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EDITORIAL

The Guidelines for the Alternative Care of Children celebrate their fifth birthday

This double edition is a brief progress report on the situation of children in need of alternative care or at risk so being, five years after the Guidelines' acceptance at the United Nations' General Assembly.

At five, one expects some autonomy, with customary newborn challenges such as teething behind, major developmental milestones accomplished with growing pains to come. Similarly the UNGA's approval of the Guidelines in late 2009 heralded in successes and defies for alternative care reform, some outlined here.

First "words"

Like childbirth, excitement and awareness raising activities surrounded the Guidelines' birth. In addition to the six official UN languages, there was a flurry of translations as well as child and professional/user-friendly versions.

Moreover as with the frustrations of a newborn, who cannot yet speak, understanding certain jargon in the Guidelines led to debates – especially precise meanings of terms such as residential care and institutions. Time was sometimes lost with a prescriptive and narrow approach contrary to the Guidelines emphasis on quality care. Terminology questions were to some extent addressed by the publication on the characteristics of formal care (see Monthly Review Nº 176 of October 2013).

First "steps"

Many countries took encouraging first steps to examine their systems in light of the new international standard concerning the necessity and suitability of alternative care. Recent initiatives include Liberia, which overhauled its system (see p. 3) and Mexico City, which enacted a new alternative care law in line with the Guidelines. Yet, others carried out significant research on themes of the Guidelines, such as poverty causing separation (see p. 10) and the use of guardians for children as

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victims of trafficking/unaccompanied children (see p. 9) without referring to the text at all. Whilst the research analysis and conclusions are helpful, arguably such evaluations would be strengthened by having an anchor point such as the Guidelines.

To stabilise such first steps, the *Moving Forward Handbook* was developed to provide policy and practical insight for implementation - available in eight languages, with more in the pipeline.

First “bumps” and “achievements”

As the Guidelines hit the ground, it met huge obstacles – regrettably, realities faced by millions in care – such as a lack of family based alternatives and over-reliance on institutional care. It is during these challenges that the Guidelines made some of its greatest achievements, showing its relevance and flexibility. Practical solutions for children with disabilities in institutions (see p. 12) and dealing with emergencies such as the Ebola epidemic (see p. 5) were enabled. Likewise, the Guidelines provided a solid framework for lobbying and protection of vulnerable groups such as migrant children (see p. 7).

First “check-up”

Like any child, routine visits to the paediatrician are in order to see that customary milestones are met. It was therefore helpful to see how various UN treaty bodies, such as the Committee on the Rights of the Child, and regional bodies, like the African Committee of Experts on the Rights and Welfare of the Child, examined State compliance with the Guidelines. Furthermore, a monitoring tracking tool (see p. 6) has been developed as an aid for countries. The question will then remain as to whether resources will be made available for the deficiencies identified.

We believe that prevention is the best cure. With this goal, ISS, with a wide group of partners, is planning a Human Rights Council side-event on “investing in children and their families to prevent unnecessary separation”. We look forward to working together, seeing the Guidelines’ fruitful impact in the coming years, with more children in family and community environments.

The ISS/IRC team
March 2015

ACTORS

- **Germany and Turkey:** These countries have updated the contact details of their Central Authorities.
- **Sweden:** This country has updated the contact details of its accredited adoption bodies.

Source: The Hague Conference on Private International Law,
http://www.hcch.net/index_en.php?act=conventions.publications&dtid=43&cid=69.

BRIEF NEWS

Panorama of the potential psychological challenges of adoption

Christine Poget (Ramseier), an adoptive mother and a prospective Psychologist, presents in this recent publication, based on the scientific literature of the last 15 years, an updated picture of the potential psychological challenges amongst adoptive parents, adopted children, adolescents and young adults, in the pre- and post-adoption stages. This work briefly describes the various theoretical models, their limitations, as well as the various psychological and psychotherapeutic forms of support: who are they applicable to, in what form and for how long?

Source: Ramseier-Poget (2015), *Accompagnements psychologiques et psychothérapeutiques des parents adoptifs et des enfants, adolescents/jeunes adultes adoptés dans le processus d'adoption*, FUAD: Thesis for the Bachelor in Psychology, <http://psychologiedeladoption.blogspot.ch/>.



Liberia: Guidelines and research on alternative care

This article provides a brief critical overview of the alternative care reform in Liberia, as outlined in the latest Better Care Network Newsletter, highlighting the improvements, as well as remaining challenges.

In response to the weaknesses in the alternative care system and in an effort to address irregular adoption activities leading to a suspension in adoptions in 2008, Liberia has courageously overhauled its alternative care system. Developments of regulations for the appropriate use and conditions of alternative care for children were launched by the Ministry of Health and Social Welfare in 2010. Likewise, the government established the Deinstitutionalization and Alternative Care Division of the Ministry of Health and Social Welfare (DSW). In 2013, the DSW called for the development of kinship care and supported independent living guidelines. The Guidelines explain that the development process started beginning of 2014 through field visits to various districts conducted by consultants of Maestral International LLC.

In 2014, Liberia adopted the *Guidelines for Kinship Care, Foster Care, and supported Independent Living in Liberia*. These Guidelines state that ‘their object is to provide harmonised national regulations for child welfare practitioners to improve the quality of family-based alternative care services. These Guidelines are completed by Reports, a Capacity Building Plan and a Roadmap for their Implementation’¹.

The Liberian Guidelines

The Liberian Guidelines are the result of collaboration between various government and civil society actors. The Guidelines target social welfare supervisors and social workers as well as policy makers. The Guidelines show how some families and children lack information, support

and care and help social workers and families to find the right alternative care solution.

The Guidelines state that:

- They can be used for **raising awareness** with those, who need to act to protect children and families;

- They identify **key actors**, who can play a role in protecting children, especially community members, Child Welfare Community and social welfare workers at district and county level;

- They propose some **key roles and responsibilities** for actors and can be used for providing training, capacity-building and ensuring coordination of alternative care;

- The Guidelines explain **kinship care, foster care and supported independent living**. Each section helps choose the most appropriate form of care, shows the roles and responsibilities of different

people, outlines how cases of care can be managed, shares information on the capacity needed to provide care, and gives examples.

The Roadmap for implementation process

The Roadmap for implementation outlines interventions for building a locally-appropriate alternative care system based on the Guidelines and Capacity Building Plan, under the supervision of the DSW. According to the Roadmap, the Children Without Alternative Care (CWAC) Advisory Committee should, in particular, define and prioritise implementation strategies, finalise tools, develop advocacy messaging, identify national budget and donor resources and develop activity plans. The question remains as to who will

Liberia has a population of 4'128'572 with 47% of the population below the age of 15 and 19% below the age of five. In 2013, there were 83 residential care facilities in Liberia with a total of 3'357 children. 27% of households are providing informal foster or kinship care. The proportion of informal care arrangements is much larger (33%) in urban areas compared to 24% in rural areas. No formal foster care placements or supported independent living has been recorded to date. It is important to note that, in 2014, 94% of children between two and 14 years have experienced physical and psychological abuse, more than one in five children aged five to 14 years are involved in child labour, children in detention staying in the adult prison, almost half of all women aged 20-24 were married while they were still girls and 3'376'608 children are living/working on the street. Officially, almost 10'000 households are headed by children. With the epidemic of Ebola, the situation has worsened: UNICEF estimates that approximately 2,000 children in Liberia have lost one or both caregivers to the epidemic (see below).



be monitoring the implementation of the Roadmap.

Remaining challenges

Whilst the Guidelines, in principle, conform to the Guidelines for the Alternative Care of Children, nothing is specified regarding siblings and legal guardians. Likewise, provisions regarding the possible return of the child to his family could be more developed. In addition, as the Guidelines should be implemented through the social welfare workforce, the latter must be equipped. Save the Children, with the Ministry of Health and Social Welfare hired, trained and placed 14 social welfare assistants in 12 districts. It is essential to invest in the professional development of civil servants and other Government's partners – ideally with a resource commitment for effective implementation and monitoring of the Guidelines and Roadmap.

Promising practices and figures

The Guidelines give examples of promising practices in Liberia and other countries. For example, in Liberia, the Shiata Woman of Faith Project, supported by the Inter-Religious Council

of Liberia and UNICEF, provides community mentors to teenage mothers to allow them to go to school and establish a home for their children. The mentors, older women from the community, care for the children during the day.

It is also important to note that the document *Parents make the difference*² aims to promote the wellbeing of young children aged three to seven through reducing harsh punishment, improving parenting practices and improving child development.

It is relevant to mention that, according to UNICEF's latest figures³, the number of operational community-based Child Welfare Committees trained and supported to safeguard children increased from 140 in 2012 to 474 in 2013. In 2013, 58 out of 83 institutions submitted applications to the Accreditation Board, which accredited 20, closed six (five are to be closed) and put 27 on probation. Reunification efforts resulted in the number of children residing in institutions decreasing by 7% in 2013 compared to 2012. Some 250 children were reunified, placed in kinship or alternative care in 2013.

The ISS/IRC welcomes these guidelines and regulations, which offer very concrete solutions to improve alternative care. Liberia has now a comprehensive and harmonised normative framework, even if the necessary human and financial resources remain a challenge.

References:

¹ Better Care Network: *Guidelines for Kinship Care, Foster Care, and Supported Independent Living in Liberia; Children Without Appropriate Care Desk Review Summary Report: Liberia; Capacity Building plan to Implement the Guidelines for Kinship Care, Foster Care and Supported Independent Living in Liberia; Department of Social Welfare Capacity Building Plan to Implement The Guidelines for Children Without Appropriate Care Rapid Context Assessment; Final Report Roadmap for the Implementation of the Guidelines on Kinship care, Foster care and Supported Independent Living in Liberia*; available at: <http://www.bettercarenetwork.org/BCN/results.asp?keywords=liberia>.

² International Rescue Committee, *Parents make the difference: Findings from a randomized impact evaluation of a parents program in rural Liberia*, November 2014, http://www.rescue.org/sites/default/files/resource-file/ParentsMakeDifference_report_FINAL_18Nov14.pdf.

³ UNICEF Liberia, *Annual Report 2013*: http://www.unicef.org/about/annualreport/files/Liberia_COAR_2013.pdf.



Ebola, alternative care and adoption

In the face of the Ebola emergency, the situation of children affected by the outbreak, in particular those orphaned or at risk of being separated from their families, had to be addressed by all actors acting in the emergency. The present article intends to reflect the efforts undertaken in this context and their compliance with international principles and standards.

UNICEF recently stated that 16,600 children have been registered as having lost one or both parents or their primary caregiver to Ebola in Guinea, Liberia and Sierra Leone, but that less than three per cent of them had had to be placed outside their family or community¹. The fact that such a high percentage of children have been able to remain in their environment of origin is a positive data, which reflects the region's efforts to implement the Guidelines for the Alternative Care of Children in such situations of emergency.

Current situation

According to the World Health Organisation, 'people aged 15 to 44 are approximately three times more likely to be affected'², which is precisely the generation of parents, thus having an impact on the number of children, who may be orphaned by one or both parents. In such a situation, the Guidelines call for the development, as necessary, of a series of measures and responses for the alternative care of these children (see attached box). But, how have these Guidelines been implemented?

Alternative care

UNICEF has played an important role in ensuring that the rights of children affected by Ebola, in particular those orphaned, are respected. Indeed, 'UNICEF has been helping identify children without parents or caregivers and providing immediate care and protection, either through extended family members, community members or foster families' and '[c]hildren and the families looking after them are given cash and material assistance, help in accessing school, and counseling to

support their emotional and psychological well-being. Following up children who are in new families is an important focus, as the children may be emotionally vulnerable as they grieve the loss of loved ones'³. A number of other organisations are also calling for such efforts, such as Save the Children⁴, and the governments are also trying to effectively address the situation of children at risk of being orphaned and placed in alternative care. For example, the government of Liberia issued a draft document, which outlines the protocol and guidelines for responding to children's care issues in the context of Ebola, specifically for the Interim Care Centers for children who have come into contact with Ebola. Interestingly, and encouragingly, it is based on the country's wider and legal framework relating to kinship care, foster care and independent living⁵.

Adoption

As for adoption, in particular intercountry adoption, it has received relatively little attention in the context of the Ebola outbreak in Western Africa, in comparison to other recent emergencies in the world (the 2004 Tsunami, the 2010 earthquake in Haiti...). This has indeed also been a positive outcome, given that international principles,

standards and recommendations call for caution when undertaking adoptions in the context of an emergency. Indeed, following the earthquake in Haiti, the Hague Conference on Private International Law stated that 'efforts to reunite a displaced child with his or her parents or family members must take priority. Premature and unregulated attempts to organise the adoption of such a child abroad should be avoided'⁶. This

In such circumstances, the State (...), the international community and all local, national, foreign and international agencies providing or intending to provide child-focused services should pay special attention: (...) (b) To develop (...) temporary and long-term family-based care; (c) To use residential care only as a temporary measure until family-based care can be developed; (d) To prohibit the establishment of new residential facilities structured to provide simultaneous care to large groups of children on a permanent or long-term basis; (e) To prevent the cross-border displacement of children (...); (f) To make cooperation with family tracing and reintegration efforts mandatory.

Guidelines for the Alternative Care of Children, para. 154.



position is shared by other organisations and bodies, in particular UNICEF, the UN High Commissioner for Refugees, the Committee on the Rights of the Child, the International Committee of the Red Cross and ISS⁷. Indeed, the principle of subsidiarity should be fully implemented for those children, who are truly orphans of the emergency or are at risk of family separation, i.e. as provided for in the Guidelines for the Alternative Care of Children, efforts should

be drawn towards preventing the child's separation from his family, the provision of alternative care should be aimed at family reintegration, and when this has not been possible, domestic adoption should be given priority over intercountry adoption, and decided after a reasonable period of time dedicated to tracing potential family members, who could care for the child.

Thus, the Ebola outbreak in Western Africa has seen the sensible implementation of those principles and standards enshrined in the UNCRC, the Guidelines for the Alternative Care of Children and other relevant child rights instruments. Indeed, UNICEF and other organisations in the region have promoted and acted in order to ensure that those children affected by Ebola, in particular those who have become orphans, benefitted from family tracing and were appropriately cared for by their families or communities.

References:

¹ UNICEF, 'More than 16,000 children lost parents or caregivers to Ebola - many are taken in by the communities: UNICEF', 6 February 2015, http://www.unicef.org/media/media_79742.html.

² WHO, Ebola Situation Report – 4 February 2015, <http://apps.who.int/ebola/en/ebola-situation-report/situation-reports/ebola-situation-report-4-february-2015>.

³ UNICEF, see fn. 1.

⁴ Save the Children, Ebola response in West Africa, http://www.savethechildren.org/site/c.8rKLIXMGIpl4E/b.9208421/k.244F/Ebola_Response_in_West_Africa.htm.

⁵ Better Care Network, Provision of Alternative Care to Children Affected and Infected with Ebola in Liberia (DRAFT), 28 September 2014, <http://bettercarenetwork.org/BCN/details.asp?id=32576&themeID=1005&topicID=1033>.

⁶ The Hague Conference on Private International Law, Information Note: Haiti earthquake and intercountry adoption of children, 2010, http://www.hcch.net/upload/haiti_infonote_e.pdf.

⁷ UNICEF, Intercountry adoption, 31 July 2014, http://www.unicef.org/media/media_41918.html.

Tracking Progress Initiative – Monitoring the Guidelines' implementation

Florence Martin, Director Better Care Network and co-lead of the Tracking Progress initiative provides this brief overview of the project and potential implications for users of the tool.

In 2013, a group of international NGOs and UN agencies discussed how to further support national actors to track how they are doing on the implementation of the Guidelines. These agencies recognised that effective monitoring of the use of the Guidelines will allow for the identification of both progress and gaps in policy and practice. This, in turn, can inform improvements in services and support evidence-based advocacy and strategic planning. Promising practices identified in monitoring can then be shared for replication and to be contextualised with others. In these

ways, systematic monitoring will help to ensure full implementation of the Guidelines, improving the quality of care for children, and above all, creating positive change for children and their families. The *Tracking Progress* initiative was born!

Development of the Monitoring Tracking Tool

This inter-agency initiative, supported by the [Oak Foundation](#), is co-facilitated by the [Better Care Network](#) and [Save the Children](#) and a Steering Group that also include [Family for Every Child](#), [Hope and Homes for Children](#), [ISS](#), [RELAF](#),



[SOS Children's Villages International](#), [UNICEF](#) and a member of the [Committee on the Rights of the Child](#). The Centre for Excellence for Looked after Children in Scotland ([CELCIS](#)) was commissioned to support the development of the tool. To ensure the tool addresses the need of a range of actors working on care reforms at national, regional and global levels, a broad e-consultation was held involving more than 160 individuals from all regions, including representatives of governments, NGOs, treaty bodies and UN agencies, among others. Using this feedback and the input from the Steering Group, a draft was developed, which has been revised and refined through field tests in three countries: Rwanda, Romania and Paraguay. The tool is currently going through a final set of revisions to ensure the feedback from the actors on the ground, who are leading and supporting the reform process shapes the final draft. The tool is expected to be finalised by June 2015.

Brief description of the Monitoring Tracking Tool

The *Tracking Progress Tool* will be an interactive, strengths-based diagnostic and learning tool to help governments and NGOs determine the

In 2009, the UN General Assembly welcomed the Guidelines for the Alternative Care of Children ([A/RES/64/142](#)) to guide the progressive implementation of the Convention on the Rights of the Child for children at risk of being separated from their family or without family care. The Guidelines provide guidance and policy orientations to ensure that children do not find themselves separated from their family unnecessarily and, when separated, appropriate individualised high-quality alternative care is provided. The Guidelines have been promoted through a variety of approaches including training, country assessments and the development of resources led by agencies at national and international level. Across all regions, countries have used these Guidelines to inform their care reform process.

extent to which a state or region has effectively implemented the Guidelines, and the priorities for change still ahead. A web-based version of the tool will be available so that teams can work on completing it over a period of time, saving the data as they go along. Recognising that the Internet is still limited in many areas, a paper version of the tool will also be available, which can later be used to enter the data into the web-

version. It is envisaged that it will take a multi-agency team of people to identify the data and sources of evidence to answer the questions in 'Tracking Progress' in order to develop as accurate and complete a picture as possible of the alternative care system in their country. As the principal duty-bearers with regard to children's rights and the monitoring of alternative care resources, government officials should be part of any Tracking Progress team, though it is likely that a team

will draw on resources and expertise from across sectors. The report produced from this process will also assist national actors in providing comprehensive information when their country report under the treaty body mechanisms, including the Committee on the Rights of the Child.

Reference:

For further information, please contact: Florence Martin, Florence.martin@bettercarenetwork.org or Georgina Hewes, g.hewes@savethechildren.org.uk.

INTERDISCIPLINARY RESOURCES

RELAF's new handbook on the human rights of child and adolescent migrants

In the context of a renewed focus on the situation of migrant children in the Americas, RELAF published a handbook on their human rights, aimed at training activities as well as at the reform of public policies in this respect and across the region.

In March 2014, the United Nations High Commissioner for Refugees (UNHCR) released a report on the situation of unaccompanied children leaving Central America and Mexico

titled *Children on the Run*¹. More controversially, President Obama called upon Congress to approve emergency funding in order to respond to the number of unaccompanied children, who



were crossing the U.S.-Mexico border, at an alarming rate². This caused renewed debates on the protection of these children and resulted in reflection on the reported increase of migrant children across this region and its causes, in particular violence. In this context, the Red Latinoamericana de Acogimiento Familiar (RELAF), in partnership with UNICEF's Regional Office and Save the Children, carried out an assessment of the response offered by child protection systems in some of the countries at stake to those children, who are reintegrated into their communities in the following four countries: Mexico, El Salvador, Guatemala and Honduras.

Key aspects of the handbook

They undertook fieldwork, including interviews with governmental authorities, NGOs, families, children and adolescents. They also published the handbook titled *Manual sobre estándares internacionales de derechos humanos aplicables a los niños, niñas y adolescentes migrantes*³, aimed at training activities for technical operators and professionals responsible for the protection of the rights of migrant children, as well as at the transformation and reform of comprehensive public policies in all countries concerned. RELAF's handbook initially focuses on the international legal framework that is applicable to migrant children and adolescents, on its key principles – no detention, determination of the best interests, child protection, right to family life – and on the obstacles to its implementation. The institutional

This handbook provides a renewed focus on the legal framework, the principles and standards, which should guide the protection of child and adolescent migrants in their countries of origin, in transit countries and in receiving countries. Furthermore, the assessment undertaken by RELAF of the reality in the above-mentioned countries – expected to be published in 2015 – should provide the context, in which to promote and develop such policies and services to ensure adequate protection and care during their reintegration, albeit this only being one aspect of the situation. The ISS/IRC welcomes this handbook on the human rights of migrant children and adolescents and reiterates its support to RELAF's work in reflecting the situation in theory but also in reality.

References:

¹ UNHCR, *Children on the run – Unaccompanied children leaving Central America and Mexico and the need for international protection*, 2014, <http://www.unhcr.org/53206a3d9.html>.

² See, for example: 'New U.S. Effort to Aid Unaccompanied Child Migrants', *The New York Times*, 2 June 2014, <http://www.nytimes.com/2014/06/03/us/politics/new-us-effort-to-aid-unaccompanied-child-migrants.html>; 'How to Stop the Surge of Migrant Children', *The New York Times*, 8 July 2014, <http://www.nytimes.com/roomfordebate/2014/07/08/how-to-stop-the-surge-of-migrant-children>.

³ RELAF, *Manual sobre estándares internacionales de derechos humanos aplicables a los niños, niñas y adolescentes migrantes*, 2014, <http://www.relaf.org/materiales/ManualMigrantes.pdf>.

structure of authorities and other bodies in charge of the protection of migrant children and adolescents is also being outlined, in order to provide a clearer understanding of responsibilities and duties in this particular context.

Alternative care

Given that migrant children and adolescents, in particular those who are unaccompanied and separated, will require alternative care, the handbook also reminds readers of the main principles and standards, which are relevant in their situation. Unaccompanied and separated children and adolescents are indeed children without parental care, at risk of so being, and who require protection and care. Thus, the Guidelines for the Alternative Care of Children are fully applicable, including the principle of 'necessity' and 'suitability', as the pillars of all decision-making in this regard. In addition, Chapter VIII of the Guidelines is particularly relevant, given that it provides guidelines as to the protection and care of children outside their country of habitual residence and in situations of emergency – which are often those situations affecting unaccompanied and migrant children. In this framework, RELAF's handbook provides an overview of the potential implementation of the Guidelines in the context of migration of children and adolescents, focusing on the general principles and the standards for care in family-based settings, in foster care and in residential care.



Guardianship for children victims of trafficking, as children deprived of parental care

In 2014, the European Union Agency for Fundamental Rights and the European Commission published a handbook to strengthen guardianship systems to cater for the specific needs of child victims of trafficking.

The *EU Strategy towards the Eradication of Trafficking in Human Beings 2012-2016* recognises the importance of comprehensive child-sensitive protection systems. Effective guardianship systems are key to preventing abuse, neglect and exploitation. Yet, the roles, qualifications and competences of guardians vary from one Member State to another. This handbook is designed to help standardise guardianship practices¹.

Overall role of the guardian

National terms vary and the terms ‘guardians’, ‘representatives’ and ‘legal representatives’ are used. In this handbook, the guardian is considered to be an independent person, who safeguards the child’s best interests and general well-being, and, to this effect, complements the limited legal capacity of the child, when necessary, in the same way that parents do. Guardianship is an essential component of child protection systems, being the person with the most comprehensive view of the child’s situation and individual needs. This handbook provides guidance on how to establish and run national guardianship systems and lists a guardian’s main tasks. It focuses on the issue of guardianship as a key safeguard for children’s rights when their parents are not able or willing to exercise parental rights and duties, as with child victims of trafficking. It does not cover the particular aspects of all guardianship situations, such as for example the case of children whose parents are imprisoned.

Fundamental principles of guardianship systems

The following six principles apply to all types of guardianship arrangements: non-discrimination, independence and impartiality, quality, accountability, sustainability and child participation. Certain basic requirements must be

laid down in the legal system, such as, among others, appointment procedures, duties and professional requirements. To function effectively, the guardianship system should be an integral part of the national child protection system, and must operate within child protection legislation and procedures. To ensure that each child has a qualified and skilled guardian, guardians should be employed as such. A guardianship system must not rely on volunteer services. Guardians must have professional qualifications, references, and criminal records checked. Relatives can be appointed as guardians, under a guardianship authority. The handbook also describes the system that should be in place to manage and administer guardians, including information for children, training, support and child participation. The handbook also contains guidance on the procedure for appointing a guardian for individual children. In addition, it addresses the duration of guardianship and what support should be provided when children reach 18 years of age.

Tasks of the guardian

The majority of EU Member States do not precisely define a guardian’s tasks in their legislation. The guardian’s rights and duties should be defined in domestic legal or policy documents. The core tasks are the following: safeguard the child’s best interests, promote the child’s safety and well-being, facilitate the child’s participation, act as a link between the child and others, assist in identifying a durable solution in the child’s best interests, exercise legal representation, support the child in legal procedures and ensure access to legal assistance and counselling.



The SSI/CIR strongly recommends the reading of this handbook, whose aim is to support public officials in EU Member States. Child trafficking is a very serious matter, and each time a decision is taken affecting the child, the guardian's role is to promote the option which is in the best interests of the child. Therefore, it is important to keep in mind that a relationship of trust between the child and the guardian is essential, and that guardians must receive support as well as supervision.

It is also important to keep in mind that the Guidelines for the Alternative Care of Children foresee that a victim of child trafficking, as an unaccompanied child (para. 145), should not be without the support and protection of a legal guardian or other recognised responsible adult or competent public body at any time.

Reference:

¹ European Union Agency for Fundamental Rights, *Guardianship for children deprived of parental care. A handbook to reinforce guardianship systems to cater for the specific needs of child victims of trafficking*, 2014, http://fra.europa.eu/sites/default/files/fra-2014-guardianship-children_en_0.pdf.

Poor families: Supporting the relationship during separation

In October 2013, the Combat Poverty, Insecurity and Social Exclusion Service of the Wallonia-Brussels Federation issued a report to ensure that maintaining the bond between parents and children placed in institutions or in foster care was the central objective of the legislation in force.

It has been established that there is a statistically significant link between children being placed in foster care or institutional care and the economic situation of the family. In this report, economic precariousness is understood, in accordance with the UN's definition, as the absence of one or more elements of security – in particular, employment that would enable families to assume their professional, family and social obligations. It also jeopardises the access to some services. Removing a child from his family environment leads to issues of maintaining the bond between parents and children, which is an essential element of the fundamental right to privacy. This report is not a research report, but a report on meetings held between people, who have experienced this problem¹, *i.e.* families, associations and professionals, in order to identify some interesting and practical suggestions.

Insufficient investment in the relationship prior to, during and after placement

The report highlights the lack of assistance provided to families living in situations of vulnerability beforehand, for example the lack of fora where parents could share their concerns or difficulties in obtaining housing assistance, which often results in children being placed in

care rather than assistance being offered to the family in finding a home.

During the placement, maintaining the bond is often criticised by some reluctant professionals, but the reasons given usually concern the precarious situation of the family, rather than the family itself. For example, a mother living in a house without heating or a father being evicted from his home.

After the placement, at the time of the child's reintegration, the professionals emphasise the difficulties caused by the distance that has been created between the family and the children, due in particular to a lack of efforts to maintain the bond during the placement.

The report concludes that there is no assessment of practices related to the preservation of relationship during the placement period. It is mentioned several times that visits should be the last resort to maintain the bond. In fact, priority should be for the children to be returned to the family for weekend stays, day stays or during the holidays. The report explains that, as the child grows up, the opportunities for meetings with their family increase.

The discussions have focused on the fact that it is necessary to be very careful in assessing the



quality of the bond, in order to avoid hasty conclusions. This assessment must allow families to be able to freely express themselves. However, families are often reluctant to seek help for fear that the information will be used against them. When assessing the family relationship during visits, social workers mentioned that they often feel uncomfortable and that parents do not know how to behave. Some professionals also find home visits intrusive. Assessments undertaken by third parties appear to have several advantages, including the ability to make the time to conduct the visits. Families also insist that the assessment of the bond must be based on the actual relationship and not on the persons involved.

Practices and conditions for maintaining the bond

The report highlights the diversity of practices, which are very different from one district to another, from one institution to another and from one actor to another. The participants all wish for the freedom to put forward individual initiatives and for further guidance 'from higher up'. It is indeed not correct for an institution to put limits on the frequency of visits that are most often described as difficult and inadequate. Regarding the conditions for maintaining the bond, three considerations are essential: consideration for the family, transparency in relationships and human and material resources.

Some ideas

It is unfortunate that the report is not based on the Guidelines for the Alternative Care of Children, as an international framework for their thoughts and prospective work. ISS would like to remind the Service that, in accordance with para. 15 of the Guidelines, '[f]inancial and material poverty (...) should never be the only justification for the removal of a child from parental care (...) but should be seen as a signal for the need to provide appropriate support to the family'.

Nevertheless, this report offers several views on the issue of maintaining the bond between children and their families when they have been separated for reasons related to the family's considerable precariousness. The report's conclusion suggests draft proposals on housing, family allowances, unemployment benefits and the training of professionals. Indeed, the latter recognise that they are not sufficiently trained to meet families in a precarious situation and to understand them (see paras. 49-52 of the Guidelines). They emphasise that the importance of maintaining the bond is not a priority during training and it is therefore essential to train professionals for this purpose and to put in place concrete measures for maintaining the family relationship².

References:

¹ Combat Poverty, Insecurity and Social Exclusion Service of the Wallonia-Brussels Federation, *Familles pauvres, soutenir le lien dans la séparation*, October 2013; available at: <http://www.luttepauvrete.be>. This report is based on the exchanges in three groups; the number of participants was limited to 30.

² Excellent examples of measures taken to prevent separation between children and parents and to maintain the bond when separation is not avoidable are provided in the *Moving Forward* handbook; see <http://www.alternativecareguidelines.org>.



An ISS project for children with disabilities in institutions

The ISS has decided to take action for children with disabilities and without parental care by launching the project A better future is possible, in order to encourage countries to implement the Guidelines for this population of children, who are particularly vulnerable.

Children with disabilities are often the last ones to benefit from family-type alternative care measures. To further and promote the right of children with disabilities living in institutions to grow up in a family environment is precisely the main objective of ISS's project *A better future is possible*. This project, currently implemented in four countries: Burkina Faso, Vietnam, Mexico (in the state of Nuevo León) and Mauritius, has been designed to support professionals at various levels, in their efforts to improve the lives and the future of children with disabilities, who are deprived of, or separated from, their families.

Involving all the professionals in contact with the children

In cooperation with the child protection authorities, a national partner and a team of domestic trainers, the ISS offers, in each partner country, a two-level approach: a process of support to the staff in institutions and technical assistance to the authorities, in order to encourage them to develop family-type alternative care measures.

Various issues are addressed with the multidisciplinary teams in children's homes, such as: the daily care of the child with disabilities (paras. 103, 115 and, in particular, 117 of the Guidelines), recommendations for personalised care and care in small groups (para. 23), the systematic and periodic assessment of the specific needs of each child, in order to determine an adapted life plan (paras. 57 to 68), but also the child's preparation for his life plan (para. 68).

With the competent authorities, ISS's work consists in providing expertise in accordance with

the requests of the governments and those needs that have been identified. Above all, it consists in promoting family reintegration, when it is in the child's best interests, with mechanisms of support for the families (paras. 3, 34.b, 49-52) and the setting-up of specialised foster care programmes (paras. 118-122). ISS may also provide technical assistance on adoption issues, through the promotion of domestic adoption and assistance with the establishment of a specialised adoption programme for adoptable children with disabilities.

Every child has the right to live in a family environment

The U.N. Committee on the Rights of the Child has repeatedly expressed its concern at the systematic resort to institutional care for children with disabilities, highlighting the fact that this population is at particular risk of all forms of abuse. Furthermore, the Convention on the Rights of the Child (Preamble, arts. 20 and 21) and the Convention on the Rights of Persons with Disabilities (Preamble, art. 23) fully recognise the right of every child to grow up in a family environment. The UN Guidelines promote the creation of mechanisms to prevent children with disabilities or other special needs from being placed unnecessarily in institutions (para. 34). In addition, they give 'priority to family- and community-based solutions' for children without parental care (para. 53).

Tools for professionals and children

All the recommendations suggested by ISS have been incorporated into a practical handbook for professionals, which will soon be available, and which will be the subject of a forthcoming communication. In addition to this practical handbook, ISS has also developed, in the framework of this project, a lifebook for children (para. 100) – called *My story* – which belongs to the child and in which he may write, draw, tell his story with the help of his

carers, in order to keep a record and memories of his stay in the institution. Even though this specific tool has been designed and imagined for children with disabilities, it is aimed at any child placed in a children's home.

Initial assessments and adjustments

The experience gained throughout the implementation of the project shows how important it is for the request for collaboration to come directly from the countries' child protection authorities. In addition, in order to ensure the project's sustainability, it seems essential to



involve the governments from the beginning of the process and to assess, together, the needs, and to invite them to participate actively in the implementation of the project. The aim is for the authorities to take ownership of the project and to incorporate the suggested recommendations into their national plan of action. Furthermore, the partnership with a local partner (civil society or authorities) appears fundamental to adapt the project to the needs and reality of the countries at stake. Amendments to its operational mechanism have been progressively incorporated thanks to conversations held with the various actors met. Thus, in each of the partner countries,

the setting-up of a multidisciplinary core team of trainers, in charge of disseminating the trainings and the tools in the institutions, has allowed ISS to improve the impact of the trainings and their follow-up. The provision of support to this core team of trainers over two years allows for the strengthening of expertise in this field at national level. In the end, ISS wishes to be a simple bridge to support countries in their efforts to apply the UN Guidelines and to offer an opportunity to children with disabilities to live in an environment, which enables their full development.

This programme, which is currently being implemented thanks to the support of foundations, individual donors and Central Authorities (from partner countries and France), should soon be expanded in three regions worldwide: Western Africa, Latin America as well as in Eastern Europe. As from now, we call upon those countries interested in this process, as well as upon technical and financial partners interested in supporting us, to contact the ISS for further information.

Reference:

For further information on ISS's project, see: <http://www.iss-ssi.org/index.php/en/what-we-do-en/cwd-en>.

FORTHCOMING CONFERENCES AND TRAININGS

- **France:** **a)** *L'adoption internationale aujourd'hui: quels parents pour quels enfants?* [Intercountry adoption nowadays: Which parents for which children?], COPES, Paris, 11 May 2015 (7 days); **b)** *Accompagnement des familles en grande difficulté – L'accompagnement constitue-t-il un soin?* [Support to families in considerable difficulty – Is support a form of care?], COPES, Paris, 28 May 2015 (4 days); **c)** *L'agrément en vue d'adoption - Aspects psychologiques de l'accompagnement et de l'évaluation en vue d'appariement* [Suitability for adoption: Psychological aspects of the support and assessment with a view to matching], COPES, Paris, 8 June 2015 (5 days); **d)** *Les enfants à besoins spécifiques: quelles questions pour les professionnels et les candidats?* [Children with special needs: What are the issues for the professionals and the prospective adopters?], COPES, Paris, 11-12 June 2015 (2 days). For further information, see: <http://www.copes.fr/Annexes/Formations>.
- **Switzerland:** *Children at the Heart of Human Rights*, Summer Course of the University of Geneva, 16 June - 4 July 2015. For further information, see: <http://www.genevasummerschools.ch/courses-2014/children-at-the-heart-of-human-rights>.
- **United Kingdom:** **a)** *Contact after adoption: Benefits, challenges and outcomes*, BAAF, Leeds, 15 May 2015; **b)** *Special guardianship orders*, BAAF, London, 18 May 2015; **c)** *Considering adopting a disabled child*, BAAF, Leeds, 5 June 2015. For further information, see: <http://www.baaf.org.uk/training/events?page=3>.

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