

# NPH INTERNATIONAL CHILDCARE POLICIES



NPH International

# TABLE OF CONTENTS

Vision, Mission, Values .....	3
Principles .....	4
Policies Concerning Childcare Services .....	5
Admission and Admissions Committee .....	6
Adoption .....	7
Permanence.....	7
Discipline .....	7
Discipline with Dignity.....	8
Mistreatment and Abuse.....	9
Definitions of Abuse .....	9
Physical Abuse.....	9
Psychological or Emotional Abuse .....	9
Neglect .....	9
Sexual Abuse .....	10
Child Labor Exploitation .....	11
Misconduct Leading to Disciplinary Procedure .....	12
Stage 1 Verbal Warning .....	12
Stage 2 First Written Warning .....	12
Stage 3 Final Written Warning.....	12
Restraint in Emergency Situation .....	13
Sexual Education .....	15
Additional Policies.....	18
Leaving the NPH Family or Flying the Next .....	18
Child Privacy and Confidentiality.....	19
Research Requests.....	19





## VISION

A world without poverty where all children develop their unique potential becoming productive members of society serving their community.

---

## MISSION

Nuestros Pequeños Hermanos, inspired by Christian values, nurtures orphaned and vulnerable children in a loving, stable, secure family environment. We keep brothers and sisters together and provide a quality education, healthcare, and spiritual formation. We model our values through serving the communities in which we live.

---

## VALUES

NPH is guided by the following core values:



**LOVE AND SECURITY:** manifested in the safety and stability of the family and realized by profound personal engagement in preparation for meaningful life and gainful employment.



**RESPONSIBILITY:** learning to be responsible and to respond to the needs of others, both individually and collectively.



**SHARING:** developing kindness, empathy and care for others, through what we say and do.



**WORK:** learning to contribute to one's family and community on the path to independence.



**FAITH AND SERVICE:** putting Christian values into action.



## PRINCIPLES

Our deliberations, interactions, and decisions are founded on the Christian principles of: **"...as you did to one of the least of these My brothers and sisters, you did it to Me."** and **"Lord, make me an instrument of Your peace..."**

These principles guide our actions in reinforcing the rights and responsibilities of children as expressed through:

- ✓ Compassion and empathy toward others
- ✓ Care focused on the needs of each child
- ✓ Establishing and maintaining healthy family bonds
- ✓ Commitment to serve our family and our community
- ✓ Respect and humility in our attitudes
- ✓ Transparency and accountability in our actions and reporting
- ✓ Embracing diversity and inclusivity

---

NPH operates homes in Bolivia, Dominican Republic, El Salvador, Guatemala, Haiti, Honduras, Mexico, Nicaragua, and Peru. Since 1954, over 20,000 children have called NPH home. Additionally our community outreach programs provide over 95,000 services yearly.

# POLICIES CONCERNING CHILDCARE SERVICES



NPHI is committed to assuring the best possible care for our children through direct programs, through service to other caregivers and support organizations, and through direct engagement with the community in which the children live.

Together we create a family environment that promotes the well-being of the Pequeño/as based on Father William Wasson's philosophy. Our goal is the fullest possible intellectual and moral development of the children.

Our standards of childcare reflect the rights of children and young people, as set down in the UN Convention on the Rights of the Child and the corresponding responsibilities as defined by Fr. Wasson's philosophy. Our family is organized around the rights, needs and responsibilities of the child, in a setting as close as possible to a family. We secure his/her stable care in an alternative family setting.

NPH seeks to promote, protect and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all people with disabilities as per the UN Convention on the Rights of Persons with Disabilities. The NPH family recognizes that all people, regardless of any kind of disability are equal and that persons with any type of disability must enjoy all human rights and fundamental freedoms as everyone else without any discrimination or distinction.

The NPH family recognizes the need to promote and protect the human rights and fundamental freedoms of all persons with disabilities including those who require more intensive support.

The NPH family provides a permanent solution for children who do not have an alternative for care within their family of origin, with another appropriate and permanent family care giving environment or in their community.

## **Family-based alternative care**

is recognized as the most appropriate for children's healthy development.

NPH provides a supportive, protective and caring environment that promotes the child's full potential. The NPH family ensures children a stable home and meets their basic need for safe and continuous attachment to their caregivers, with permanency.





### **With the security**

to know that they will grow up and who will be with them, most notably their siblings, children do develop the security they need to thrive and develop. NPH provides the children with a secure environment where they can play and pursue recreational activities in a carefree manner. In other words, NPH allows children to live their childhood to the fullest.

Siblings with existing bonds should in principle not be separated by placements in alternative care unless there is a clear risk of abuse or other justification in the best interests of the child. In any case, we make every effort to enable siblings to maintain contact with each other, unless this is against their wishes or interests.

If nothing is known about the family of the child, we actively start an investigation during the admission process. Visitor days and many different activities are in place to maintain and foster the contact between the child and his extended biological family. Contact with family is organized and planned regularly. If in the best interest of the child, the family reintegration is supported by the NPH family.

Because our children do not have to leave when they turn eighteen, we provide the children and youth with the opportunities to continue their growth and development so that they can achieve their full potential. The best result of this is that NPH develops the human resources the children present to their respective societies not only to their fullest potential, but also prepares them to serve in their societies.

### **ADMISSION**

Each child or young person fulfilling the intake requirements (see 3) will be welcomed and will be valued as an individual. In the NPH family they can feel safe and secure in all aspects of life, including health and wellbeing, enjoy the safety but not be overprotected. The NPH family ensures a family environment free from threat and any form of mistreatment, exploitation or abuse. If possible all the siblings of a family should stay together in the same building for the first days after their admission to the NPH family.

NPH will accept children and youth under the age of seventeen, in case of siblings of any age as long as they fulfill the NPH requisites and want to join NPH.

### **ADMISSIONS COMMITTEE**

A Child Admissions Committee shall be established in each NPH country.

- a) The committee shall be led by the House Director and include the following personnel: National Director, a social worker, a psychologist, a representative of the clinic, the coordinators of the houses and/or the schools. The National Director is ultimately responsible for the admission of the children.
- b) In case of emergency that requires an immediate admission, the committee shall be informed as soon as possible. If the circumstances require immediate attention, it is up to the discretion of the National Director and/or the social worker to bring the children to NPH immediately after advising the personnel of the place at the respective NPH home where the children will be taken.



c) The committee shall consult with the international NPH Medical Services Team when considering accepting children with extraordinary needs so that we can guarantee competent care for these children.

**ADOPTION**

Children find a permanent home in the NPH family. No child shall be offered for adoption.

**PERMANENCE**

NPHI affiliated homes will accept orphaned, abandoned and other at-risk children who might not survive without NPH. The expectation is that all children entering would become permanent members of the NPH family.

**DISCIPLINE**

NPHI is committed to comply with local laws of each country where we operate. All working with NPHI will be informed of local laws and any violation of the law will be reported to the local authorities.

Each child or young person will be treated with dignity and respect at all times. Each child or young person is treated equally and valued for his/her ethnic background, language, culture and faith; In the NPH family we work constantly to keep an environment which is free from bullying, harassment and discrimination and where each child or youth is able to complain effectively without fear of victimization. Children are encouraged and supported to make decisions about their lives and to influence the way the home is run. No child is assumed to be unable to communicate their views.

We systematically aim at preparing the child to assume self-reliance and to integrate fully in the community, notably through the acquisition of social and life skills. We teach the children how to make informed choices, while recognizing the rights of other people to do the same; and to know about the range of choices. And we encourage them to make full use of the resources that are available to each child and youth so that each one of them can make the most of her/his life.



We ensure that there are sufficient childcare workers in each home to allow for as much individualized attention as is possible, and to give the child, where appropriate, the opportunity to bond with a specific childcare worker.



## DISCIPLINE WITH DIGNITY

Discipline with dignity has to be predictable, free of any threats and provide the liberty to freely express feelings and thoughts.

- a) Staff shall use positive methods of child guidance which encourage self-control, self-direction, self-esteem and cooperation. Child guidance and management shall meet the needs of each child.
- b) Rules, expectations and limits shall be clear and consistent. A child shall not be expected to do more than the child's understanding and ability allow.
- c) Constructive methods of guidance. The childcare workers shall use only constructive methods of guidance. This may include, but is not limited to, interventions such as conflict resolution, encouraging the use of language skills, redirecting, providing choices, positive reinforcement, recognition of a child's strengths, and the allowance for individual differences. Disciplinary measures are based on establishing positive relationships with children that are then designed to help the child. The consequences of unacceptable behavior are clear to staff and children, and any measures applied are relevant to the incident; reasonable and carried out as effectively and promptly as possible. Any measures taken to respond to unacceptable behavior must be appropriate to the age, understanding and individual needs of the child.
- d) Actions that might be harmful to children are strictly forbidden.

### No child shall be

-subjected to an action or practice detrimental to the welfare of children. *The withholding of food, drink or rest, shall not be used as punishment or threat of punishment.*

### No child shall be

-forced to eat or drink against his/her will. *It is forbidden to deprive a child of food or refreshment, unless the child throws away or steals food or refreshments. In that case, food may be removed from the child, always making sure that the child receives enough liquid, vitamins and nutrition.*

### No child shall be

-punished for soiling, wetting or not using the toilet  
-subjected to cruel or severe punishment, humiliation, verbal abuse or unusual confinement.

The use of corporal punishments and physical violence for discipline, such as hitting or spanking, is strictly prohibited in all NPH homes. Any measures of control and discipline, including those with the aim of preventing self-inflicted harm or injury to others are based on approved standards. *(See chapter about restraint in emergency situation).*



### Adult behaviors that are never acceptable toward children include:

- screaming in anger
- neglect
- inflicting physical or emotional pain
- criticism of a child's person or family by ridiculing
- blaming
- teasing
- insulting
- name calling
- shaming
- embarrassing
- using threats
- using frightening or humiliating punishment (like exposing the child or youth in front of his/her friends)
- shaving heads
- cutting girls' hair short



# MISTREATMENT AND ABUSE



The objective of this policy is to address issues regarding the care and protection of children, youth and adults in the need of care and the prevention of all kinds of discrimination, violence or abuse against them.

## DEFINITIONS OF ABUSE

Child abuse or maltreatment constitutes all forms of physical and/or emotional ill-treatment, sexual abuse, neglect or negligent treatment or commercial or other exploitation, resulting in actual or potential harm to the child's health, survival, development or dignity in the context of a relationship of responsibility, trust or power.

## PHYSICAL ABUSE

Physical abuse is actual or potential physical harm to a child or a failure to live up to the responsibility to protect a child from physical injury. Physical abuse is non-accidental physical injury or harm to a child or a person. It ranges from minor bruises to severe fractures or death as a result of punching, beating, kicking, biting, shaking, throwing, stabbing, choking, hitting, burning, or otherwise harming a person. It also includes inflicting pain or injuries through poisoning, drowning, smothering or giving harmful drugs or alcohol to a person.

## PSYCHOLOGICAL OR EMOTIONAL ABUSE

Emotional abuse comprises the failure to provide an environment suitable for fostering the age-appropriate and social-psychological development of the child as well as persistent or serious verbal abuse, humiliation, debasement or rejection that negatively impact the child's spiritual behavioral development. Psychological or emotional abuse impairs a child's development or sense of self-worth. This may include constant criticism, threats, verbal assaults, harassment, humiliation, intimidation, sarcasm, rejection, bullying, racism or degrading punishment. It may as well include the denial of love and affection, support and guidance. Emotional abuse is almost always present when other types of maltreatment are identified.

**Neglect begins as soon as a** child is denied the basic foundations for psycho-social development, including that relating to health, nutrition, clothing, shelter, education, etc. Neglect means a caregiver's failure to act and provide a person in need of care with his/her basic needs which results in serious physical, mental or emotional harm, sexual abuse or exploitation or death.

### According to the NPH

childcare manual, reports of inappropriate sexual contact between a staff member or international volunteer and a child or any sort of abuse is handled in the following manner:



### SEXUAL ABUSE

Sexual abuse is any sexually motivated touching of a child, whether actual or threatened, including all forms of sexual activities such as taboo touching, intercourse, etc., as well as activities that do not involve physical contact, such as showing the child pornographic material. Sexual abuse is any kind of contact between an adult and child 18 years or younger, or an adult who is unable to understand, has not given consent, is threatened, coerced or forced to engage in sexual behavior.

Sexual abuse includes activities such as kissing, touching the child's genitals or breast, penetration, oral sex, rape and exploitation through prostitution or the production of pornographic materials.

1. The National Director is responsible to ensure that all staff and volunteers will report any abuse they witness to the National Director.
2. All staff and volunteers are obliged to report any abuse witnessed to the National Director.
3. When a report of abuse is received, the National Director initiates an investigation. As part of the investigation, the local psychologist should conduct interviews with the offended and offender.
4. If s/he finds evidence that the situation could be true, the following process needs to be followed:
  - a) The accused person should be suspended immediately with pay and will have to stay off the NPH grounds until the investigation is completed. If the offender is a child, depending on age, and for protection of the victim, the offender needs to be located off the NPH home.
  - b) The National Director must report to the NPHI Ex.Com and to the local board.
  - c) The National Director must report to the local authorities immediately and take measures to ensure that forensic evidence is obtained when available.
  - d) The victim should receive on-going psychological counseling, and possibly, if the offender is a child or youth of NPH, also.
  - e) If the abused is a Pequeño/a 18 years of age or older, the report to the local authorities has to be done by the adult Pequeño/a should they choose to do so. If this Pequeño/a decides not to report the abuse, a document must be signed in which the Pequeño/a declares that s/he did not want to report the abuse to the authorities.
5. NPH may or may not confront the child/children with the accused person.

**In addition to working** to prevent a child or youth from experiencing abuse, it is important to recognize high-risk situations and the signs and symptoms of maltreatment. If you do suspect a child, youth or adult person in need of care is being harmed, reporting your suspicions to the National Director or House Director may protect the child, youth or adult.

Reporting concerns is not making an accusation; rather it is a request for an investigation and assessment to determine if help is needed.



6. In the case of accusations against an international volunteer in addition to steps a through c, the NPH volunteer coordinator needs to be informed and should be available to listen to the volunteer. The National Director handles the case. The volunteer coordinator will advise the respective international volunteer coordinator, (Vicky Medley for the US, and Avriel Burlot for NPH International). Once the matter is settled, NPH will inform the responsible international volunteer coordinator of the end result.
7. Fundraising offices will not be informed unless someone of these offices is directly affected by any accusation.
8. All accusations, founded or unfounded must be recorded in writing documenting the case and all actions taken. The document must be signed by the accuser and National Director, and if possible, by the accused.

### **CHILD LABOR EXPLOITATION**

Child labor is defined as work that deprives children of their childhood, potential and dignity. It includes work that is mentally, physically, socially or morally dangerous and harmful to their health, physical and mental development and interest with meaningful educational and playing opportunities that would open for them a better future. Exploitation consist of the use of the child through activities that the child performs for the benefit of a third party. These activities include exploitative child labor and child prostitution as well as any other activity that leads to the the economic exploitation of the child, that is to the disadvantage of the child's physical or mental welfare, that prevents the child from receiving an education or damages the child's moral and psycho-social development.

Whether or not particular forms of "work" can be called "child labor" depends on the child's age, the type and hours of work performed, and the conditions under which it is performed.

It does not include children and teenagers doing household chores, helping in the house, in the gardens or on the farm.

# MISCONDUCT LEADING TO DISCIPLINARY PROCEDURE



In the event of misconduct against the policies above stated about discipline measures in the NPH family the following will apply:

## STAGE 1 Verbal Warning

Prior to this an opportunity should have been given to: inform the employee that the work/behavior has fallen below an acceptable level and they should be made aware what is unacceptable and point out how improvements can be made. A record should be kept of this meeting. If the standards continue to deteriorate the following can begin: A full investigation is held that is fair and just. A meeting will be held and the employee told that the continuation of the situation is unacceptable. The problem will be discussed. An action plan can be set out with a date for re-assessment. A record should be kept with copies issued to the parties involved. The verbal warning may be active on the personnel file of the employee for six months and with an agreed review period. If there is no improvement Stage 2 may occur.

## STAGE 2 First Written Warning

A full investigation is held. A meeting will be held to establish what improvements must be shown and within what time scale. A date for re assessment will be set. The employee will receive a written warning that will be active on their file for one year. If there is no improvement the following Stage may occur.

## STAGE 3 Final Written Warning

The previous (stage 2) procedure applies. The employee will receive a final written warning which will be active on their file for one year. The employee at this stage will be warned that unless improvement occurs there is a possibility that he/she may be dismissed. This may result in either suspension with or without pay. This option must be stated in the contract of employment. Dismissal will depend on the situation. The employee must be made aware of any decision. The employee has then received all possible support and opportunity to improve.

**Gross misconduct against** the policies stated about discipline measures in the NPH family may lead to immediate suspension and a full investigation. Dismissal will depend on the situation. The National Directors are under the obligation to make the staff aware in each home of these policies.

# RESTRAINT IN EMERGENCY SITUATION

It is our practice not to use physical restraint. However, in the event of a crisis situation, it may become necessary to use physical restraint. Physical restraint is only used to prevent likely injury to the child concerned or to others, or likely serious damage to property.

Physical restraint is only used as the last resort and is practiced according to the CPI training techniques which provide a non-harmful physical restraint that promotes an optimal level of care, welfare, safety and security of our Pequeño/as, staff and/or others.

- a) A behavior that requires immediate intervention constitutes an emergency. Emergency restraint must be used only under emergency situations and if essential. Emergency is a situation in which a child's behavior poses imminent risk to the safety of an individual child or to the safety of others.
- b) Prohibited Practices: The following procedures are prohibited under all circumstances, including emergency situations:
  - mechanical restraint;
  - corporal punishment
  - the deprivation of basic needs;
  - anything constituting child abuse;
  - any restraint that negatively impacts breathing;
  - prone restraint
- c) Physical Restraint is the application of physical force by one or more individuals that reduces or restricts a child's or youth freedom of movement. Physical restraint of a Pequeño/a may only be used for the purpose of providing safety and support.

Physical Restraint involves direct physical contact that prevents or significantly restricts a Pequeño/a's movement. Restraint is a last resort emergency safety intervention. Restraint is an opportunity for the Pequeño/a to regain self-control. This policy on physical restraint is not intended to forbid actions undertaken:

- to break up a fight;
- as the brief holding by an adult in order to calm or comfort;
- as the minimum contact necessary to physically escort a student from one area to another;
- to assist a Pequeño/a in completing a task/response if the Pequeño/a does not resist or resistance is minimal in intensity or duration; or

**Restraint is not used as a punishment, as a means to enforce compliance with instructions, or in response to challenging behavior which does not give rise to reasonable expectation of injury to someone or serious damage to property.**



- to hold a Pequeño/a for a brief time in order to prevent an impulsive behavior that threatens the child's immediate safety (e.g., running in front of a car).
- to take a weapon away from a Pequeño/a;

d) General Procedures for Emergency Restraint

An emergency restraint procedure may not be used in place of appropriate less restrictive interventions. Emergency restraint shall be performed in a manner that is:

- safe;
- appropriate; and
- proportionate to and sensitive to the Pequeño/a's:
  - severity of behavior;
  - chronological and developmental age;
  - physical size;
  - gender;
  - physical condition;
  - medical condition;
  - psychiatric condition; and
  - personal history, including any history of physical or sexual abuse

e) Limitations in Use: Restraint shall not be used for: the convenience of staff;

- as a substitute for an educational and pedagogical program;
- as a form of discipline/punishment;
- as a substitute for less restrictive alternatives;
- as a substitute for adequate staffing.

f) Time and Duration – Restraint should not be used any longer than necessary to allow the Pequeño/a to regain control of their behavior and generally no longer than five minutes – age 12 or younger and 10 minutes – age 13 and older.

g) Documentation and reporting: Each use of an emergency restraint and the reason for each use shall be documented in writing and reported to the National Director, House Director and Social Work immediately;

h) After any use of an emergency restraint, staff must debrief and consult with regarding the determination of future actions the National Director, House Director and Social Work.

i) Each staff member involved in direct childcare will participate in non-violent crisis prevention training.

**Staff Requirements:**

While using restraint, staff must involve appropriately-trained key identified personnel to protect the care, welfare, dignity, and safety of the Pequeño/a, continually observe the student in restraint for indications of physical distress and seek medical assistance if there is a concern; and document observations.



# SEXUAL EDUCATION

Human development is a lifelong process of physical, behavioral, cognitive, and emotional growth and change. In the early stages of life enormous changes take place. Throughout the process, each person develops attitudes and values that guide choices, relationships, and understanding.

Sexuality is also a lifelong process. Infants, children, teens, and adults are sexual beings. Just as it is important to enhance a young person's physical, emotional, and cognitive growth, so it is important to lay foundations for an adolescent's sexual growth. The directors, teachers, social workers, psychologists, childcare workers and staff have a responsibility to help young people understand and accept their evolving sexuality. The overall goals for the sexual education of the children are to develop and maintain relationships with others, to understand their sexuality and establish positive, caring social and responsible sexual relationships.

Each stage of development encompasses specific markers. The following developmental guidelines apply to most young people in this age group. However, each adolescent is an individual and may reach these stages of development earlier or later than other teens the same age. When concerns arise about a specific teen's development, the caregivers should consult the psychologists, social workers, coordinators or directors.



**At NPH, responsible sexual relationships** include the teaching of sexual relationships only within marriage. We have to provide sexual education according to the age and maturity of the children and youth. The children have the right to receive all information including a clear and open education about contraceptives measures.



## To help children ages 0-5

to develop a healthy sexuality, we:

- Help children feel good about their entire body. Caregivers should name all body parts accurately and convey that the body and its functions are natural and healthy.
- Touch and comfort children often to help them understand love and how it can be shared. Meeting children's needs also helps them develop trust.
- Help children begin to understand the difference between public and private behaviors and that certain behaviors, such as picking one's nose or touching one's genitals, are private ones.
- Teach about anatomical differences between males and females while maintaining that boys and girls are equally special.
- Teach children that they can say no to unwanted touch, regardless of who is attempting to touch them, and that they have a right to be respected when they say no.
- Describe bodily processes, such as pregnancy and birth, in very simple terms.
- Avoid shame and guilt about body parts and functions
- Help children understand the concept of privacy and that talk about sexuality is private and occurs at home.
- Teach correct names of the major body parts (internal and external) and their basic functions.
- Explain how babies "get into" the mother's uterus.
- Encourage children to come to them or other trusted adults for information about sexuality.



## To help children ages 6-8

to develop a healthy sexuality, we:

- Continue to provide information about sexuality, even if a child does not ask for it. At these ages, children may ask fewer questions, but still have lots of curiosity and need information about sexuality.
- Explain that there are many different types of families and all types have equal value and deserve respect.
- Provide basic information about important sexuality issues, such as HIV/AIDS, marriage, and sexual abuse.
- Inform children about the changes that will take place when they begin puberty.
- Though most six- to eight-year-old children do not experience these changes, the age at which some begin to show signs of puberty, such as pubic hair, breast buds, and hair under the arms is gradually decreasing, so that children need this information sooner.
- Recognize that everyone does not have the same sexual orientation and knowledge to children that many people have romantic feelings for members of the other gender, and some have these feelings for members of the same gender.





## To help children ages 9-12

develop a healthy sexuality, we:

- Help young people understand puberty and the changes they are going through and that these changes, including menstruation and nocturnal emissions (ejaculation), are normal.
- Respect young people's privacy while encouraging open communication .
- Convey that growth and maturation rates differ from person to person.
- Help young people understand that, while they are maturing physically, they still have lots of emotional and cognitive growth ahead and that sexual intercourse is not healthy, appropriate, or wise at this time in their lives.
- Acknowledge that abstinence is normal and healthy, that sexual development is healthy and natural, and that, as they grow older, there will be many ways to express sexuality that do not include sexual intercourse.
- Discuss the important relationship between sexual and emotional feelings.
- Be open to conversations about contraception and condoms and respond honestly and accurately when young people ask about them.

## To help teens ages 13-17

develop as sexually healthy youth, we:

- Clearly articulate our NPH family and religious values regarding sexual intercourse. Express that, although sex is pleasurable, young people should wait to initiate sex until they are in a mature, loving, and responsible relationship defined as marriage.
- Express that we all have a variety of options for experiencing intimacy and expressing love.
- Discuss together the factors, including age, mutual consent, protection, contraceptive use, love, intimacy, etc., that the NPH family believes should be a part of decisions about sexual intercourse.
- Reinforce teens' ability to make decisions while providing information on which they can base those decisions.
- Discuss contraceptive options.
- Help youth identify various physical and verbal responses to avoid/get away from sexual situations that make them feel uncomfortable.
- Acknowledge that teens have many future life options that some may marry and/or parent while others may remain single and/or childless.
- Use inclusive language that recognizes that some youth may be gay, lesbian, bisexual, or transgender.



## To help young adults 18+

develop a healthy sexuality, families should:

- Keep the lines of communication open and accept that the person is an adult, not a child.
- Offer choices, acknowledge responsibilities, and avoid dictates.
- Continue to offer physical and emotional closeness, but respect their need for privacy and independence.
- Appreciate them for their strengths and qualities.
- Facilitate their access to sexual and reproductive health care.
- Continue offering guidance and sharing values.
- Do not encourage nor prohibit romantic relationships between young adults

# ADDITIONAL POLICIES

## LEAVING THE NPH FAMILY OR FLYING THE NEST

The process of transition from care in the NPH family to aftercare (Hermanos Mayores) takes into consideration the young person's gender, age, maturity and particular circumstances and includes counseling and support.

Ongoing educational and vocational training opportunities are offered as part of life skill education to our young people in order to prepare them for an independent life and to help them to become financially independent and generate their own income.

- a) Each NPH country shall have a committee that reviews admission requests and cases of children/young adults who either express the desire to leave NPH or who might be asked to leave NPH.
- b) No child shall be forced to leave NPH, except in the case where the individual presents the real threat of danger to another person (other child or staff). (Danger is defined as: the real possibility of physical harm to another person; the real possibility of sexual aggression; or inducing others on more than one occasion to involve themselves in the use of drugs.)
- c) All pequeño/as who reach 18 years of age should be advised that they are no longer protected by section b, above, and that the committee has much greater latitude in whether it allows a person to continue with NPH or asks them to leave for disciplinary reasons.
- d) In any case of a pequeño/a (of any age) being asked to leave, or in the case of a child who insists on leaving NPH, there must first be an interview with the psychologist and/or social worker. Those staff will make a report to the above-mentioned committee, which will decide the best course of action in the particular case. The decision to ask a pequeño/a to leave shall always be made by the committee, and never by any one individual.
- e) In accordance with the founder's philosophy and rules, in the case of a pequeño/a of any age who spends a night outside of NPH without permission, the National Director is under no obligation to receive that person back, but has to evaluate with his/her multidisciplinary team the reasons for the pequeño/a to leave without permission to avoid that we act against the best interests for the pequeño/a.
- f) A pequeño/a leaving NPH must be informed clearly that the National Director will be under no obligation to receive the person back in the future (although the National Director does have that right should he decide to do so).

## The goal for each young

person leaving the NPH family is to live an independent life, rich in purpose, meaning and personal fulfillment. We pay particular attention in preparing youth for their lives outside the NPH family by developing self-esteem, practical, daily life knowledge and skills to prepare them for the world of work or further and higher education.



- g) The National Director together with his/her multidisciplinary team should consider the reintegration into the NPH Family if the youth, young man/woman asks for his/her reintegration and develop a plan for the reintegration.
- h) Though confidentiality is always a method of operating to be respected, in some cases, the staff and perhaps even children will need to be informed of enough of the details of a particular case, so as not to jeopardize the fundamental aspect of our philosophy of security.
- i) Whenever a pequeño/a leaves NPH, the departure and transition to their next residence should always be done with dignity and planning.

### CHILD PRIVACY AND CONFIDENTIALITY

Children’s privacy is respected and information is confidentially handled. The home and staff respect a child’s wish for privacy and confidentiality as is consistent with good parenting and the need to protect the child.

- a) Especially in respect of the security of the children and the protection of our homes nph staff members and volunteers are asked not to share information about Pequeño/as with external persons.
- b) NPH follows international guidelines and laws respecting the children’s privacy. We do not publish any discriminating, incriminating or sensitive personal information of our children, nor do we identify those children by name or picture. We specifically do not publish if a child is HIV+ or if he or she suffered any sexual abuse. Other information might also be restricted from publishing.

We do tell the children’s stories but without identifying them personally. Each home makes sure that all your publications are in accordance with governmental laws respectively and that you have the needed authorizations.

### RESEARCH REQUESTS

In general, NPHI does not endorse research at the homes. The reasons are that we want to protect our children’s privacy and do not want our children to feel used in any way. Having people coming in and asking questions, which could also be quite personal, undermines the feeling of security and the sense of family. Our children, because of the traumas many have suffered in the past, are more vulnerable to the potential harm that such research could create. However, if a research is conducted that could be of real benefit to NPH the following guidelines should be adopted:

- a) Request a written proposal from the researcher that includes:
  - methods that will be used;
  - what the benefit of this research for NPH would be;
  - a written statement about strict confidentiality about any information regarding NPH.

### When we receive children for

protective care (because they have suffered violence prior to coming to NPH and maybe under death threats) we do not let anyone know that these children are with NPH. Rare events and unusual requests for sharing sensitive personal information of our children should always be authorized by the Directors and/or social workers to avoid unintended and unwanted consequences.



- b) If the National Director supports the research proposal he should send it to NPHI's Family Service staff. They will review the proposal and either approve or deny the research.
- c) The National Director will communicate the results to the researcher.
- d) Depending on the scope of the Research Project, a Family Service Team member may be asked to coordinate the project with the NPH home/National Director.



**NPH International**

Version October 2015  
NPHI Family Services  
Design by NPHI Communications