CHAPTER III

Research Methodology

This chapter presents the methodology used by the researcher while studying the current status of institutional care for children with specific focus on rehabilitation. This is an explorative study using the mixed research method in order to combine multiple perspectives with the standpoints of qualitative and quantitative research.

Rationale for the Study

The researcher’s experience in the Department of Public Welfare for more than a decade has inspired her to undertake studies on children in residential care institutions under the Department of Social Development and Welfare (formerly known as the Department of Public Welfare). Some of Thailand’s children are fortunate enough to live in loving and caring families, but there are many less fortunate children who have to endure hardships in life: abandonment, maltreatment by parents and others, disability, illnesses, loss of parents, abuse by others. Institutionalization is one of the most viable forms of assistance in addition to other forms of children’s welfare services provided by the government. Since there are many negative effects of institutionalization on children, there must be measures and plans to assist institutionalized children to rehabilitate and reintegrate into society so that they can lead a productive life and become valuable and contributing members.

Objectives of the Research

The broad objective of this research study was to look at the current status of institutional care for children with a specific focus on the process of rehabilitation by Homes for Children in Thailand.

The specific objectives of this research study were as follows:

- To look at the management of the four institutions in terms of standards of care, staff and rehabilitation
- To look at the plans for each youth and his/her aspiration after discharge
- To compare the process of rehabilitation in the Home for Girls (Home 1) with that in the Homes for Boys (Homes 2-4)
• To explore the current situation and achievement of discharged youth

• To suggest strategies for the effective rehabilitation of institutionalized children in Thailand.

Methodology

The researcher collected data from both primary and secondary sources, which included interviews and a study of the records of youth, in order to learn and understand the way in which these institutions were run, the functioning of staff, the standards of care, youth’s aspirations and plans to rehabilitate them. This called for both qualitative and quantitative research and therefore, the researcher deemed the mixed methods research appropriate for this study.

The *qualitative* aspect of research brings richness to the exploration of the study and provides an in-depth understanding of concepts. The strength of qualitative research lies in its focus on the “context” and the “experience” for the purpose of inductive research. It emphasizes the need to view variables in the natural setting.

The researcher’s interviews, consisting of predetermined questions to obtain information, were recorded, transcribed and analyzed. In keeping with the precepts of qualitative research, the actions of the staff and the youth were observed and extensive notes were made.

In order to examine the relationships among the variables, the researcher adopted the *quantitative* mode of inquiry. This method facilitated efficient data collection to apply to the target population, that is, the youth in institutional care, to compare the homes for boys and girls, and to provide insights into the aspirations and experiences of youth and the process of rehabilitation. In keeping with the premise of this method, the researcher was unbiased and did not influence the subject being researched.

The mixed methods research adopted for this study thus focused on the research questions that called for both “multi-level perspectives” and “real-life contextual understandings”. As John Creswell (2013), puts it, “Mixed methods research is a research design (or methodology) in which the researcher collects, analyzes, and mixes (integrates or connects) both quantitative and qualitative data in a single study or a multiphase program of inquiry” (p.120).

Rossman and Wilson (1985) identified three reasons for combining quantitative and qualitative research. First, combinations are used to enable confirmation or corroboration of each other through triangulation. Second, combinations are used to enable
or to develop analysis in order to provide richer data. Third, combinations are used to initiate new modes of thinking by attending to paradoxes that emerge from the two data sources (Johnson, Onwuegbuzie and Turner 2007:116).

Collins, Onwuegbuzie, and Sutton (2006) identified four rationales for conducting mixed research—participant enrichment, instrument fidelity, treatment integrity and significance enhancement (p.117).

**Research Setting**

This study includes four homes located in the Bangkok Metropolitan Region. The Bangkok Metropolitan Region also known as Greater Bangkok includes Bangkok and the surrounding provinces of Nakhon Pathom, Pathum Thani, Nonthaburi, Samut Prakan and Samut Sakon.

**FIGURE 3.1**

**Homes located in the Bangkok Metropolitan Region**

![Map of Bangkok Metropolitan Region with highlighted homes](http://www.thaiappraisal.org/english/thairealestate/pret_preview.php?strquery=thair5.htm)
FIGURE 3.2
The Network

Management Context
- Organization/Management, personnel, environment, services and activities for children, the children
- Problems
- Gaps in policy implementation
- Suggestions

Youth in Institutions Context
- Experiences related to services provided by the Homes
- Preparedness/plans for discharge
- Suggestions

The Process of Rehabilitation
Physical and intellectual rehabilitation
Emotional and Psychological Rehabilitation

Strategies for Effective Rehabilitation of Institutionalised Children

Social Workers and Rehabilitation Team
- Current standards of care for rehabilitation
- Plans for social integration of youth
- Problems
- Gaps in policy implementation
- Suggestions

Discharged Youth Context
- Living condition
- Education
- Employment
- Availability of support network and problems faced
- Suggestions
At present, there are seventeen Homes for Children in Thailand under the Department of Social Development and Welfare (formerly called the Department of Public Welfare) providing care and protection in accordance with the Child Protection Act 2003. From 2009 to 2012, there were 3238, 4857, 3886 and 3079 children residing in these homes as shown in Table 3.1.

Data collected from primary and secondary sources give a picture of the management of the four institutions in terms of standards of care, rehabilitation staff, and plans for youth and their aspirations after discharge. The process of rehabilitation in the Home for Girls (Home 1) has been compared with that in the Homes for Boys (Home 2-4). The achievement and situation of the discharged youth were also explored. Finally, suggestions for the effective rehabilitation of institutionalized children in Thailand have been proposed.

Research Questions

The following questions guided my research.

1. How is the management of the four institutions in terms of standards of care, rehabilitation staff carried out?

2. What are the plans for youth, what are the future aspirations of the youth - boys and girls and in what ways can the institutions support them to achieve these?

3. What are the differences in the process of rehabilitation in the Home for Girls (Home 1) and in the Homes for Boys (Homes 2-4)?

4. What is the current situation and what is the achievement of discharged youth aged eighteen and above?

5. What are the suggestions for the effective rehabilitation of institutionalized youth?

Operational Definitions

For the purpose of this study, it is important to define the following concepts:

1. **“Bangkok Metropolitan Region”** (Bangkok and surrounding provinces), also known as Greater Bangkok, is the urban conglomeration of Bangkok, Thailand, which includes the city and the five adjacent provinces of Nakhon Pathom, Pathum Thani, Nonthaburi, Samut Prakan and Samut Sakhon.

2. **“Standards of care”** refers to the standards on the promotion of welfare service provision for children according to the 2003 Child Protection Act, which pre-
<table>
<thead>
<tr>
<th>Homes for Children (GO)</th>
<th>Location</th>
<th>No. of Children (2009)*52</th>
<th>No. of Children (2010)**53</th>
<th>No. of Children (2011)***54</th>
<th>No. of Children (2012)****55</th>
</tr>
</thead>
<tbody>
<tr>
<td>Homes for Boys (Provincial areas)</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>1. Maharaj Home for Boys</td>
<td>Pathumthani</td>
<td>367</td>
<td>397</td>
<td>240</td>
<td>344</td>
</tr>
<tr>
<td>2. Pak Kret Home for Boys</td>
<td>Nonthaburi</td>
<td>226</td>
<td>255</td>
<td>234</td>
<td>168</td>
</tr>
<tr>
<td>3. Si Thammarat Home for Boys</td>
<td>Nakhonsritammarat</td>
<td>102</td>
<td>316</td>
<td>220</td>
<td>98</td>
</tr>
<tr>
<td>4. Chiang Mai Home for Boys</td>
<td>Chiangmai</td>
<td>209</td>
<td>266</td>
<td>204</td>
<td>169</td>
</tr>
<tr>
<td>5. Nongkhai Home for Boys</td>
<td>Nongkhai</td>
<td>162</td>
<td>199</td>
<td>158</td>
<td>165</td>
</tr>
<tr>
<td>6. Bang Lamung Home for Boys</td>
<td>Chonburi</td>
<td>151</td>
<td>169</td>
<td>150</td>
<td>133</td>
</tr>
<tr>
<td>7. Ratchasima Home for Boys</td>
<td>Nakhonratchasima</td>
<td>123</td>
<td>139</td>
<td>125</td>
<td>136</td>
</tr>
<tr>
<td>8. Yala Home for Boys</td>
<td>Yala</td>
<td>69</td>
<td>82</td>
<td>72</td>
<td>70</td>
</tr>
<tr>
<td>9. Narathiwat Home for Boys</td>
<td>Narathiwat</td>
<td>69</td>
<td>85</td>
<td>68</td>
<td>88</td>
</tr>
<tr>
<td>Home for Boys (Bangkok)</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>1. Maha Mek Home for Boys</td>
<td>Bangkok</td>
<td>137</td>
<td>173</td>
<td>157</td>
<td>148</td>
</tr>
<tr>
<td>Homes for Boys and Girls (Provincial areas)</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>1. Vieng Ping Home for Children</td>
<td>Chiangmai (in the north)</td>
<td>202</td>
<td>785</td>
<td>589</td>
<td>202</td>
</tr>
<tr>
<td>2. Songkhla Home for Children</td>
<td>Songkhla</td>
<td>46</td>
<td>321</td>
<td>249</td>
<td>54</td>
</tr>
<tr>
<td>3. Pattani Home for Children</td>
<td>Pattani</td>
<td>139</td>
<td>183</td>
<td>152</td>
<td>152</td>
</tr>
<tr>
<td>4. Khao Thong Home for Children</td>
<td>Khon Kaen</td>
<td>266</td>
<td>285</td>
<td>205</td>
<td>211</td>
</tr>
<tr>
<td>Homes for Girls (Bangkok)</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>1. Rajvithi Home for Girls</td>
<td>Bangkok</td>
<td>488</td>
<td>546</td>
<td>472</td>
<td>380</td>
</tr>
<tr>
<td>Homes for Girls (Provincial areas)</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>1. Northeastern Home for Girls</td>
<td>Udonthani (in the north-east)</td>
<td>211</td>
<td>360</td>
<td>309</td>
<td>246</td>
</tr>
<tr>
<td>2. Saraburi Home for Girls</td>
<td>Saraburi</td>
<td>271</td>
<td>296</td>
<td>282</td>
<td>315</td>
</tr>
<tr>
<td>Total</td>
<td>–</td>
<td>3,238</td>
<td>4,857</td>
<td>3,886</td>
<td>3,079</td>
</tr>
</tbody>
</table>

*Source: *2009 Annual Report of the Department of Social Development and Welfare  
** 2010 Annual Report of the Department of Social Development and Welfare  
***Phone calls made to these places, March 2011  
****2012 Statistical Report of Social Welfare Services provided in institutions
scribes a set of regulations or criteria for stipulating the implementation nature of quality service provision for children in homes for children. This set of regulations help children develop in accordance with their age.

3. “Youth” in this study refers to an inmate of the Children’s Institution, who continues to stay in the institution under the Department of Social Development and Welfare, the Ministry of Social Development and Human Security after eighteen years of age or is discharged after the age of twenty-four.

4. “Institutions” in this study refer to the four government homes for children - MahaMek Home for Boys, Rajvithi Home for Girls, Maharaj Home for Boys and Pak Kret Home for Boys existing in the Bangkok Metropolitan Region.

5. “Rehabilitation” refers to an implementation of means to make children and youth feel equipped physically, intellectually, emotionally, psychologically and socially so that they learn to participate in activities and deal successfully with life outside the institutions and for social reintegration through the following rehabilitation programmes/services provided by the institutions:

1. **Physical and Intellectual Development**
   1.1 Provision of four basic human needs
   1.2 Provision of elementary education (Grades 1-6) inside the institutions
   1.3 Vocational training available inside the institutions
   1.4 Vocational training available outside the institutions
   1.5 Employment placement for the children
   1.6 Provision of medical care
   1.7 Sending the children to study at educational institutions outside the institutions
   1.8 Physical exercise, sporting activities inside and outside the institutions
   1.9 Study tours and exhibition visits outside the institutions
   1.10 Activities organization in observance of important days.

2. **Emotional and Psychological Development**
   2.1 Facilitating family meets inside the institutions
   2.2 Guidance and psychological counselling
   2.3 Organizing recreation facilities for watching movies, gymnasium, picnics and so on
2.4 Encouraging self-confidence building activities such as performing on stage, singing, playing games, debating, participating in sports and musical arts, demonstrating drawing abilities, etc.

2.5 Facilitating human relationship building activities such as team work, discipline building, patience practice, etc.

3. Social Development

3.1 Children work outside the institutions on a trial basis

3.3 Employment placement for the children who graduated or who are eighteen years of age

3.4 Group relation activities arrangements such as camping, recreational activities, and community service activities, and so on

3.5 Arrangement for reunion

3.6 Club activities participation such as sport competition, musical performance and so on

3.7 Campaign participation in various kinds of projects such as a Free of Drugs project and an AIDS youths project and more.

Selection of Homes for Children

The researcher decided to select the Homes for children located in the Bangkok Metropolitan Region. There were three homes for boys located in three cities, namely Bangkok, Nonthaburi and Patumthani and one home for girls located in Bangkok, all operated under the Department of Social Development and Welfare. This Home for Girls (Home 1) was the first Home providing residential care for girls between five and eighteen years as well as for boys between five and seven years of age in 1892. The Home for Boys (Home 2) was set up after the first Home in 1941. It is located in Nonthaburi and provides residential care for boys between seven and eighteen years of age. Home 3 and Home 4 for boys, established in 1954 and 1963 respectively, are located in Bangkok and Patumthani and provide residential care for boys of the same age. There were twenty-five female youth aged over eighteen residing in this Home for Girls, while there were twenty-eight male youth residing in the three Homes for Boys.

The researcher covered all the four institutions for children in the Bangkok Metropolitan Region: three homes for boys and one home for girls.
Selection of Key Informants

At the time of data collection, there were twenty-eight boys and twenty-five girls in the age group of 18-24 in the four homes for children selected for this study. Since the number of children in this age group was only fifty-three, it was decided to include all of them.

The number of youth discharged during the last three years (2011-2013) from some of the institutions is given below.

TABLE 3.2
Number of Discharged Youth (2011-2013)

<table>
<thead>
<tr>
<th>Name of Institution</th>
<th>No. of youth discharged</th>
<th>No. of youth discharged (addresses and phone numbers given)</th>
<th>No. of youth discharged (addresses given but no phone numbers)</th>
<th>No. of youth discharged (no addresses but phone numbers given)</th>
<th>No. of youth discharged (no addresses and no phone numbers given)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rajvithi Home for Girls</td>
<td>41</td>
<td>3</td>
<td>33</td>
<td>5</td>
<td>-</td>
</tr>
<tr>
<td>Mahamek Home for Boys</td>
<td>7</td>
<td>-</td>
<td>1</td>
<td>-</td>
<td>6</td>
</tr>
<tr>
<td>Pak Kret Home for Boys</td>
<td>39</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>36</td>
</tr>
<tr>
<td>Maharaj Home for Boys</td>
<td>7</td>
<td>2</td>
<td>-</td>
<td>-</td>
<td>5</td>
</tr>
<tr>
<td>Total</td>
<td>94</td>
<td>6</td>
<td>35</td>
<td>6</td>
<td>47</td>
</tr>
</tbody>
</table>

Owing to limited contact details available at the institutions, the researcher included all those who were accessible for the interview. The total number of youth discharged, who were accessible, was ten.

In addition, from all the four Homes, two key persons from the management, the social worker and the two members of staff involved in the process of rehabilitation were included in the sample. There were twenty key persons from the management and the rehabilitation teams.
Sources of Data

Primary sources. Primary data refers to data that is collected through the use of surveys, meetings, focus group discussions, interviews or other methods that involve direct contact with the respondents – women, men, boys and girls. For this study, primary data sources comprised interviews and observations which allowed the researcher to explore the views, experiences and values of the respondents.

Interviews and Observations. Interviews with the following informants were conducted in order to get a clear picture of the current status of institutional care for children and the process of rehabilitation in the homes.

- All youth aged between 18 and 24 years residing in four homes for children in the Bangkok Metropolitan Region, Thailand
- Male and female youth above the age of eighteen who were discharged during the last three years
- The staff on a rehabilitation team in four homes for children
- Managing committee members from the homes who are responsible for decisions related to day-to-day management and policies.

Secondary sources. These usually comprise data that already exists; data that has already been collected for some other purpose. Use of secondary data sources represent saving of both time and cost. In this research, documents, reports and legal provisions were carefully examined.

Documentary Records. These comprise

- Documents of the Department of Social Development and Welfare, agencies and institutions such as annual reports, academic journals, statistical reports, self-assessment reports of institutions, research studies and case records.
- Legal provisions such as the Constitution of the Kingdom of Thailand and the 2003 Child Protection Act, the 1989 Convention on the Right of the Child, the Ministerial Regulations, and the standards of care in the Homes for Children.

The above-mentioned documentary records were used for analysis of the management of the four institutions in terms of standards of care, including the standards of organization, personnel, environment, services and activities for children and child de-
velopment. They were also utilized for the analysis of plans for each youth, the process of rehabilitation, the current situation and the achievement of discharged youth.

The documents that the researcher studied were from major sources such as the Thammasat University, Kasetsart University, Krick University, the National Research Council of Thailand, the Ministry of Social Development and Human Security, and the Department of Social Development and Welfare.

**Tools for Data Collection**

With regard to tools for data collection, the researcher used techniques and methods of data collection such as interviews and non-participant observations.

1. **Interview schedules for the following informants:**
   
   (a) Youth in the age group 18-24, residing in four homes for children in Bangkok Metropolitan Region, Thailand
   
   (b) Discharged youth
   
   (c) Persons from the management
   
   (d) Social workers and members of the rehabilitation team.

   The interview schedules for key persons from the management, members of the rehabilitation team, youth in those institutions and youth discharged are available in Appendices II - V.

2. **Case records of the youth**

3. **Observations related to the infrastructure and other facilities for youth in the age group, 18 - 24**

4. **A small tape recorder** for recording for the information obtained from the interviews when the informants gave the researcher permission to do so.

**Data Collection Process**

The data collection process was largely carried out in the institutions and discharged youth’s residences.

1. **Interviews:** The researcher aimed at gathering detailed information from persons from the management, members of the rehabilitation team, male and female youth in those institutions, male and female youth discharged over the last three years (2011-2013) to obtain the data needed for the study. The
interviews lasted from at least one hour to two hours for each informant. Structured interviewed schedules were used for face-to-face interviews.

2. **Observations:** The researcher applied non-participant observations with the activities conducted for the children and youth in the institution’s environment to compare with the standard norms. The researcher did not alert the staff in charge in advance. The researcher also used non-participant observations for the living condition of the youth discharged while interviewing them.

3. **Field records:** The researcher applied supplementary tools for data collection so that it was convenient for summary and analysis and to formulate suggestions to strengthen rehabilitation programmes for the effective reintegration of institutionalized youths. There were two types of data collection tools used in this study:

   3.1. Audio recording: The researcher used a tape recorder to record the interviews. The researcher asked the informants for permission before recording their interviews and assured them of confidentiality.

   3.2 Field notes: The researcher used the method of note-taking for the information obtained from interviews and non-participation observations.

   The researcher kept a written record in Thai of many pertinent points gained from the interviews, the institution visits, home visits and non participant observations.

**Ethical Considerations**

The researcher carefully considered the data collection process by recognizing the rights of the selected participants and the impacts that may occur from this research. The feelings and comments of informants were given priority over the information to be obtained.

There is a code of ethics in every profession. Certain safeguards were maintained in accordance with important ethical considerations. For this study, the researcher consulted with the above mentioned informants and explained to them the purpose, goals and motivation of the study to obtain consent from them. Thus the researcher adhered to the principle of **voluntary participation**. The researcher verbally explained the relevant ethical aspects to the informants before the empirical study commenced. The researcher reassured the participants of **confidentiality**, that the information given would be treated confidentially and that it would not be made available to anyone not directly involved with the study.

The data collected was used for the stated purpose of research. The researcher informed the informants participating in this study, the Department of Social Develop-
Anonymity was further guaranteed by changing the names of all the participants involved. The research results were submitted in the form of a dissertation.

**Duration of Data Collection**

The researcher spent around seven months for data collection, from July 2012 to February 2013. At the first stage, the researcher made appointments to interview key persons from the management and members of the rehabilitation teams from the four institutions. The researcher also built a good relationship with the heads of the social worker sections of the four institutions, who facilitated interviews with two to four youth from each institution over the weekends. For interviewing the discharged inmates, the researcher made appointments with them for home visits and interviews.

**Data Analysis**

The entire research was exploratory and descriptive in nature. To analyze the data collected from the above mentioned core informants and key persons from the management, social workers and rehabilitation team as well as some of the family members/guardians of the youth for this study, the researcher employed a simple statistical method like averages and percentages using SPSS program (Statistical Package for the Social Sciences version 11.5).

The main themes used for the data analysis are as follows:

- The management of the four institutions in terms of standards of care: the standard of organization/management, personnel, environment, services and activities for children, children’s development.

- Implementation of the rehabilitation process based on the standards of care: initial activities after admission, daily routine, child development plan, health care and attention to special needs.

- Plans for each youth: educational support, support for seeking employment, life skills training, and assistance in seeking accommodation.

- Each youth’s aspiration after discharge.

- How institutions can support the youth for their reintegration into society: projects for social reintegration of youth, and activities conducted for the
children’s physical and intellectual development and the children’s psycho
emotional development.

- Current situation and the achievement of discharged youth: living conditions,
education, employment, availability of support network and problems faced,
and achievement of the discharged youth.

The next chapter presents the results and analysis.