brebis de st. Michel de L'attalaye (BRESMA)	Petionville, Route de Freres - Rue St. Louis Jeanty, Impasse st. Cyr #13 apres le pont/ Delmas 105 rue	Margareth St. Fleur et Winer Henrique, Clairnise or Alberte/ Caroline Saint Cyr	3760-3915 / 3445-6262 / 3713-1358 / 3552-2099, 3400-979
Rivers of Hope	Petionville, Thomassin 32, Impasse Namphy, suivre route asphaltee a droite	Rachelle Danache	3402-4067
Foyer de la Nouvelle Vie # 1	Petionville, Rue Villate #105/ Laboule 24 #8	Mme audette Jn Baptiste/ rose Yva Samedi	3427-0309 / 3816-9482 / 3807-2525
Rose Mina de Diegue	Petionville, Route Freres, rue St-Louis Jeanty # 11, , pres de l'Hopital de la Communaute Haitienne	Sandra, Rolande, Marie Claude, Osvaldo	3445-5913, 3462-4213, 3623-1676, 3797-8592
Faith-Hope-Love Enfant Rescue	Rue Dalia #4 Delmas 75	Doroty Pearce, Jesula Joseph/ Chery Samuel Emile	3529-1962 /36 19-4488 / 3412-5976
Foyer de Sarah	Delmas 75	Jeune eddy, Luc Jeune	3720-1917 / 3892-1392
Boy's Orphanage	Carrefour, Ruelle Khan #10, rue charpentier, mahotiere 79	Gabriel Molien, Massolas Klenor	3462-7185 / 3405-6865 3894-8438/3689-6866
Maranatha Children's Home	Tabarre, Rue 6, Clercine 19	John Mc Hou/ Tlucek Byron	3449-0668/ 3829-4913
Auberge de la Fraternite	Tabarre 48, #39, Rue Solidarite	Jn Baptiste Murielle	3410-5460 / 3534-4113 / 3410-8466 / 3448-8466

Nom	Adresse Actuelle	Responsable	Téléphone
Kay Tout Timoun	2e Maison, Impasse Babeu, Bute boyer, Croix des Missions, impasse balève #3	EVENS SAINT LOUIS	3425-6167 / 3403-8556 / 3403-7229 / 3420-5555 / 3734-9425/3458-9410
Lecado	Carffour Boileau		
Children of the Promise	Cap-Haitien Lagosette	Nick Stolgerg, Cenatus Herns	38892447 / 36660633
Creche Bon Samaritain des Gonaives (C.B.S.G)	Route de Bassin, #9, Gatreau	Inelus Luccene, Fleur Dieupere	3437-6554, 3743-9232
CANAAN, Les précieux bigoux du Seigneur	Montrouis, 1ere Section communale St Marc	Gladys Mecklembourg, F. Henry R. Gaetjens	3667-2864, 3730-6865
Grace Children's Adoption Home/ Grace Children	P-de-px, GriGris (Woast Rue de la Plaza #3)	Cindy Lachbrook / Past Ciloes Andy	3745-1834 (numeros sur liste precedente: 3751-6112/ 3423-3077)
Petit Ange de Jacmel	Breman a l'interieur a gauche du conseil communautaire	Wilbert Placide, Pascaline L. Placide	3717-5170, 3824-2689
Pemerle	Pemerle, Zone Lycee Saint Joseph, Fond des Negres	Emilien Amila	3720-8080
Foyer Notre Dame du Perpetuel Secours	Route Nationale #2, Chalon, Miragoane	Sr. Luvia Joseph	3773-0153, 3886-8305, 3407-0303, 3746-5478
Foyer des Petits Demunis	Leogane, Chatuley	Mme Morin B.Sherly	36743306

Annexe 9. Meilleures pratiques sur les institutions existantes en Haïti – IBESR 2012

Avec l'objectif d'inculquer les meilleures pratiques sur les institutions existantes en Haïti IBESR (2012) a proposé les critères suivants

- 1) La pratique professionnelle
 - Buts et objectifs de l'institution écrits
 - Politique de protection de l'enfant, Code de Conduite, écrite, affichée et connue de tous les employés et enfants
 - Politique de protection de l'enfant, Code de Conduite, écrite, affichée et connue de tous les employés et enfants
 - Bonne pratique démontrée en matière de protection des enfants par les employés
 - Processus d'admission et de référence clairs
 - Tous les enfants ont un projet de vie individuel
 - Tous les placements sont revus régulièrement
 - Les soins d'accompagnement existent pendant et après la prise en charge (suivi)
- 2) Les soins personnels
 - L'alimentation des enfants est adéquate, correctement préparée, nutritive et saine
 - Les enfants ont accès à des soins de santé préventifs et curatifs
 - Les jeux et les activités récréatives sont encouragés
 - Le droit des enfants à l'intimité des enfants est respecté
 - Les enfants reçoivent l'appui nécessaire pour pouvoir faire des choix informés
 - Les enfants sont traités avec dignité et respect en tout temps
- 3) Les employés responsables des soins
 - Les relations et les attachements positifs des enfants sont encouragés
 - Le sens d'identité des enfants est maintenu
 - Les méthodes de contrôle et de sanctions sont définies
 - Les enfants sont encouragés à exprimer leurs opinions et leurs idées
 - Les enfants ont accès à l'éducation formelle, informelle et professionnelle selon leurs besoins
 - Les besoins spécifiques des bébés et des jeunes enfants sont satisfaits
- 4) Le personnel responsable de la prise en charge des enfants
 - Les procédures de recrutement et de sélection assurent une prise en charge de qualité et la protection des enfants
 - Les employés reçoivent l'appui requis et sont supervisés régulièrement
 - Le déploiement du personnel assure une prise en charge de qualité et la protection des enfants
 - La formation et le développement professionnels sont disponibles pour les employés
- 5) Les ressources

- Les services sont accessibles et appropriés pour leur objectif
- Le logement des enfants favorise leur santé et leur développement

11) La gestion

- Des dossiers appropriés de programme sont maintenus
- Les dossiers et les détails confidentiels des enfants sont respectés et maintenus
- Les propriétaires et les gestionnaires des programmes de prise en charge sont imputables et redevables (à l'IBESR)

Annexe 10. Proposition technique

Cette proposition répond à un appel d'offre de l'IBESR relatif à une étude sur les enfants placés en institution⁴ en Haïti. En collaboration avec le bureau régional de l'UNICEF pour l'Amérique Latine et les Caraïbes (TACRO) et avec le soutien de la Commission Interaméricaine des Droits de l'Homme (CIDH), l'IBESR souhaite conduire une étude de la situation et des conditions des enfants placés dans ces établissements. Plus précisément, l'étude se concentrera sur les raisons de l'institutionnalisation de ces enfants, sur le processus de placement dans les institutions, et sur le type de soutien, de soins, et de protection qu'ils reçoivent dans ces établissements. L'étude contribuera au développement de politiques et au processus de prise de décisions pour l'État haïtien, et au-delà, pour l'ensemble des organismes de protection de l'enfance.

L'étude sera divisée en quatre phases : Revue de la littérature, Recherche Qualitative, Étude Quantitative, Analyse et Élaboration du rapport final. À la fin de chaque étape, le consultant présentera ses conclusions et plans de recherche pour la phase suivante au Comité Technique composé de représentants de l'IBESR et de l'UNICEF.

1. Revue de la littérature (2 semaines): un examen des ressources écrites disponibles relatives aux institutions pour enfants en Haïti : y compris les lois Haïtiennes et internationales, les rapports de l'UNICEF et autres organismes de protection de l'enfance, traités universitaires, enquêtes journalistiques, ainsi que d'un examen et une analyse du contenu des sites web des institutions haïtiennes.

Résultat: La connaissance d'enquêtes passées et observations clés; l'histoire et le contexte politique dans lequel se sont développées les institutions (maisons d'enfants en particulier) en Haïti, relation à la demande d'adoption des pays développés, les agences d'adoption et de parrainage d'enfants; recueil des définitions juridiques et des lois régissant les institutions; développement d'un guide de recherche pour l'étude qualitative à suivre.

2. Enquête qualitative (6 semaines): Entrevues avec des spécialistes clés dans le domaine de la protection de l'enfance : responsables et spécialistes du gouvernement, des Nations Unies et des ONG. La méthodologie employée sera celle d'entretiens directs.

Résultat: mieux comprendre l'histoire des institutions en Haïti, leur relation avec l'adoption et le parrainage; le système administratif existant pour la gouvernance, la surveillance et la réglementation, les problèmes perçus et les plans pour l'extension d'un système de suivi et de responsabilisation.

⁴ Par institution, on entend l'ensemble des centres prenant en charge l'enfant à temps plein tels que les maisons d'enfants, les centres de détention, les établissements pour enfants handicapés, etc.

2.1. Le consultant visitera également un échantillon d'au moins 40 institutions (maisons d'enfants, centres de détention (masculin et féminin) et centres pour enfants souffrant de handicaps) et conduira des entrevues - avec l'aide d'un guide écrit - avec les directeurs des institutions, les employés, les voisins et autres membres non-institutionnels de la communauté (maire, prêtre, nonne, infirmière, médecin). Les entrevues seront suivies par une recherche menée sur internet afin de vérifier les réponses faisant référence à des organismes extérieurs. Une méthode d'entrevues directes sera utilisée, avec demande de documentation, suivi de la recherche via internet, poursuite des contacts avec les représentants pour les institutions étrangères associées. De manière à obtenir un point de vue comparatif de la part des informateurs dans les communautés. La sélection des institutions pour l'échantillon qualitatif sera faite par communauté et en sélectionnant plusieurs institutions situés dans cette même communauté ou ses environs.

Résultat: comprendre les structures administratives et financières des organisations, leur conformité avec les lois, leur sources de soutien, leur orientation religieuse, leur infrastructure, leur lignes directrices et de pratiques pour l'alimentation, les soins, l'éducation, la discipline, la provision d'activités récréatives pour les enfants et la visite des familles. Et également essentiel, les avis, les observations et les idées des propriétaires et du personnel concernant les enfants, leurs familles, et le rôle de l'institution dans leur vie.

2.2.Le consultant organisera des groupes de discussion avec des enfants plus âgés dans chacune des maisons d'enfants et centres de délinquants. Des entrevues complémentaires seront menées avec les enfants des rues et les enfants ou adultes ayant été institutionnalisés. La méthodologie utilisée sera le groupe de discussion avec exercices d'amorce, écriture de lettre confidentielles, et entretiens informels.

Résultat: bien comprendre les points de vue des enfants, les raisons pour lesquelles ils pensent que les enfants sont envoyé dans des institutions d'accueils ; qui sont ces enfants ; pourquoi certains refusent d'y demeurer ; les plaintes et les critiques générales ; les perceptions sur les structures trouvées la recherche avec les directeurs; ce qu'ils apprécient dans les institutions et les expériences positives ; leurs recommandations sur la façon de les améliorer et le rôle qu'ils pensent que l'état devrait jouer.

3. Enquête Quantitative (6 semaines) :

3.1.Une étude quantitative sera développée en s'appuyant sur les résultats de l'examen de la littérature et de l'étude qualitative. Les questions spécifiques seront déterminées après les autres étapes de la recherche et en consultation avec le Comité Technique. Elles incluront le nombre d'enfants et profils de population (sexe, âge), le type d'infrastructures de l'institution (bâtiment, lits, salle de bains/latrines, source d'approvisionnement en eau, assainissement, cuisine et installations de loisirs), la composition administrative (taille du personnel) ; les services proposés aux enfants (l'éducation, les loisirs et les soins médicaux); l'origine et les

qualifications des propriétaires de maisons d'enfants, leurs orientation face à l'adoption, leur appartenance religieuse, les alliances intentionnelles internationales, et leur temps de service.

3.2. Un sous-échantillon stratifié des maisons d'enfants sera sélectionné pour une étude plus en profondeur des enfants : y compris la filiation, le temps passé en institution, les raisons de leurs institutionnalisation et niveau d'éducation.

3.3. Un autre échantillon aléatoire d'enfants sera sélectionné pour des visites et entretiens avec les familles.

Sélection de l'échantillon: en fonction de la zone géographique et compte tenu de l'opposition entre zones urbaines et rurales, un nombre restant à déterminer de maisons d'enfants seront choisies de façon aléatoire parmi les 725 maisons d'enfants recensées par l'IBESR. Un nombre supplémentaire de maisons d'enfants non recensées sera lui aussi déterminé. Le consultant formera ensuite une équipe d'inspecteurs. Utilisant des téléphones intelligents (tablettes) programmés sur plateforme ODK, l'équipe se rendra dans chacun des centres sélectionnés et y conduira une analyse sur la base du questionnaire développé en collaboration avec le Comité Technique.

4. Analyse et rédaction du rapport final (3 semaines)

L'analyse et la présentation comprendront différents points de vue, y compris ceux des propriétaires étrangers/internationaux, du personnel, des enfants, des parents, des responsables et des membres de la communauté. Des profils statistiques seront présentés. Le rapport final se présentera approximativement de la manière suivante :

a. Orientation: Revue de la littérature, de l'histoire, du contexte politique et économique des institutions en Haïti, liens avec les organismes religieux et avec l'extérieur, le parrainage, l'orientation face à l'adoption, la surveillance du gouvernement et internationale, la conformité aux exigences en matière d'inscriptions et normes juridiques, l'estimation du nombre d'orphelinats non-enregistrés.

b. Profils des institutions : profils structures des institutions, type de services et de soutien aux enfants (graphique et tableau résumé des institutions échantillonnées) ; fonctionnement interne des institutions et vue sur les enfants des directeurs et du personnel ; profils des enfants, de leurs origines, état et conditions actuelles; l'exploration des motifs de l'institutionnalisation des enfants et, très important, le point de vue de l'institution et le point de vue des enfants sur eux-mêmes, les autres enfants, et l'avenir ; présentation et analyse des bonnes pratiques ; l'analyse comportera une comparaison des zones rurales et urbaines des enfants et une typologie des institutions.

c. Recommandations

Annexe 11. Contacts pour les entretiens qualitatifs

NOM	PRÉNOM	POSITION	ORGANISATION		EMAIL
BEAUVOIR	Jules Hans	Child protection	UNICEF		
BERNARD	Abbe	Regional coordinator, Hinche	IBESR		Bernardo230@yahoo.fr
BICKEL	John	Founder of Haiti RCCI	God's Angels	Littlest	
BOHAN	Coner	Educational specialists	UHELP Founder		cbohan@uhelp.net
BOURGET	Elsa	Staff	Protection de l'Enfance Adoption Internationale	et	elsa.bourget@diplomatie.gouv.fr
BROUDIC	Caroline	Ancienne Coordinatrice	URD		caroline.broudic@wanadoo.fr
BULLOCK	Bill	Volunteer	Free the Kids		918-520-0039
BURNHAM	Thor	Historian PhD	Haiti specialist		thor.burnham@gmail.com
CLAY	Corrigan	Missionary Filmmaker	Apparent Fashion		corrigan.clay@googlemail.com
CURTIS	Margaret	Art teacher, donor			mavy9@aol.com
DALEXUS	Serge	Staff	International Rescue Comm.		serge.dalexus@rescue.org,
DEBROUWER	Thomas	Food Security Coordinator	ACF		thomas_debrouwer@hotmail.com
DELORME	Patrick	Former sub-minister	MSPP		
DEPREZ	Simon	Consultant	CARE		simondeprez@hotmail.fr
DOGLIOTTI	Camilla	Staff	TDH Italie		camilladogliotti@gmail.com
FERRY	Pierre	Child protection	UNICEF		
FORTIN	Isabelle	Coordinatrice	URD		ifortin@urd.org
GEBRIAN	Bette	Anthro PhD	Founder Health Foundation	Haiti	bette_haiti@hotmail.com
GEORGES	Islande	Staff	TdH		islandegeorges.cadet@tdh.ch
GILREATH BEHREND	Gilreath Behrends	Donor			828-859-9010
GRIMES	Shasta	Adoptive applicant	parent		shastagrimes@yahoo.com.
GUTTON	Caroline	Directrice-pays	Initiative Development		caroline.gutton@gmail.com

NOM	PRÉNOM	POSITION	ORGANISATION	EMAIL
HARBOURY	Isabelle	Chargée de mission au pôle développement		isabelle.haboury@dip.lomatie.gouv.fr
HAMILTON	Kyle	Research assistant	Duke University	Kyle.hamilton@chpir.org
HOBBIE	Amy	International sector program coordinator	Duke University	Amy.hobbie@duke.edu
HOUDON	Claire Perrin	Disability Coordinator	Handicap International	coordo.handicap@handicap-international-haiti.org
JEAN	Cinedais	Director, Gonaives	IBESR	
JEAN-LOUIS	Roosevelt		IBESR	
JOYCE	Kathryn	Journalist	Author of Child Catchers	kathrynajoyce@gmail.com
JUSTIN	Anostal	Staff	IBESR	
KOONS	Anna	Project coordinator	Duke University	anna@chpir.org
LABATTUT	Eleonore	Service urbanisme & Habitat	CIAT	eleonore.labattut@ciat.gouv.ht
MACKEY	Yoland	Former adoption agent		
MARCELIN	David		Save the Children	
MARKS	Tessa	Staff	International Rescue Committee	Tessa.Marks@rescue.org
MESSER	Lynne		Duke University	lynne.messer@pdx.edu
METZNER	Tobias	Programme Manager Counter-Trafficking	IOM	tmetzner@iom.int
METZNER	T	Staff	IOM	tmetzner@iom.int
MUNROY	Isabel	Nurse		
MURRAY	Gerald	Anthro PhD	University Professor	murray@ufl.edu
NOEL	Richener	Sociologue	Université d'Etat d'Haïti	noel.richener@gmail.com
O'DONNELL	Karen		Duke University	odonn002@mc.duke.edu
PALINKA	Tamara	Adoptive parent applicant		tamarapalinka@hotmail.com.
PARRIS	Debra	Director of Family Recruitment	European Adoption Consultants	debra@eaci.com

NOM	PRÉNOM	POSITION	ORGANISATION	EMAIL
PEDUTO	Kristine	Child protection	UNICEF	
PETIT-FRERE	Louis-Mary	Regional coordinator, Cap-Haitien	IBESR	louismary.petitfrere@yahoo.fr
PURGUS	Claire Pavlik	Managing Editor	Schuster Institute Journalism	cppurgus@brandeis.edu
REED	Michelle	Haiti Program Director,	America World Adoption	michelle.reed@awaa.org
REGIS	Jacques Greguy	Regional coordinator, Jacmel	IBESR	
REMY	Ocean	Regional coordinator, Ouanaminthe	IBESR	occeano2@gmail.com
ROCKS	Denise	Deputy Director	Save the Children	
ROTABI	Karen	Author and Professor	United Arab Emirates University	ksrotabi@yahoo.com
SANGSTER	Jacob	Orphanage Director	CorLuv	jakesangster@gmail.com
SELMAN	Peter	Author and Professor	Newcastle University	pfselman@yahoo.co.uk
SMUCKER	Glen	Anthro PhD	Haiti specialist consultant	grsmucker@aol.com
SYLVESTRE	Gladys	Founder and CEO of Haiti RCCI	Foundation pour les Enfants d'Haiti	Gladhaiti@hotmail.com
THOMAS	Yoland	Founder of K-12 school	Evergreen Academy	34011175
TRUELOVE	Carol Ann	Clinic director	Faith Medical Clinic	geo_cat1986@yahoo.com
TRUELOVE	George		Faith Medical Clinic	geo_cat1986@yahoo.com
VAN PARIJS	Benjamin	Directeur-pays	ACTED	benvanparys@gmail.com
VAN SCHOYK	Barbara	Missionary		
VAN SCHOYK	Gregory	Missionary		
VAUGHAN	Stephen		Save the Children	
VILLEDROUIN	Arielle Jeanty	Director General	IBESR	
WALSH	Amber	NGO country director UHELP	UHELP Country Director	awalsh@uhelp.net
WHETTEN	Kate	Professor	Duke University	k.whetten@duke.edu
WHETTEN	Rachel	International sector director	Duke University	rachel.whetten@duke.edu

Annexe 12. Les points de vue des experts

Pour conclure cette section qualitative, nous offrons les réflexions de 8 personnes ayant vécu et travaillé en Haïti au cours des 20 à 50 dernières années. Leurs points de vue sont essentiels pour bien comprendre le rôle des Centres Résidentiels pour Enfants en Haïti.

1. **Glenn Smucker, PhD** en Anthropologie, Citoyen américain, cumulant plus de 40 années d'expérience en tant que chercheur et consultant en Haïti. Il est l'auteur de 3 rapports importants sur les enfants en Haïti: *Haiti – The Uses of Children : A Study of Trafficking of Haitian Children* (2004); *Orphans and Other Vulnerable Children in Haiti: A Field Report* (2005); et, *Lost Childhoods in Haiti* (2009).

Mon point de vue: La plupart des enfants placés en orphelinat ont une famille proche, habituellement leurs parents sont vivants, les orphelinats servent d'alternative à une famille d'accueil informelle ou au placement dans d'autres familles en but de fréquenter l'école, les résidents d'orphelinat sont généralement plus scolarisés que leurs frères et sœurs vivant avec leurs parents, l'admission à un orphelinat est communément perçue comme un privilège par la famille, puisqu'on y voit la promesse d'une éducation et de l'acquisition de compétences de travail, d'une meilleure alimentation qu'à la maison et d'un avenir plus prometteur. Les enfants et les employés rencontrés à Fond des Nègres ont indiqué que les enfants disent souvent préférer vivre à l'orphelinat plutôt qu'à la maison, parce qu'ils y sont mieux nourris et y reçoivent une éducation. L'orphelinat renvoyait de nombreux enfants à la maison pour la période estivale. Les enfants revenaient presque invariablement amaigris et revenaient avec plaisir à « l'orphelinat » en automne. Il s'agit plutôt d'un pensionnat, même si on l'appelle orphelinat.

2. **Gerald Murray, PhD**, Professeur Emeritus, Département d'Anthropologie, Université de la Floride. Citoyen américain. Cumulant plus de 40 ans en tant que chercheur et consultant en Haïti. Co-auteur, avec Glenn Smucker, de *The Uses of Children: A Study of Trafficking of Haitian Children*.

J'ai demandé à des villageois de m'expliquer le sens du mot créole ofelina et ils l'ont défini comme un endroit où les parents pauvres envoient leurs enfants pour qu'ils reçoivent de la nourriture et une éducation. Le mot anglais orphanage n'est pas une bonne traduction. Le concept de boarding school est à propos, mais sous-entend une institution cossue fréquentée par des familles aisées. Les revenus sont alors générés auprès des parents. Dans le cas d'un ofelina, ce sont plutôt les familles des pays riches et les groupes religieux qui sont mis à contribution alors qu'on leur fait croire que (1) les pensionnaires n'ont pas de parents et que (2) leur argent sera utilisé pour aider les enfants. Ni l'une, ni l'autre de ces propositions n'est vraie.

Les orphelinats haïtiens que je connais bien ne s'occupent pas nécessairement des enfants en tant que « résidents à temps plein ». J'ai constaté des cas où un certain « pasteur » qui s'occupait d'un orphelinat financé par des familles chrétiennes américaines à coup de versements mensuels prétendait supporter 50 enfants alors que seuls 9 ou 10 enfants fréquentaient l'établissement en permanence. Quand le groupe de soutien blanc (étranger) a annoncé qu'il y aurait une visite sur le site, il s'est démené pour trouver 40 autres enfants à leur montrer. Un collègue de ma femme Loli

vit à Gainesville en Floride et a hébergé un enfant haïtien qui avait besoin d'une chirurgie très onéreuse. Ces parents adoptifs bien intentionnés et généreux ont été choqués quand cet « orphelin » s'est mis à leur parler de ses parents encore vivants. Il leur a aussi dit le plus innocemment du monde que seuls quelques enfants vivent vraiment à « l'orphelinat » et que le « pasteur » se démenait à remplir son établissement quand les blancs arrivaient. La mère adoptive a fondu en larme et l'enfant est de retour chez ses parents en Haïti. Elle tente toujours de lui venir en aide. En ce sens, je suis mal à l'aise devant le mépris que l'on manifeste souvent aux familles d'adoption.

En me basant sur ma propre expérience anecdotique, j'aimerais apporter quelques contrastes.

Un don mensuel en argent pour un orphelinat en Haïti ou l'adoption d'un enfant haïtien ? Le « pasteur » pencherait certainement vers le don.

- *Une adoption charitable dans une famille ayant déjà des enfants ou une adoption dans une famille qui n'a pas d'enfant et qui cherche à en avoir ? L'adoption d'enfants haïtiens tombe sous la première définition. Je constate que la deuxième description concerne surtout des parents qui se rendent en Chine ou en Russie plutôt qu'en Haïti.*

Il serait facile d'y voir du racisme. Je ne suis pas partisan de ce genre d'anthropologie du mépris.

Il existe une criminalisation à saveur ethnocentrique de tous les services de placements d'enfants antillais de la part de professionnels des « droits de la personne » qui qualifient ces enfants d'esclaves. Dans le rapport que j'ai publié avec Glenn Smucker, j'ai écrit: « Le terme « esclave » relève de la métaphore incendiaire et peut servir des fins militantes, mais il n'a pas du tout le sens qu'on lui donne en Haïti, même lorsqu'on l'utilise en tant qu'épithète. Quand les haïtiens qualifient un enfant restavèk de ti esklav, ils utilisent ce mot de manière métaphorique, un peu comme on qualifierait un patron exigeant d'esclavagiste. L'enfant restavèk est un enfant dont on abuse, mais ce n'est pas un esclave. Le concept de travailleur domestique non rémunéré a une consonance moins dramatique, mais décrit beaucoup mieux cette réalité. »

Par contre, si vous désirez vous faire un nom en tant que militant pour les droits de la personne, il vaut bien mieux pour vous de les définir en tant qu'esclaves, plutôt que de s'attarder à des considérations secondaires, telles que la logique, la perspective ethnographique, ou le bien-être de l'enfant qui est déplacé.

3. Isabelle Monroy, citoyenne française, infirmière en médecine tropicale. Cumulant plus de vingt ans de travail dans les provinces d'Haïti.

Tout d'abord, il y a 2 termes qui peuvent mener à une confusion: les crèches et les orphelinats. D'après ce que j'ai compris ...

L'orphelinat: institut qui recueille des enfants dont les parents sont encore en vie. Ces enfants sont scolarisés dans cet "orphelinat", y dorment, y vivent. Certains d'entre eux retournent chez leurs parents pendant les vacances, d'autres non.

Je ne sais pas si ces structures sont payantes pour les parents. Elles sont parfois subventionnées par des églises, souvent américaines. Mais il n'y a aucun contrôle. J'en ai connu 2 dans la commune de Bombardopolis : un non accessible en voiture (j'y suis allée à la demande de l'OMS). Il y avait des enfants malnutris (kwash), je n'ai pas vu un nombre de matelas correspondant au nombre d'enfants... Dans une autre structure, les enfants se faisaient abuser par les responsables (filles ou garçons)

Les crèches : reconnues par IBSER. Recueillent les enfants pour adoption internationale. Mais j'ai rencontré une Française qui m'a raconté que le premier enfant qui lui a été attribué était mort. Un employé de cette crèche lui a dit que les parents étaient revenus le prendre et que la directrice avait dit non. Les parents auraient ensuite étouffé l'enfant.

Certaines crèches demandent aux parents adoptants une aide financière à donner à la famille de l'enfant adopté. Parfois ils obligent les adoptants à rencontrer les familles biologiques.

J'ai connu plusieurs crèches et j'ai été "missionnée" par des parents adoptants pour visiter l'enfant ou lui apporter un cadeau. Mais certaines crèches refusent les visiteurs (qu'ont-elles à cacher?). Pour d'autres, il faut un rendez-vous et être très ponctuel. Si on arrive à l'improviste, on vous renvoie ou alors comme ça m'est arrivé, on vous fait attendre 3/4 d'heure L'enfant est arrivé talqué, habillé

Une adoptante m'a dit qu'elle avait ouvert un placard dans une crèche et qu'elle avait vu, entassés, tous les vêtements, peluches, etc. envoyés par les familles adoptantes, mais qui n'avaient jamais été utilisés.

La plupart des crèches n'ont pas de financement pour nourrir correctement les enfants. Ils mangent des bouillies dès leur plus jeune âge.

J'en ai aussi connu une qui mettait jusqu'à 3 à 4 nourrissons dans des petits lits. Lors des visites des étrangers, mettaient les enfants en train d'être adoptés dans une autre chambre, plus "Américaine". Ça fait mieux.

Pas ou peu de contrôle, pas de sanction ...

4. Bette Gebrian, PhD en anthropologie médicale. Citoyenne américaine. Fondatrice de la HHF (Haiti Health Foundation). Cumulant plus de 30 ans d'étude et de travail en Haïti.

Il est difficile pour un étranger de comprendre comment les enfants sont élevés en Haïti. Compte tenu du haut taux de mortalité maternel et de l'absence de nombreux pères, les nouveau-nés et les enfants sont pris en charge et éduqués par de nombreux adultes (et leurs frères et sœurs aînés).

Un professionnel haïtien, lorsqu'on l'a interrogé en créole, a eu cette réflexion à propos des orphelinats: « Certains d'entre eux sont surtout des entreprises! C'est un moyen de gagner sa vie. Les besoins sont là et certains aident les enfants, mais ils gardent une grande part des dons...ils ne sont pas réglementés ! »

Il ya quelques années, une analyse a été menée par le (gouvernement Haïtien) sur l'état des orphelinats : salles de bain, modalités d'hébergement, rangement, réfrigération, etc.,... Les établissements ont reçu une évaluation chiffrée et un laps de temps pour redresser la situation. Je ne sais pas trop ce qui est advenu de ces efforts et de ce rapport, mais nous entendons dire que les visites se poursuivent pour vérifier si des améliorations ont été apportées. J'ai même entendu dire qu'un établissement a été forcé de fermer à Jérémie.

Il existe 4 pensionnats protestants (2 appartiennent à des Haïtiens, 2 nouveaux établissements ont des propriétaires Etasuniens) et 3 pensionnats catholiques (1 prêtre haïtien, 1 prêtre canadien d'origine haïtienne et un établissement hébergeant 53 filles appartenant aux Sœurs Haïtiennes de Charité de Sainte-Hyacinthe). Le ministère de Mère Teresa de Calcutta opère des franchises à travers le monde et se démarque de tout le reste. Ils opèrent en tous cas un centre de soins de longue durée et des installations pour les malades.

J'ai eu une discussion auprès de Sœur Maryann à la HHF concernant la situation à laquelle nous faisons face à Jérémie et dans les villages voisins depuis plus de 25 ans.

Voici nos réflexions:

Les vrais orphelins: *Malheureusement, étant implantés ici depuis si longtemps, nous sommes vite informés quand deux parents meurent. Le désastre du Neptune en 1993, le SIDA, le choléra et le séisme de 2010 ont, par exemple, fait de nombreux orphelins. Dans presque tous les cas, des membres de la famille de ces enfants les prennent en charge. C'est ce que font les Haïtiens. Les fratries sont parfois séparées, mais tous se retrouvent chez des parents proches ou éloignés. Les grand-mères deviennent souvent les principales responsables des enfants.*

La HHF appuie des centaines de familles de ce genre à Jérémie. Sans exception, elles prennent en charge des enfants dont les parents directs sont absents, parfois dès la naissance.

Les enfants abandonnés: Les Missionnaires de la Charité de Mère Teresa, l'Hôpital Saint-Antoine, et même les cliniques de la HHF ont reçu des enfants sans jamais pouvoir savoir d'où ils proviennent. Il s'agit parfois de nourrissons, parfois de jeunes enfants. Les fonctionnaires des services sociaux s'en occupent. Ils peuvent être mis en adoption par le bureau des services sociaux de Jérémie et, dans le cas des Missionnaires de la charité, envoyés à l'établissement de Port-au-Prince pour y être adoptés.

Les enfants hospitalisés, puis abandonnés : Cela ce produit parfois chez les Missionnaires de la Charité à Jérémie ainsi que dans l'hôpital du MSPP. Lorsque c'est possible, les religieuses se rendent au lieu de naissance de l'enfant pour le réunir avec ses parents.

Les foyers d'accueil: Les services sociaux placent parfois des enfants dans des organisations qui s'en occupent. Il y en a plusieurs à Jérémie. Il y a par exemple l'Orphelinat Yvrose (établissement haïtien protestant fondé au cours des années 1980) et Notre Dame du Perpétuel Secours (établissement tenu par une Haïtienne catholique depuis 2006 et opérant une école depuis 1998). Leur support provient d'amis, de visiteurs et de la diaspora haïtienne. Les soins de santé pour ces enfants ne sont pas dispensés par le gouvernement haïtien. Les groupes religieux qui appuient ces institutions déplorent souvent l'état de santé des enfants et le manque flagrant de médicaments et de vaccins. Les soins offerts sont irréguliers.

Pensionnats: Quand les familles sont incapables de s'en occuper, des enfants sont parfois confiés au prêtre catholique Andeo de la paroisse. Ils n'opèrent pas d'orphelinat ou de centres de soins. Il y a huit ans, un prêtre catholique a établi deux centres : un pour les garçons et un autre pour les filles dans la ville de Jérémie où on les nourrit et où ils sont scolarisés quand ils sont assez âgés (les églises et les chapelles se trouvent en zone rurale.) Le centre que la HHF connaît bien est bien administré et les enfants y sont bien traités. Ils reçoivent une aide d'une église catholique et possèdent un magasin et une boulangerie pour générer des revenus dont les enfants profitent.

À la HHF, nous ne comprenons pas pourquoi une clinique gratuite pour les pauvres n'est fréquentée ni à des fins préventives ni à des fins curatives. La plupart du temps, des travailleurs des centres font leur propre diagnostic, achètent eux-mêmes des médicaments et traitent eux-mêmes les enfants. Même quand des organisations missionnaires allouent des fonds aux soins de santé, ils ne sont pas utilisés.

Nouveaux « orphelinats »: Des parents proches ou éloignés confient des enfants dont ils ne peuvent plus s'occuper à l'un des « orphelinats » de la ville. Ceux-ci sont gérés par des étrangers. Les visiteurs croient souvent à tort que les pensionnaires sont orphelins. Des groupes viennent les visiter pour leur « donner de l'amour » selon eux. L'un d'entre eux a été frappé par le choléra et a été sommé par le MSPP d'améliorer les mesures d'hygiène.

Pensionnat: Ils hébergent des enfants handicapés qui rentrent chez eux (peut-être) les weekends et pour les vacances scolaires. L'école St-Vincent et une autre institution à Les Cayes en sont des exemples. Ils reçoivent également des fonds de groupes missionnaires.

Quant aux plus jeunes, de nombreux Haïtiens recherchent des enfants qui peuvent se rendre utiles à la maison et préfèrent les prendre en charge à 3 ans, alors qu'ils peuvent encore être « entraînés à la loyauté ». Nombre d'entre eux ont commenté à Sœur Maryann que les enfants qu'on emmène chez soi à 5 ou 8 ans sont déjà trop indisciplinés.

Nous avons aussi été témoins de nombreuses adoptions ; c'est un processus qui prend de nombreuses années. Des familles américaines et européennes ont adopté des enfants atteints d'handicaps mentaux ou physiques. D'autres ont adopté un ou deux enfants que l'on savait orphelins. Ces familles affirment unanimement que c'est un processus long et coûteux...mais qu'ils sont contents de s'occuper de ces enfants.

5. Couple de missionnaires anonymes. Citoyens américains. Habitent et travaillent depuis plus de vingt ans en zone rurale haïtienne.

Orphelinats. Les orphelinats sont évidemment nécessaires. Il vaut mieux pour un enfant d'y vivre que d'être à la rue. Par contre, il faut mettre un bémol, puisque certains orphelinats sont si mauvais, qu'il vaudrait mieux être à la rue. Selon nous, l'orphelinat est un dernier recours. Les enfants dont les parents sont vivants ne devraient pas être dans des orphelinats/foyers de l'enfance. Si possible, les enfants dont les oncles, tantes ou grands-parents sont vivants devraient habiter avec eux. Même chez des étrangers, leur sort serait plus enviable. Même s'ils sont traités comme des citoyens de seconde classe et doivent travailler plus fort que les enfants biologiques, ils seraient mieux traités qu'en institution. L'image qu'on se fait d'un orphelinat n'a presque rien à voir avec la réalité haïtienne. Haïti est un endroit où il est difficile de survivre et les enfants qui sont élevés dans un « très bon orphelinat » n'acquerront que très rarement les aptitudes nécessaires à leur survie en dehors des murs de l'institution. Un « très mauvais » orphelinat est, quant à lui, bien pire que la rue.

Nous connaissons des gens qui ont investi 500000\$ dans la construction d'un foyer pour 20 filles à Port-au-Prince. Ils ont mis tous leurs efforts à s'assurer de n'offrir des places qu'à de véritables orphelines. Jamais personne n'a fondé d'orphelinats avec de meilleures intentions, mais nous avons des doutes dès le début. Le premier problème est le suivant : plus on s'affaire à bien mener une institution, plus les parents s'affairent à y faire entrer leurs « orphelins ». D'année en année, nous avons appris que bien des filles avaient une famille et même des parents. Par contre, notre plus grande inquiétude était plutôt que nous ne voyions pas comment des filles élevées dans un milieu aussi « aisé » seraient en mesure de subvenir à leurs propres besoins vers le début de la vingtaine.

Le principal, c'est que, même s'il s'agissait de la meilleure des institutions, l'orphelinat ne devrait jamais être un premier recours. Sauf quand on a de bonnes raisons de croire qu'un enfant sera battu ou abusé sexuellement, le meilleur lieu est toujours le foyer familial.

Selon nous, un bon orphelinat devrait remplir ces conditions :

Il devrait toujours y avoir une supervision rigoureuse de la part de personnes indépendantes qui n'ont rien à gagner en maintenant l'institution ouverte.

Présence de figures parentales : des gens très présents qui font office d'autorités parentales.

Il devrait y avoir un couple agissant comme figure parentale pour chaque groupe de 25 enfants tout au plus.

Tous les enfants devraient être inscrits dans une école sanctionnée par l'État.

L'apprentissage d'un métier devrait être central dans l'éducation des, puisqu'ils ne pourront pas se tourner vers leurs familles une fois en âge de quitter.

Une planification poussée devrait être consacrée à éviter les contacts sexuels entre les enfants.

On devrait offrir aux enfants des nourritures saines en quantités appropriées.

Les enfants devraient avoir des corvées quotidiennes à accomplir.

Nous sommes conscients que ce dernier point ne fait pas l'unanimité, mais nous croyons que les enfants devraient connaître Dieu tel qu'il nous est révélé par la bible.

6. Thor Burnham, PhD en histoire. Citoyen canadien. Habite et travaille depuis plus de vingt ans en Haïti.

Au début de 1996, après avoir travaillé dans le secteur privé en Haïti pendant un an, un ami haïtien m'a proposé de se joindre à lui pour fonder un orphelinat. Il m'a dit qu'on pouvait gagner beaucoup d'argent très rapidement. C'était la chose logique à faire. Mon réflexe initial a été un refus poli, mais je m'en suis rendu compte avec le temps qu'il s'agit plus d'une opportunité d'affaires que d'une mission altruiste.

Au cours des années subséquentes, peu de choses se sont produites qui auraient pu diminuer mon scepticisme par rapport aux orphelinats. Ça ne veut pas dire qu'ils ne subviennent pas aux besoins réels de vraies personnes. Pourtant, mon expérience auprès des Haïtiens en milieu urbain m'a appris qu'ils entretiennent de profonds liens avec leurs contrées d'origine et l'idée qu'il puisse exister tant d'enfants sans parent et sans famille étendue me semble très étrange. Les Haïtiens semblent passés maîtres dans l'art de reconstituer des familles de manière harmonieuse.

Il ne fait aucun doute qu'il y ait de véritables orphelins et des orphelinats crédibles. Par contre, l'idée qu'il y ait eu plus de 400000 orphelins en Haïti après le séisme de 2010 semble relever d'autre chose que d'un besoin réel.

Sans se pencher sur les données, on peut affirmer que de nombreux organismes religieux ont pris à charge des enfants dans le besoin, mais il faut se demander si la demande externe n'a pas entraîné une montée de l'offre. En d'autres mots, la recherche d'orphelins a fini par causer leur ubiquité. Étant donné le contexte de pauvreté extrême en Haïti, plusieurs groupes ont profité de cette hausse de la demande pour manipuler et produire une offre d'enfants à héberger.

7. Gregory et Barbara Van Schoyck, Citoyens américains. Habitent Haïti et y prêchent depuis plus de 20 ans.

Parlons des orphelinats... Laissez-moi penser tout haut. Faisons-le point par point...

** la définition haïtienne d'un orphelin ne ressemble ne rien à celle qu'en ferait un Nord Américain – de nombreux orphelins ont un, voire deux parents bien vivants.*

**C'est précisément pour cette raison que certains orphelinats ne procèdent à aucune adoption.*

** les orphelinats, du moins en zone rurale, sont un concept relativement récent en Haïti. Je crois que si nous remontons 20 ou 25 ans, il y avait très peu de demande pour des orphelinats. Une combinaison du système maren/paren, d'une idée plus étendue de la famille et de ses supports et même le système de restavèk permettait de s'occuper relativement bien des enfants que l'on nomme aujourd'hui orphelins.*

** en ce moment, un grand nombre de pasteurs haïtiens se rendent compte que les Nord-Américains ont un faible pour le soin des orphelins et n'hésitent pas à verser de grandes sommes d'argent à des orphelinats – sans pour autant leur demander des comptes.*

** Cette situation a été créée de toutes pièces par des Nord-Américains et je trouve injuste d'en jeter le blâme sur les pasteurs haïtiens.*

** Nous avons eu vent d'un ou deux orphelinats qui, par le passé (peut-être depuis dix ans), n'avaient aucun enfant en résidence, jusqu'au jour d'une visite planifiée d'un groupe étasunien ou canadien. Les visiteurs étaient accueillis dans des dortoirs remplis d'enfants joyeux. Un fois leur départ, les enfants retourneraient à la maison.*

** Certains avocats de Port au Prince font fortune dans l'adoption d'enfants. De grandes sommes d'argent ont été dépensées par des adoptants potentiels qui sont venus en Haïti de nombreuses fois dans l'espoir de prendre la garde de leur enfant adoptif, pour apprendre qu'ils avaient omis de présenter le formulaire 1063 C (ou n'importe quoi d'autre) au Gouvernement haïtien.*

** Nous connaissons un orphelinat à Pignon qui est géré par des Étatsuniens. Ils s'occupent des enfants avec amour et compassion dans un environnement qui place les besoins des enfants en priorité. Un environnement sain, des vêtements adéquats, des soins de santé, beaucoup d'amour, une bonne scolarisation et de la formation professionnelle pour les plus âgés.*

** Nous connaissons un orphelinat en milieu rural qui opère presque sans aucune aide gouvernementale et dont le directeur et les employés sont haïtiens. Les conditions de vie y sont spartiates et il est clair que les ressources financières de l'établissement sont à la limite de sa survie. Pourtant, les enfants y reçoivent au moins un repas complet par jour et plusieurs d'entre eux peuvent fréquenter l'école. Quand des Américains de passage se font inviter par le directeur à visiter son établissement, ils sont outrés des conditions de vie des enfants. Par contre, si on demandait à la communauté locale ce qu'elle en pense, le consensus serait que ces enfants sont très privilégiés. Les Américains en jugent selon leurs standards aisés et les Haïtiens en jugent selon des standards haïtiens et les alternatives qui s'offrent à ces enfants...rester avec leurs familles et risquer de manger beaucoup moins bien, dormir à même le sol et n'avoir que très peu de chances de fréquenter l'école.*

8. Patrick Delorme, MD, MPH, Citoyen haïtien. Ancien sous-ministre haïtien de la santé (MSPP).

Youn moun pa ka di ke pa gen kek bon bagay ki fet nan kek ophelina an Ayiti pou ede kek timoun ki vreman pa genyen yon manman ou yon papa ou yon fanmi proch ki te ka okipe yo. Men pou la majorite de ka, mwen panse ke li ta pi bon si yo ta vle vreman ede, pou yo ta cheche yon fanmi y ti moun sa yo pou ta okipe yo. Ti moun sila tap gen selon mwen, yon meye priz an chaj, meye atansyon, plis lanmou e plis chans pou yon landemen miyo. Sinon, pi fo nan swa dizan ophelina sa yo se kob yap fe sou tet ti moun sa yo. An kle pou mwen, meye solisyon an se pa ophelina. se ta plito yon milye familyal kote ti moun nan ta santi li pi ankadre, pi an sekirite'.

On ne peut pas dire qu'il n'existe pas en Haïti d'orphelinat qui fasse du bon travail pour aider des enfants qui n'ont vraiment ni père, ni mère, ni famille proche qui puisse les prendre en charge. Mais dans la plupart des cas, je crois que le mieux serait de réunir ces enfants avec des proches qui peuvent s'en occuper. C'est ainsi, selon moi, qu'ils seront le mieux pris en charge, aimés, auront plus d'attention et pourront espérer un avenir meilleur. D'autre part la plupart des soi-disant orphelinats ne font qu'amasser des profits sur le dos des enfants. Pour moi, en tout cas, la meilleure solution ce n'est pas l'orphelinat, c'est plutôt un milieu familial où l'enfant se sentira encadré et en sécurité.

NOTES

- 1) ⁱ However, abandoned, neglected, and delinquent children were sent to domestic agricultural institutions, rural frontier areas, and colonies where they were absorbed into the domestic labor pool on family farms and enterprises. Examples include England's Children Migration Program, France's "*colonie pénitentiaire agricole*. In the United States, between 1854 and 1929 the Protestant Children's Aid Society oversaw "orphan trains." A separate major trend in Western Childcare is what was happening to the children of those aboriginal populations that European-model agro-industrial family farms displaced from colonies and frontier lands. Between the late 1800s up until the 1970s millions of aboriginal children were taken away from their families and institutionalized in aboriginal "boarding schools." The objective was to "civilize" them, typically in the sense that they would become literate and productive members of the labor force and God fearing Christians. The process was nothing short of massive in scope. In the United States, for example, at its height in 1973, the US had 60,000 Native American Children in State sponsored residential schools, representing 25% of all US Native Americans 7 to 18 years of age. At the same time, another 25 to 35% of Native American Children were in Indian Orphanages. (As if that were not enough, the US government had placed yet another 25 to 35 percent in foster care with mainstream Euroamericans). Similar processes occurred throughout Latin America, Russia, Asia, Scandinavia, East Africa, Australia, New Zealand, South Africa, and Canada. Most of Western governments that supported the institutionalization of aboriginal children have recently issued public apologies.
- 2) Yet, another parallel development was the institutionalization of child delinquents. Prior to about the 1850s youthful offenders were imprisoned with adults or sent to "orphanages" and colonies with abandoned and neglected children. In the late 1900s a shift to age and sex segregated institutions began. By the 1930s "juvenile reform schools" existed throughout developed countries. Despite what would later become scholarly view of RCCIs as detrimental to child development, the growth in RCCIs for juvenile delinquents has continued until the present such that the US, for example, has at any given time an average 100,000 youths incarcerated in RCCIs
- 3) After WWII there was a significant shift in developed world values. With the mechanism of agriculture, widespread dependence on factory production and the emerging service sector economy, children were no longer economic assets in terms of labor. New laws increasingly restricted the use of child labor as well as corporal punishment. Education was state sponsored and made compulsory. The new developed world value systems were crystallized in UN 1956 UN Supplementary Convention on the Abolition of Slavery, the Slave Trade, and Institutions and Practices Similar to Slavery, and later in the the 1959 the Declaration of the Rights of the Child were anthropologists such as David Lancy's

(2007: 280) “tantamount to a condemnation of the child-rearing beliefs and behaviors of three fourths of the world’s parents.”