# BRIEF ON ALTERNATIVE CARE ARRANGEMENTS FOR UNACCOMPANIED AND SEPARATED CHILDREN IN HUMANITARIAN CONTEXTS IN UGANDA – CHALLENGES AND OPPORTUNITIES

#### **BACKGROUND**

Uganda is currently hosting over 1.15 million refugees¹ from South Sudan, the Democratic Republic of Congo (DRC) and Burundi who are seeking refuge to escape armed conflicts and violence that erupted in their countries of origin. 60% of all refugees hosted in Uganda are children². A persistent characteristic of this crisis has been the significant number of unaccompanied and separated children (UASC) arriving in the country. Children caught up in the crisis are at great risk of abuse, neglect, violence, or exploitation in refugee settings. Some have witnessed violent acts or have been separated from their parents and families during flight. There are currently 47,796³ UASC in Uganda. These children are faced with limited access to safe shelters, services and support, facing significant risks and with uncertain futures.

Children and UASC are extremely vulnerable and at risk of further violence, especially young girls as a result of separation from their parents and families because of population displacement. Separated from those closest to them, these children have lost the care and protection of their families just when they most need them. Concerns for UASC include violence (including sexual and gender-based violence), neglect, survival sex and teenage pregnancy for girls, early marriage, HIV/AIDS, psychosocial distress and other mental health concerns, involvement in child labour for survival and recruitment from armed groups in home countries amongst other concerns. Many adolescent UASC may assume adult responsibilities, such as protecting and caring for younger siblings, which compromises their attainment of their own development goals and can again increase vulnerabilities.

While all children are entitled to emergency care and provision for their basic subsistence; assistance for separated children must adequately meet their basic needs at a standard comparable to the surrounding community and should be provided in a way that preserves family unity, keeps children with their relatives or other caregivers and does not lead to further separation. In emergencies, interim care must be provided for children separated from their families until they are reunited, placed with foster parents or other long-term arrangements for care are made. This may include fostering, other forms of community-based care, or institutional care as a last resort. In all these options, Child Protection must be the over-riding factor to be considered since all children need security and physical and emotional care in a setting that encourages their general development. Where possible, this care should be provided in families within the child's own community, with close monitoring. The above provisions are clearly outlined in the UN Guidelines for Alternative Care, the intent of which is to enhance the 'implementation on the Rights of the Child and of relevant provisions of the international instruments regarding the protection and well-being of children deprived of parental care or who are at risk of being so'<sup>4</sup>.

The care status for unaccompanied and separated children is usually assessed early on, during identification and registration. This ensures that the child's immediate living situation is adequate. In the best case, alternative care is only required as an interim measure whilst family tracing is carried out and until the time when children can be reunited with their family members. In Uganda, most unaccompanied children are placed in foster care arrangements until they can be reunified with family.

The views of girls and boys in need of alternative care is considered in identifying care arrangements that are in their best interests in Uganda. Residential or institutional care is seen as the last resort and on a short-term basis (up to a maximum of 12 weeks), and only considered when family-based care arrangements are not possible or not in the best interests of the child. Organisations and authorities make every effort to prevent the separation of children

<sup>&</sup>lt;sup>1</sup> UNHCR, 2018. Uganda Refugee Response – Monthly Snapshot, June 2018.

<sup>&</sup>lt;sup>2</sup> UNHCR, 2018. Uganda Refugee Response – Monthly Snapshot, June 2018

<sup>&</sup>lt;sup>3</sup> UNHCR Uganda Factsheet Child Protection, September 2018.

UN Guidelines for Alternative Care, Resolution 64/142, 2010

from their parents, as is provided for in the UN Guidelines and Uganda's Alternative Care Framework. However, where children cannot be placed in their families, the Office of the Prime Minister's Refugee Department and other Child Protection actors in Uganda recognise that it is best to encourage alternative care which builds on existing community care systems and is in the best interest of the child. Efforts are also made to keep sibling groups together to avoid further stress due to separation.

NGOs play a key role in the implementation of care, tracing, and family reunification programming for separated children in Uganda. Through adequate case management, close cooperation between the actors involved and regular monitoring through the mechanisms which are in place, children can be referred and gain access to necessary activities or services such as psychosocial support. Foster parents and receiving communities also receive support through regular monitoring visits to follow up from child protection staff and case workers. It is important to remember that child protection must be at the core of all arrangements. All children need security and physical and emotional care in a setting that encourages their general development<sup>5</sup>.

#### **UNACCOMPANIED CHILDREN:**

Those separated from both parents and other relatives are not being cared for by an adult who, by law or custom, is responsible for doing so.

#### **SEPARATED CHILDREN:**

Those separated from both parents, or from their previous legal or customary primary caregiver, but not necessarily from other relatives. These may, therefore, include children accompanied by other adult family members.

The range and complexity of situations in which children become separated from their families, and the diverse needs of the children themselves, means that no single organisation can hope to solve the problem alone. Complementary skills and mandates must cooperate with each other to ensure a concerted approach to respond to the issue.

# VARIATIONS OF ALTERNATIVE CARE AVAILABLE FOR UNACCOMPANIED AND/OR SEPARATED CHILDREN IN UGANDA

## **Foster Care:**

Fostering refers to situations where children are cared for in a household outside their family, over short-medium-and/or long-term arrangements depending on the circumstances and best interest of the child. Fostering is usually understood to be a temporary arrangement and in most cases, the birth parents retain their parental rights and responsibilities. Fostering should follow national legislation and policies. Fostering (or adoption) of refugee children by families of host communities should be discouraged. If done (under exceptional circumstances), it should seek to involve local authorities<sup>6</sup>.

### **Supervised Group Living/Care:**

Children are placed in a small group home that is run like a family home, whereby groups of six to eight children or young people are cared for by consistent caregivers within the children's community. In some cases, adolescents may prefer small group care to family-based care as it provides more independence, however very young children should be prioritized for family-based care<sup>7</sup>.

## **Kinship Care:**

Family-based care within the child's extended family or with close friends of the family known to the child. This is the type of alternative care commonly used for separated children<sup>8</sup>.

#### **Supervised Independent Living:**

Where an adolescent child or group of adolescent children, live independently. These arrangements must be monitored and the role of the community is crucial in supporting these children<sup>9</sup>.

#### **Residential Care:**

Care provided in a non-family group setting, e.g., an orphanage or boarding school<sup>10</sup>.

<sup>&</sup>lt;sup>5</sup> IA Guiding Principles for UASCs

<sup>&</sup>lt;sup>6</sup> UNHCR Brief, Alternative Care

<sup>&</sup>lt;sup>7</sup> UNHCR Brief, Alternative Care <sup>8</sup> UNHCR Brief, Alternative Care

ONHCR Brief, Alternative Care UNHCR Brief, Alternative Care

<sup>&</sup>lt;sup>10</sup> UNHCR Brief, Alternative Care

# CHALLENGES IN THE PROVISION OF ADEQUATE ALTERNATIVE CARE TO UNACCOMPANIED CHILDREN IN HUMANITARIAN CONTEXTS IN UGANDA:

The provision of adequate foster care arrangements for all unaccompanied children and regular follow-up and support for UASC comes with a range of challenges not only for child protection actors in the Uganda refugee response but also potential risks to the children themselves. Foster care relies on the goodwill of volunteer foster parents and with the increasing number of children in need, coupled with the pressures occasioned by the lack of resources, the following have been noted;

- As some families foster children to get additional benefits, in some cases children are soon abandoned and the foster parents return to South Sudan or other country of origin, or move to another settlement.
- In most circumstances, there is a strong sense of community responsibility for children, though this does not necessarily mean that fostered children will be accorded the same level of care as children born to the family they are with. They can also be denied the same level of access to available services relative to other (biological) children within the household.
- Levels of violence against fostered children are on the increase. This is concerning as it can leave them open to abuse and exploitation as well as being discriminated against within the foster family. Abuse of children in foster care has been reported with actions ranging from exploitation, discrimination, violence and neglect being reported which greatly affect the very essence of providing the care to the children in need.
- Challenges of partners funding and an increased caseload has affected efforts to ensure an adequate ratio of staff to beneficiaries that would ensure regular follow-up of children placed in care.
- The expense of caring for children of certain ages (under 5 or over 14), or children with disabilities can sometimes be a major issue and the absence of some form of material support inevitably reduces the number of families volunteering to foster.
- There is some evidence of agencies providing differing support to fostered children from biological children within the family setting.
- There is a real problem around fostering fatigue. Families with multiple fostered children suffer immense pressure, especially in scenarios where there are limited livelihood opportunities and economic strains. Peer groups for both foster parents and children have proven useful to exchange lessons learned
- > There is a need to have clear guiding criteria developed to guide the process of identification of possible foster parents and well guided trainings that they should undergo before, during and when fostering children.
- Alternative care is a continuum of care within the case management process and it is important to ensure that the care arrangements are followed within the agreed parameters as enshrined in the individual child's care plan.
- When there are high numbers of new arrivals, a pool of (pre-screened) foster parents has proven useful. The use of a standardised form for background checks has proven useful in other contexts.

A major challenge can be around what to do with children aged 18 and over. Provisions need to be put in place for them to be able to protect themselves once they have grown out of alternative care, for example, to be provided with vocational skills training to prepare for independent living.

LESSONS LEARNED & WAYS FORWARD FROM UGANDA ON HOW TO ADDRESS CHALLENGES WITH ALTERNATIVE CARE\_ARRANGEMENTS:

- ✓ Regular follow ups from case workers to monitor fostered children, foster parents and receiving communities (monthly for the first 6 months, then bimonthly and quarterly). Occasional follow ups conducted by the agency case manager and with the probation and welfare officer, UNHCR and OPM ensure that any concerns/issues emerging are managed and responded to early enough.
- ✓ It has been found preferable to institute a policy of no material support (apart from helping families to benefit from existing communitybased projects), as this immediately precludes families motivated by material gain. Some agencies choose to deal with this issue on a case by case basis.
- ✓ Families or communities can be assisted through existing systems of welfare support, including local authorities, churches and local and international organisations. This can cause issues though as the provision of acre is supposed to be altruistic and voluntary. Assistance however, to the community can include support for basic services, such as healthcare and education, income generation projects, agricultural rehabilitation, or livestock provision¹¹¹.
- ✓ By connecting foster families with livelihood activities, more families are enticed to also foster unaccompanied and/or separated children.
- By involving wider communities and carrying out more information awareness sessions, it may be possible to open up more families to the idea of fostering.
- Decisions about material assistance, if not properly managed, can cause resentment in the community and can also have negative effects on the welfare of individual children. Not providing it, however, can also prevent reunification, especially if there are difficult financial circumstances in the family.
- ✓ Support the Ministry of Gender, Labour and Social Development to monitor and implement alternative care reform with specific emphasis on foster care.

- ✓ Support the Ministry of Gender, Labour and Social Development to improve gatekeeping mechanisms.
- ✓ During identification of potential foster parents, families should be advised that they will receive regular supervision/monitoring visits from the agency staff, UNHCR, OPM and the probation and social welfare office. Their consent should be sought at identification.
- ✓ It is recommended that families, along with foster children should be targeted with protection, parenting, life skills and other soft skills that will be helpful in ensuring that children are well cared for and not abused, as well as receiving ways to become more self-sufficient.
- ✓ Any material assistance provided should be based on needs and address needs of all children in the home, including biological children.
- ✓ Vulnerable community members should not be burdened with further care of children in a fostering scenario as this can add to their burden of care and increase their own vulnerabilities. Ensure that potential foster care parents have children of their own or children living in their care before considering fostering.
- ✓ Assess the living conditions of potential foster care families before confirming fostering.
- Families with more than 5 children with ages less than 5 years should not be allowed to foster as their burden of care is already high and fostering would increase vulnerability.
- ✓ Children within foster care especially adolescents along with other children in the family should be targeted with life skills trainings and/or education.
- ✓ With regards to fostering fatigue, it is advisable not to foster more than two children within one family.
- ✓ At times it can be useful to have a signed formal agreement between the foster parents and the agency. For example, it has proven useful when there have been questions around the legality of the child staying with them or during any questioning by authorities.
- ✓ Where foster care is not viewed as being in the best interest of the child, independent living can also be seen as an option.

Developed by the Child Protection Sub Working Group in Uganda.























<sup>&</sup>lt;sup>11</sup> ARC, Module 6, Separated Children