

Integrated Methods for Improving Child Welfare: A Comprehensive Analysis of Child Care Home Financial Management, Employee Education, and Nutritional Practices

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Abstract

Child welfare and development play a pivotal role in ensuring the overall well-being and growth of children worldwide. A descriptive and explanatory research strategy was adopted within a deductive research framework to assess these hypotheses. Primary data were collected using structured questionnaires divided into general background information and opinion-based questions utilizing a five-point Likert scale. These were distributed physically to 471 respondents, out of which 305 valid responses were used for analysis. A purposive sampling method was employed to target knowledgeable respondents across multiple stakeholder categories. The data were analyzed using both descriptive and inferential statistical tools. The findings revealed that effective financial management has a significant and positive impact on the overall welfare and development of children. Additionally, staff training was found to enhance the capability of caregivers, thereby contributing positively to child development. The provision of a balanced diet and proper nutrition also showed a substantial and favorable effect on children's well-being. These results underline the critical importance of integrated approaches to child care, involving financial planning, personnel development, and nutritional support. The study contributes to the existing literature by offering empirical evidence from Nepal's child care system. It provides valuable insights for academic institutions, policymakers, and child welfare organizations, helping them make informed decisions to improve the standards of child welfare and development in institutional care settings.

Key words: Child welfare, financial management, Staff training, Balanced diet, Nutrition

Introduction

Child welfare development is a systematic approach to ensuring the safety, health, education, and overall well-being of children. It involves protecting them from harm, supporting families, and promoting environments where they can thrive physically, emotionally, and socially. It includes services like foster care, child protection, health services, education access, legal support, and mental health assistance. However, challenges persist, such as poverty, economic instability, lack of access to education and healthcare, abuse and neglect, weak legal frameworks, institutional care, and limited child participation. Solutions to improve child welfare include strengthening family support systems, expanding access to quality education and healthcare, enforcing strong child protection laws, promoting family-based care, encouraging children's participation in decision-making processes, and coordinating efforts among government, NGOs, and local communities. Effective child welfare development ensures every child has the opportunity to survive, grow, and contribute meaningfully to society.

The increasing involvement of children in child welfare services underscores the need for enhanced support, protection, and well-being for vulnerable youth aged 0-17 years (Skauge et al., 2021). Childhood sociology and children's rights have advanced child welfare by emphasizing children's agency, participation, and protection, shaping policies and practices to ensure their well-being and voices are heard (Gertrud Lenzer, 2018). Two key perspectives have simultaneously advanced this agenda: the sociology of childhood, which views children as social actors, and children's rights, which emphasize their entitlement to protection, participation, and provision (Gertrud Lenzer, 2018).

The recognition of children as social actors with independent rights has become widely accepted, emphasizing their right to participate in decisions affecting their lives. This shift is often linked to the historical development of children's rights, notably reinforced by the 1989 United Nations Convention on the Rights of the Child (UNCRC). A key aspect of this advancement is Article 12, which explicitly grants children the right to express their views in matters concerning them. This principle has significantly influenced policies, research, and child welfare practices, promoting active child participation and empowerment (Naciones Unidas, 1989). Family living arrangements, including parental residence, marital status, and extended family members, significantly impact an individual's personal life, affecting emotional support, financial stability, and social interactions (Bailey et al., 2013). Research indicates that children living with both biological parents improve their physical, social, and emotional well-being, with over 80% of adults considering this the ideal arrangement. Children in biological families show better self-control, confidence, and fewer behavioral issues (Amato, 2005; Ahmed & Zaman, 2019).

Financial management is crucial for children's welfare and development, involving strategic planning, organization, and control of resources in child-focused institutions. It ensures transparency, accountability, and support for children's health, education, and protection. Financial literacy is essential for caregivers and older children, promoting long-term well-being and economic independence (Alnassar, 2020). (Rodrigues et al., 2019). Promoting financial literacy in children's welfare involves teaching money management, budgeting, and resource allocation, empowering individuals to make informed decisions, and fostering long-term financial security and resilience for future success and growth (Kumar et al., 2022). Furthermore, Training is essential for child welfare and development staff in child care homes, covering child protection, emotional support, nutrition, and developmental psychology. Regular professional development improves staff's ability to create a safe environment, improve children's well-being, and address developmental issues (Lee et al., 2025; Antle et al., 2008). Child welfare training evaluation literature primarily focuses on intermediate outcomes like trainee reactions and knowledge enhancement, with limited attention on long-term impacts on children's welfare or staff performance (Shiki et al., 2020; Holden, 2015). Additionally, Balance diet in health care and nutrition for quality human resources (HR) are crucial for a nation's development, starting from early school age. A balanced diet supports physical health, cognitive function, and emotional stability, enhancing children's critical thinking, clear expression, and adaptability. This ensures children have the necessary resources for optimal development, paving the way for future quality HR formation (Holden, 2015). (Syarifaini et al., 2021). Maintaining a balanced diet, combining appropriate ingredients, is crucial for good nutritional status. Overconsumption can lead to weight gain and health issues, while inadequate intake can cause malnutrition and increased disease vulnerability (Eka Febriyanti et al., 2023). Health care spending, per capita gross national income, and expected years of education have all greatly enhanced life expectancy (Dhungana et al., 2024). This research focuses on child welfare and development in Nepal, particularly within child care homes. It explores key questions: What is the connection between child welfare development and financial resources? Is there a correlation between child welfare and staff training? Does a balanced diet and nutrition impact child welfare? The study aims to understand how financial investment, quality of care, and nutritional support influence the overall development of children in institutional settings. By examining these relationships, the research seeks to identify gaps and propose improvements to enhance the well-being and future prospects of children in Nepal's child care homes. This research aims to examine the relationship between financial resources and child welfare development, investigate the correlation between staff training and children's well-being, analyze the impact of balanced diet and nutrition on child development, identify gaps in the current institutional child care system, and propose practical recommendations to improve child care services in Nepal.

Literature Review

Urie Bronfenbrenner's theory of human development evolved significantly from the 1970s to 2005. While often viewed as focusing solely on environmental context, the theory's central concept became *proximal processes*—the enduring, reciprocal interactions between individuals and their environment. These processes are shaped by personal characteristics, context, and historical time. Bronfenbrenner emphasized that development is not one-directional; individuals

actively influence and are influenced by their surroundings. The family, as a core microsystem, plays a vital role through individual traits and, more importantly, through daily interactions among members, which are key to a child's cognitive, emotional, and social development over time (Rosa & Tudge, 2013).

Bronfenbrenner's ecological systems theory, particularly the concept of proximal processes, helps understand child welfare in child care homes. Financial management directly impacts the quality of care, including access to resources, staff training, and nutritious food. Adequate funding improves child welfare by enabling consistent caregiver training, healthy meals, and safe living environments. Trained staff enhance children's development, while a balanced diet supports physical and cognitive growth. Poor financial management can lead to undertrained staff, insufficient nutrition, and inadequate care, causing developmental delays or emotional neglect. Understanding these correlations helps identify areas for improvement in alternative care settings.

Corporate Social Responsibility (CSR) involves financial health, environmental sustainability, and social well-being. While leadership often recognizes its importance, lack of consistent action can hinder progress. To meet stakeholder expectations, leaders must actively prioritize, monitor, and integrate CSR practices into core business strategies and daily operations (Bilderback, 2024).

Financial Management and Child Welfare Development. This paper explores how behavioral economics can inform public policy to address systemic inequality, emphasizing the role of cognitive biases and social norms in decision-making. It examines Singapore's affordable housing system and Norway's Sovereign Wealth Fund as case studies. Singapore's affordable housing model, developed by the Housing and Development Board (HDB), combines market mechanisms with state planning to promote homeownership and social responsibility. Through subsidies, flexible repayment schemes, and incentives, it ensures housing affordability for all income levels, fostering equality, social cohesion, and long-term economic stability (Phang, 2018; Davis, 2025).

Similarly, Norway's Sovereign Wealth Fund (GPF), established in 1990, uses surplus petroleum revenues for sustainable, long-term investments prioritizing societal well-being. By adopting ethical, transparent strategies, the fund ensures intergenerational equity. Behavioral insights, such as long-term planning and social trust, help ensure equitable distribution of wealth over time (Gloinson et al., 2021; Heiret, 2024). Gøsta Esping-Andersen (1990) argued that Scandinavian welfare states' high decommodification, where society operates independently of the market, offers valuable insights for alternatives to neoliberal policies in contemporary times (Kuisma, 2007).

Education enhances human resources, fostering individuals who can adapt to change and effectively tackle workplace challenges, making it a crucial pillar for national development (Ahmed et al., 2025). Education fosters individual growth and drives social and economic advancement, contributing to rapid economic growth in highly educated nations (Manajemen et al., 2024).

H1: Financial management is significantly associated with improved child welfare development.

Staff Training and Child Welfare Development. Staff training is crucial in addressing negative school experiences by equipping educators with emotional support, conflict resolution skills, and positive student-teacher relationships. This can reduce academic disengagement, anxiety, and peer victimization. Well-trained staff can identify distress signs, create inclusive learning environments, and provide interventions for students' cognitive, emotional, and social development (Tobia et al., 2018; Nightingale et al., 2018; Hascher, 2007). Staff training in child welfare settings enhances caregivers' ability to promote well-being by fostering happiness, joy, and life satisfaction in children. It also helps reduce negative emotions and complaints, contributing to healthier mental, emotional, and developmental outcomes for vulnerable children (Asiva Noor Rachmayani, 2015; Ryff, 1989; Ryff, 1989).

Subjective well-being, encompassing enjoyment, satisfaction, and feeling well, is gaining focus in schools, despite ongoing conceptual ambiguity and the lack of a unified definition (Ryff, 1989; Hascher, 2007). The StudWB model highlights the complexity of subjective well-being in schools, focusing on positive emotions and thoughts over negative ones, with positive dimensions including attitudes, enjoyment, and academic self-concept (Hascher, 2008; Saxer et al., 2024; Mölsä et al., 2025). The multidimensional model of student well-being reveals that school environments must cater to individual student needs to prevent negative behavioral and motivational consequences, affecting their engagement with learning (Martin et al., 2024; Tvedt et al., 2025; Ricker & Angosta, 2024).

H2: A strong correlation exists between enhanced child welfare development and staff training.

Importance of Balanced Diet and Nutrition and Child Welfare Development. Child malnutrition is a serious global health issue resulting from insufficient, excessive, or unbalanced intake of nutrients, affecting physical growth, cognitive development, and overall well-being (Bangura, 2025; Kukreja & Naik, 2023; Mutalib et al., 2024). Proper nutrition is crucial for child welfare and development, supporting physical growth, cognitive development, emotional regulation, and immune function. Inadequate nutrition, especially in early years, can lead to stunted growth, learning difficulties, and long-term health issues. Ensuring access to nutritious meals is essential for equitable development in institutional or alternative care settings (Patrice, 1999; Pienaaah et al., 2025).

Child malnutrition hinders physical and cognitive growth, compromising emotional well-being and future opportunities. Addressing malnutrition is crucial for holistic child welfare, especially in vulnerable care settings (Blössner et al., 2005). In 2022, an estimated 148.1 million children under five were stunted globally, 45 million faced wasting, and 37 million were overweight (Aira, 2024; Riwa et al., 2025). The World Health Organization reports that malnutrition contributes to 54% of child deaths worldwide, with over 60% of 10.9 million annual under-five deaths linked to malnutrition (Zhang et al., 2022).

Sustainable management of natural resources is crucial for food security and balanced diet nutrition. Food 2030 emphasizes climate-aligned food systems, promoting environmentally friendly agriculture and aquaculture. Access to nutritious food improves child welfare (Emiliani et al., 2020; Vărzaru, 2024; Ist-id, 2025). A balanced diet, crucial for preventing and managing chronic diseases, should align with recommended nutrient intakes. According to Korea's Dietary Reference Intakes (Ministry of Health and Welfare & Korean Nutrition Society), a healthy diet includes 55%–65% carbohydrates, 7%–20% protein, and 15%–30% fat for individuals aged 3 and older (Shin et al., 2023; Oh et al., 2022).

H3: Balanced diet and nutrition are significantly associated with child welfare development.

Child Welfare and Development. Child welfare development is linked to financial management, staff training, and balanced diet nutrition. Effective financial management allocates resources for essential services like quality care, infrastructure, nutrition, and professional development. Well-trained staff address children's physical, emotional, and psychological needs, while a balanced diet supports physical growth, cognitive development, and overall well-being. Poor practices can hinder child welfare outcomes. The first 1,000 days, from conception to age two, are critical for promoting child health, ensuring survival, and supporting long-term growth and development (Agbozo et al., 2018).

The shift to digital financial technology improves efficiency and transparency in child welfare programs, enabling timely resource allocation, better spending monitoring, and targeted support, ultimately enhancing service delivery and child development outcomes (Agbozo et al., 2018; Boute et al., 2022; Osabohien et al., 2024). Staff training and child welfare development are closely linked, as well-trained caregivers provide better emotional support, education, and care, fostering a nurturing environment that promotes healthy growth, development, and well-being in children (Clark, 2020; Collins et al., 2007). This literature review examines the link between abusive parenting, unhealthy eating behaviors in foster care children, the impact of foster parents' food practices on child health, and symbolic interaction theory (Helton et al., 2017; Searle et al., 2025; Louise, 2020).

Financial management, staff training, and balanced diet in child welfare are crucial for promoting healthy habits, access to quality food, and improving children's health and development. The following hypotheses have been established:

H1: Financial management is significantly associated with improved child welfare development.

H2: A strong correlation exists between enhanced child welfare development and staff training.

H3: Balanced diet and nutrition are significantly associated with child welfare development.

Research Framework

A research framework provides the foundational structure for a study by defining the theoretical basis and guiding the entire research process. It outlines the development of research questions, selection of methodologies, and planning of data collection and analysis. This framework ensures clarity, consistency, and alignment between objectives and research outcomes throughout the investigation (Ali Khan et al., 2023). Similarly, the impact of financial management, staff training, and a balanced diet and nutrition on the development of children in institutional care settings is examined in this study, with an emphasis on how advancements in these areas can lead to better welfare outcomes.

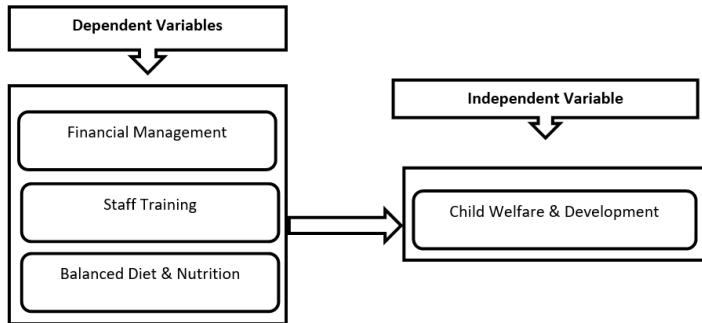


Figure1: Conceptual Framework of the Study. Source: Moon et al. (2024), Ali Khan et al. (2023), Madden & Coffey (2025), (Varzakas & Smaoui (2024)

The conceptual framework illustrated in Figure 1 outlines the core variables influencing child welfare and development: financial management, staff training, and balanced diet and nutrition. These interconnected components collectively shape the quality of care provided in child care and alternative homes.

Research Methodology

Research Approach: This study explored how factors like financial management, staff training, and nutrition impact child welfare in care homes. Using a deductive approach, it examined these predictors’ influence on stakeholders including child care personnel, children, rights activists, officials, and social workers to evaluate an existing theoretical framework and research premise. The deductive approach was used to evaluate theoretical assumptions and hypotheses, testing how well existing theories align with observed data from child care homes. The outcome variable, child welfare development, reflects the overall impact of these predictors on children’s growth and well-being (Gunter, 2013; Ghanad, 2023).

The study used descriptive and explanatory research designs to provide a comprehensive overview of child welfare development, including financial management, staff training, and balanced diet, and analyze the relationships between these variables and their impact on child welfare outcomes. Descriptive research design systematically describes characteristics of a population, situation, or phenomenon without establishing cause-and-effect relationships between variables (Baskerville & Pries-Heje, 2010; Köstler et al., 2025; Net et al., 2025). Explanatory research design investigates cause-and-effect relationships between variables, aiming to explain how and why phenomena occur (Kwame & Mensah, 2025; Numanovich & Abbasxonovich, 2020).

Study Population and Sample: This study examines child welfare practices, operational standards, and living conditions in seven legally operated Child Care Homes (CCHs) in five districts of Bagmati Province, Nepal. The research area was determined using appropriate sampling methods, and the study provides insights into the effectiveness of institutional care and the policies, challenges, and socio-demographic factors influencing child care in Nepal. In total 471 respondents were given structured questionnaires, and 305 of them provided insightful answers. Individual respondents served as the unit of analysis, and the purposive sampling technique was employed for the primary data source.

Data Sources, Methods of Data Collection, and Data Analysis Techniques. This study investigates the challenges faced by children residing in Child Care Homes (CCHs) in Nepal, utilizing data from various sources. The research categorizes children based on their age, education. Additionally, the study considers children from class 7 and above who are currently residing in CCHs. By analyzing these age groups, the study aims to identify patterns, challenges, and socio-demographic factors affecting children in institutional care. Add 3 variables independent The inclusion of diverse age categories allows for a comprehensive understanding of the varying needs and experiences of children in CCHs, which is crucial for evaluating the effectiveness of current care systems and identifying areas for improvement in child welfare policies and practices in Nepal.

The Study Tool: The study employed a structured questionnaire divided into two segments: Group A and Group B. Group A gathered demographic information such as gender, caste, religion, age, marital status, education, sector, work experience, motivation for child care work, children’s age, the manager’s gender, and staff composition by gender. These variables provided essential background data to contextualize responses and allow for comprehensive analysis across different institutional and personal characteristics, enhancing the study’s understanding of child welfare practices within diverse organizational settings.

The study used a five-point Likert scale to gather respondents’ opinions on key research variables, including child welfare, financial management, staff training, and the importance of a balanced diet in healthcare and nutrition. The scale allowed for quantification of attitudes and opinions, supporting the quantitative analysis of the relationship between variables, with 1 representing strongly disagree, 2 representing disagree, 3 representing neutral, 4 representing agree, and 5 representing strongly agree (Vázquez et al., 2024; Adeniran & Fakunle, 2025). Child welfare development is significantly influenced by financial management, staff training, and balanced diet and nutrition. Effective financial management ensures quality care, while well-trained staff provide support. A balanced diet promotes physical and cognitive development, creating a nurturing environment for holistic growth in children, especially in institutional or alternative care settings. These factors ensure adequate resources, skilled caregivers, and proper nourishment, fostering overall physical, emotional, and cognitive growth in children (Milne et al., 2022; Chapman, 2025).The questionnaires used for data collection in this research serve as a vital instrument, particularly for examining the proposed hypotheses related to child welfare development. Comprising a total of 28 item statements, the questionnaire is structured with each of the key study variables— financial management, staff training, balanced diet and nutrition, and child welfare development—represented by four item statements. This design is grounded in theoretical assumptions intended to assess the extent to which these variables influence child welfare. The detailed questionnaire and its components are provided in the appendix for reference and validation purposes.This survey utilized established constructs and questionnaires from prior research to enhance reliability, validity, and clarity, supporting accurate hypothesis testing and providing a strong foundation for theory re-examination.

Techniques for Statistical Treatment: The study surveyed seven child care homes in Kathmandu Valley using structured questionnaires. SPSS 29 analyzed data, employing descriptive statistics and structural equation modeling to assess child care effectiveness and influencing factors. Descriptive statistics such as frequency, percentage, mean, and standard deviation were used to summarize respondents’ background data. Inferential tests, including correlation matrix and regression analysis, assessed hypotheses and explored relationships between predictor variables and the child welfare development outcome (Pearson & Tukey, 1965; Shi & Bolt, 1982; Röβner et al., 2025).

Model Specification: The model specification outlines the theoretical and mathematical foundation of the statistical framework used in this study (Fisher, 1922; Challenges et al., 2008). This research model incorporates financial management, staff training management, and balanced diet and nutrition as independent variables to examine their influence on child welfare and development, which serves as the dependent variable. The model provides a structured approach to explore how these critical factors collectively impact child well-being within institutional care settings.

$$CWD = \alpha + \beta_1 FM + \beta_2 STM + \beta_3 BDN + \epsilon_i \tag{1}$$

Where, CWD represents Child Welfare and Development; FM denotes Financial Management for children; STM stands for Staff Training and Management; and BDN signifies the Importance of Balanced Diet in Healthcare and Nutrition, all acting as key variables in the model, and ϵ_i an using the incorrect word.

Results

Descriptive Statistics.

Table 1: Participant Demographics (N = 305)

		Frequency	Percentage
Gender of Respondent	Male	160	52.5
	Female	145	47.5
Caste of Respondent	Kshetri	74	24.3
	Brahman	69	22.6
	Magar	32	10.5

	Tharu	8	02.6
	Tamang	32	10.5
	Newar	21	06.9
	Musalman	1	0.3
	Yadav	4	01.3
	Rai/Limbu	9	03.0
	Gurung	10	03.3
	Sanyasi/Dashnami	9	3.0
	Sherpa	36	11.8
Religious of Respondent	Hindu	240	78.7
	Buddhisms	32	10.5
	Islam	2	0.7
	Kirat	5	1.6
	Christian	25	8.2
	Prakrit/Prakriti	1	0.3
Respondent's Age	Below 10	1	0.3
	10-15	153	50.2
	16-20	110	36.1
	21-25	3	1.0
	26-30	10	3.3
	31-35	8	2.6
	36-40	13	4.3
	41 & Above	7	2.3
Marital Status	Married	34	11.1
	Unmarried	271	88.9
Respondent's Education	Less than SLC/SEE	204	66.9
	SLC/SEE	53	17.4
	PCL/ 10+2	34	11.1
	Bachelor	6	2.0
	Master's	8	2.6
	PhD	0	0.0
Respondent's Sector	Manager/Administrator/ Founder/ Staff	21	6.9
	Child of Orphanage (Children)	265	86.9
	Child Rights Association/ Activist/ Govt. Official	9	3.0
	Social Worker	10	3.3
Respondent's Experience	Less than 5 Year	130	42.6
	6-10 Year	142	46.6
	11-15 Year	18	5.9
	16-20 Year	5	1.6
	21 & Above Year	10	3.3
Manager of Institution	Male	161	52.8
	Female	135	44.3
	I am not involved	9	3.0

Table 1 highlights several key demographic insights from the study. A gender disparity exists among orphanage residents, with 160 (52.5 percent) being male and 47.5% female. Caste distribution shows that Kshetri (24.3%) and Brahmin (22.6%) are the most represented, followed by Sherpa (11.8%), Magar and Tamang (10.5% each), Newar (6.9%), and other castes, reflecting Nepal's diverse ethnic makeup. Respondents are grouped into 13 caste-based categories and six religious groups, with Hinduism being the dominant religion at 78.7%, followed by Buddhism (10.5%) and Christianity (8.2%).

The majority of participants fall into the 10–15 (50.2%) and 16–20 (36.1%) age groups, which are critical developmental phases. Respondents aged 21–25 (1%) and those 26 and above are primarily staff, social workers, or government officials. Educationally, 66.9% have education below SLC/SEE, while 17.4% completed SLC/SEE, 11.1% finished PCL/10+2, and only a small percentage attained bachelor's (2%) or master's (2.6%) degrees. Respondents are categorized into four groups: 86.9% are children, 6.9% are staff or administrators, 3.3% are social workers, and 3% are from child rights organizations or government bodies. Among managers, 52.8% are male, 44.3% female, and 3% identify as other.

Correlation Analysis

Why do we use correlation? Justify.

Table 2: Correlations Matrix

Variables	Mean	Std. Deviation	CWD	FM2	STM3	BDN4
CWD	4.1197	0.57160	1.000			
FM2	3.9404	0.63781	0.569**	1.000		
STM3	3.9388	0.55317	0.456**	0.599**	1.000	
BDN4	3.9656	0.59955	0.522**	0.471**	0.591**	1.000

Notes: **. Correlation is significant at the 0.01 level (2-tailed).

*. Correlation is significant at the 0.05 level (2-tailed); FM= Financial Management; STM= Staff Training and Management; BDN= Balanced diet.

Source: Compiled by the authors using SPSS 29.

Correlation is a statistical tool used to measure the relationship and degree of association between two or more variables. It indicates how strongly variables are related and whether the relationship is positive, negative, or neutral. This helps in identifying trends, making predictions, and supporting decision-making in various fields such as economics, health, psychology, and social sciences. While correlation reveals whether variables change together, it does not imply one causes the other. It plays a crucial role in data analysis by offering insights into patterns and helping researchers understand the dynamics between variables more effectively.

In this study, Financial Management (FM), Staff Training and Management (STM), and Balanced Diet and Nutrition (BDN) were the independent variables. Child Welfare Development (BDN) served as the dependent variable, used to assess how these factors influence children's well-being and overall developmental outcomes. Table 2 presents the correlation coefficient, indicating both the direction and strength of relationships. A positive association ($r = .569$) was found between the financial management and child welfare development. Additionally, involving individuals from diverse backgrounds in child care homes enhances children's overall well-being, supporting inclusive and effective care environments.

Further, Table 2, shown that a positive correlation ($r = .599$) was identified between diverse staff training and management and the overall welfare and development of children in care homes. This suggests that incorporating staff from varied backgrounds contributes significantly to enhancing children's well-being, promoting inclusive practices and effective caregiving within child care institutions. A positive and significant correlation ($r = .591$) was found between a balanced diet and nutrition and children's welfare and development, indicating that proper nutrition plays a crucial role in enhancing children's overall well-being.

Table 3: Regression Analysis

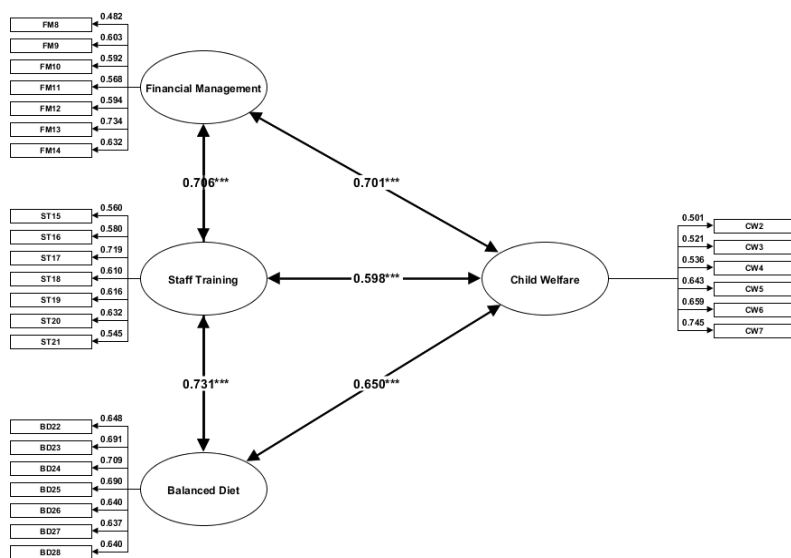
Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.	Collinearity Statistics				
		B	Std. Error	Beta			Tolerance	VIF	Adjusted R Square	F Value	P Value
1	(Constant)	1.389	0.203		6.838	0.00			0.401	68.864	.000 ^b
	FM2	0.362	0.051	0.403	7.157	0.00	0.620	1.613			
	STM3	0.028	0.064	0.027	0.44	0.66	0.518	1.929			
	BDN4	0.301	0.053	0.316	5.65	0.00	0.629	1.590			

a. Dependent Variable: CWD

The regression analysis revealed varying degrees of influence among the independent variables on child welfare and development. Financial management exhibited a positive and statistically significant effect, with a beta coefficient ($\beta = 0.362, p < 0.05$), and a p-value less than 0.05. This indicates that improved financial management practices are associated with enhanced child welfare and development. Specifically, a 1% improvement in financial management practices is predicted to result in a 0.362% increase in child welfare and development outcomes. In contrast, staff training and management, although demonstrating a positive relationship with child welfare and development, **was not statistically significant** ($\beta = 0.028, p > 0.05$). This suggests that while training initiatives may support development efforts, their isolated impact may be limited or influenced by other mediating variables. Balanced diet and nutrition for health also showed a positive and statistically significant effect on child welfare and development ($\beta = 0.301, p < 0.05$). This implies that nutritional interventions contribute meaningfully to the well-being and holistic development of children in care institutions. A 1% improvement in diet and nutrition practices is associated with a 0.301% increase in child welfare and development. These findings underscore the importance of prioritizing financial management and nutritional support to foster sustainable child development in institutional settings.

Confirmatory Factor Analysis

Child Welfare and Development



Regression Analysis

The regression analysis determines the extent to which predictor variables influence the outcome variable. The regression coefficients indicate the expected impact outlined in the hypotheses. This study examined the influence of financial management, staff training, and balanced diet and nutrition on child welfare development, as presented in the findings summarized in Table 3.

All three independent factors had a statistically significant positive impact on child welfare development, according to the regression results: balanced diet and nutrition ($\beta = 0.316, p < 0.01$), staff training ($\beta = 0.028, p > 0.01$), and financial management ($\beta = 0.403, p < 0.01$). Strong explanatory power was suggested by the entire model, which explained **64%/41%** of the variance in child welfare development ($R^2 = 0.638/407?$). Regression analysis showed that staff training ($\beta = 0.027$), balanced diet and nutrition ($\beta = 0.316$), and financial management ($\beta = 403$) all significantly influenced the development of child welfare, explaining **64%/41% of the variance ($R^2 = 0.638/407?$)**. These findings support earlier studies and highlight the necessity of efficient institutional procedures. According to the research, enhancing financial transparency, providing thorough staff training, and guaranteeing enough nutrition are all crucial for advancing child welfare outcomes.

Table 4: Summary of Hypothesis Testing Hypotheses

Hypotheses	Results
H ₁ : Financial management is significantly associated with improved child welfare development.	Accepted
H ₂ : A strong correlation exists between enhanced child welfare development and staff training.	Accepted
H ₃ : Balanced diet and nutrition are significantly associated with child welfare development.	Accepted

Source: compiled by the author using SPSS 29

In Table 4, The research hypotheses summary shows that all three proposed hypotheses were accepted and aligned with the theory. The first hypothesis confirmed that financial management positively affects child welfare and development. The second hypothesis found that staff training has a positive impact on child welfare and development. Lastly, the third hypothesis revealed that a balanced diet and proper nutrition positively influence child welfare and development. Each hypothesis was supported by the data, indicating relationships between these factors and child development, thereby reinforcing the theoretical framework guiding the study.

Discussion

This study aimed to examine the influence of child welfare and development among residents of various types of child care homes in Nepal. The research focused on identifying key predictors—financial management, staff training, and balanced diet and nutrition—and formulating hypotheses regarding their impact. These factors were evaluated to determine their effect on child welfare and development. The outcome variable encompassed perspectives from multiple stakeholders, including managers, founders, administrators, staff members, children residing in care homes, child rights association members, activists, government officials, and social workers engaged in the child welfare sector across different districts of Nepal. Increased public spending on healthcare leads to better health outcomes and more effective healthcare services (Dhungana, 2023).

The findings revealed a positive relationship between financial management and child welfare and development, indicating that effective financial practices can significantly enhance support, care, and overall well-being of children in care homes. This finding aligns with previous research, reinforcing the idea

that effective financial management positively influences child welfare and development by providing necessary resources, structure, and sustainability within care institutions (Abdusshomad et al., 2020; Gundersen & Garasky, 2012; Serhiichuk et al., 2025; Rahman et al., 2021). However, this finding contradicts prior studies that reported negligible or adverse effects of financial management on child welfare and developmental outcomes (Rantanen et al., 2024).

Similarly, Staff training contributes to the emotional and social development of children by equipping caregivers with the necessary skills to handle trauma, communication, and child psychology (Bonnie, 1984; Flower et al., 2005; Lovato et al., 2024; Karsikas et al., 2024). Moreover, the provision of a balanced diet plays a vital role in children's physical growth and cognitive development, aligning with studies that highlight nutrition as a foundation for learning and health (Aboyo, 2024; Tandon et al., 2016; Hargreaves et al., 2022). Together, these factors form a holistic framework for enhancing child welfare. The results reinforce the need for integrated care systems where financial planning, professional development, and nutritional programs work synergistically to support vulnerable children, especially those in institutional or foster care environments.

Conclusions

This study investigated the impact of child welfare and development in child care homes across Kathmandu, Bhaktapur, Lalitpur, Nuwakot, and Dolakha districts of Nepal. Descriptive statistics were used to present basic respondent information, while inferential methods such as correlation matrix and regression analysis assessed the relationships and effects of various predictors on child welfare outcomes. The key predictors included financial management, staff training, and balanced diet and nutrition, as perceived by managers, administrators, founders, staff, children in care, child rights activists, government officials, and social workers. These factors were analyzed to determine their influence on child welfare and development.

Financial management ensures long-term resource allocation, strategic budget planning, and financial control. It promotes transparency, accountability, and effective solutions. Through continuous monitoring and risk identification, it improves quality and reduces financial vulnerabilities, supporting sustainable growth and responsible decision-making within an organization or institution.

Likewise, Training enhances staff motivation and daily performance, leading to improved care and supervision in child care homes. It strengthens skills, promotes quality service delivery, and supports child welfare and development by fostering a knowledgeable and dedicated workforce focused on children's needs. Similarly, A balanced diet and proper nutrition positively impact children's well-being in care by supporting growth, development, and activity levels. Adequate healthcare, hygiene, and diverse dietary options beyond daily meals help reduce illness. Additionally, children benefit from extra educational programs that extend beyond food and health, promoting holistic development and overall improved quality of life.

Child welfare and development is rooted in the effective application of child development principles, psychology, and welfare practices. It emphasizes safety, trust, and transparency, ensuring adherence to local laws and ethical standards. Compliance with international child protection laws and the proper implementation of these regulations in child care homes are essential. Adoption procedures must also follow legal frameworks, maintaining the best interests of the child. Upholding appropriate ethical guidelines is crucial in providing quality care, safeguarding children's rights, and promoting their holistic development within a safe and nurturing environment.

Finally, Financial management, staff training, and balanced diet and nutrition are interrelated components that collectively contribute to enhanced child welfare and development. Effective financial management enables proper allocation of resources for training and nutrition, ensuring quality care and services. Well-trained staff are better equipped to implement developmental and psychological principles, ensuring safety, trust, and ethical practices. Proper nutrition supports children's physical and cognitive growth, complementing educational and care efforts. Together, these factors create a nurturing environment that aligns with national and international child protection standards, fostering holistic development and a positive sense of well-being among children in care.

Despite its valuable insights, this study has several limitations. It was conducted solely in child care homes across selected districts of Nepal and was based on a relatively small sample size, which may limit the generalizability of the findings. Additionally, the study relied on cross-sectional data and focused on specific research variables, potentially overlooking other influential factors. To build upon this research, future studies could expand to different geographic regions and contexts to test and validate the existing assumptions.

Moreover, incorporating a larger sample size and including additional variables or predictors could enhance the depth of analysis. Future research may also benefit from qualitative approaches to better understand the real-world performance and perspectives of staff and faculty in child care settings.

Conflicts of Interest

There are no conflicts of interest associated with this study.

Data Availability Statement

Requests for data can be made to the corresponding author.

Informed Consent Statement

Ethical approval has been obtained from the Tribhuvan University, Central Department of Sociology, Lincoln University College, Malaysia. The authors have obtained and maintained written informed consent from all subjects involved in the study.

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Appendix A

Group: (A) General Information

Gender:	Male	Female		
Cate:	Kshetri	Brahaman	Magar	Tharu
	Magar	Newar	Mulman	Yadav
	Rai/Limbu	Gurung	Dashnami	Sherpa
	Others			
Religious:	Hindu	Buddhism	Islam	Kirat
	Christian	Prakriti	Bon	Jain
	Bahai	Sikh	Others	
Age:	Less 10 Year	10-15 Year	16-20 Year	21-25 Year
	26-30 Year	31-35 Year	36-40 Year	41 & above
Marital Status:	Married	Unmarried	Others	
Education:	Less SLC	SLC/SEE	+12/ PCL	Bachelor
	Masters	PhD		
Respondents Sectors	Manager/ Administrator/ Founder/ Staff	Children	Child right Association/ Activist/ Govt. official/	Social Worker
Experience of Respondents	Less than 5 Year	6-10 Year	11-15 Year	16-20 Year
	21 & above	Not involved in child care home		
Manager of Institution	Male	Female	Other	Not involved in CCM

Appendix: B

Group: (B) Likert Scale Questionnaires

SN	Items	SD	D	N	A	SA
A	Child Welfare and Development.	1	2	3	4	5
1	The orphanage effectively utilizes principles of child development, psychology, and welfare in its practices					
2	The child development practices at the orphanage prioritize safety, trustworthiness, and transparency.					
3	The orphanage adheres to local laws and ethical practices.					
4	The orphanage's legal and ethical practices are in compliance with international laws, provisions, and applications.					
5	The child protection laws and their implementation at the orphanage are considered appropriate.					
6	The adoption regulations and their applications at the orphanage are satisfactory.					
7	The orphanage follows appropriate ethical guidelines for the care and treatment of children.					
B	Financial Manage of the Children.	1	2	3	4	5
8	The orphanage's budget is adequately covered.					
9	The orphanage's fundraising efforts have been found to be satisfactory.					
10	The financial resources of the orphanage are adequate to long-term sustainability.					
11	Budgetary planning and control are crucial for ensuring financial stability and operational efficiency within an organization.					
12	The organization exhibits financial transparency and accountability.					
13	The orphanage effectively utilizes cost-effective solutions to meet the needs of children while maintaining quality.					
14	The orphanage is being assessed for its efficacy in identifying and reducing financial risks.					
C	Staff Training and Management:	1	2	3	4	5
15	The orphanage is providing sufficient training for staffs.					
16	The staff's motivation is sufficient for their daily work.					
17	The appropriateness of the quality of care provided in orphanages.					
18	The Fairness of recruitment practices for hiring employees.					
19	The staff training provided is sufficient for daily activities.					
20	The staff supervision is proper in the institution.					
21	The orphanage places a high priority on continuous professional development for the staff.					
D	Importance of balanced diet in health care and nutrition.	1	2	3	4	5
22	The orphanage prioritizes the physical health and well-being of the children they care for.					
23	The orphanage provides adequate access to healthcare, hygiene and preventive measures.					
24	Children's programs include dietary options outside of the daily meal schedule to promote nutritional diversity.					
25	A balanced diet is provided to children's growth, activity levels, and developmental stages.					
26	The orphanage regularly conducts children's health check-ups.					
27	The orphanage ensures the timely and effective treatment of sick children.					
28	The children are provided with an additional curriculum beyond food and health.					

Note: (1) SD = Strongly Disagree, (2) D = Disagree, (3) N = Neutral, (4) A = Agree, and (5) SA = Strongly Agree. Source: compiled by the authors.