



Ministry of Interior



Ministry of Social Affairs,  
Veterans and Youth Rehabilitation

## HANDBOOK FOR COMMUNE COMMITTEES FOR WOMEN AND CHILDREN (CCWC)

IMPROVING CHILD CARE AND THE SAFE RETURN  
OF 30 PER CENT OF CHILDREN IN RESIDENTIAL CARE  
TO THEIR FAMILIES



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## Rationale for the booklet

As the only formal entity at the commune level responsible for women and children, commune committees for women and children (CCWCs) play an important role in protecting children in community. This handbook highlights the role CCWCs can play in support for the implementing the Action Plan for improving child care, which is being carried out in five priority provinces -- Phnom Penh, Battambang, Siem Reap, Kandal and Preah Sihanouk. The Action Plan intends to safely return 30 per cent of children in residential care to their families by the end of 2018, as well as establish effective preventive and gatekeeping mechanisms to prevent unnecessary family separation.

The Action Plan was launched in April 2017 by the Ministry of Social Affairs, Veterans and Youth Rehabilitation (MoSVY) and UNICEF; implementation is being led by MoSVY and relevant government institutions with technical and financial support of USAID, UNICEF and the Partnership Programme for the Protection of Children (3PC), a network of 10 NGOs headed by Friends-International. It is in line with the 2006 Alternative Care Policy, the 2011 Prakas Procedures for the Implementation of Alternative Care Policy, sub-decrees 199 on the Management of Residential Care Institution and other regulatory frameworks related to alternative care. As such, the roles of CCWC in this Handbook was the compilation from these existing Action Plans, policies and regulatory frameworks.

This handbook is useful in strengthening CCWCs' roles and enhancing their knowledge and capacity to protect children in their communes.

## Why is the Action Plan on reintegration of children important?

- Far too many Cambodian children live in residential care: There are 16,579 children in 406 institutions ('orphanages') nationwide. 77 per cent of these children have at least one parent, which means they should not be in residential care, but rather their families should be supported to look after their children.
- Decades of global research show that family and family-based care is best for a child's overall physical, emotional and intellectual development to reach their full potentials. An 'orphanage' should be the last resort and a temporary solution. The Government of Cambodia recognizes this body of knowledge and believes that the primary role in protecting and caring for children lies with the family and communities.

The table below shows negative impacts of children living in residential care institutions comparing with positive impacts of children who are living with their families.

Children in residential care are more likely to experience	Children raised in a family/family-based environment are more likely to experience
Sexual and physical abuse	Safer environment
Less attention from caregivers because of high children-to-staff ratio and significant staff turnover (Imagine this: biological parents may look after one to four children, but a caregiver in an institution might be responsible for over 30 children which is not in line with the 2008 Minimum Standards of Alternative Care. How can every child get love, attention and support he/she needs?)	

Separated from their families and isolated from the community, children who spend long periods in residential care have a

Part of a community, has a sense of belonging, better relationships with families and friends when the child grows up

Some institutions may have good physical facilities, which may be attractive to poor families. BUT, children need more than good physical care – they need love, attention and lasting attachment with an adult caregiver, which they cannot get from strangers in residential care.

Institutional care is especially damaging for children younger than 3, because the early years are the most important developmental phase in life. Early institutionalization hinders both physical and cognitive development. Research shows that for every three months a young child resides in an institution, they lose one month of development. Young children shifted from an institution to supported foster care before age 2 made dramatic developmental gains compared to those who stayed in institutional care.



## What are the CCWCs' roles for the implementation of the Action Plan?

CCWCs should monitor the overall situation of children being returned from residential care, mobilize resources to support them and their families, report on their situation and challenges in monthly commune council meetings. They should give orientation to commune councils in all areas of the Action Plan. There are three main specified roles defined for CCWC in the plan.

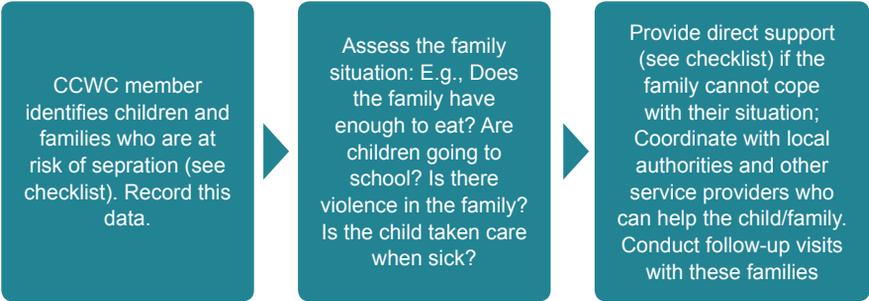


### 1. Prevention

#### Importance of prevention

Prevention and family preservation means keeping children together with their families. Every child has the inalienable right to remain safely with the biological mother and/or father whenever possible. The parent/child relationship is a sacred connection that should not be severed unless the child's safety is threatened. The separation of children from their biological parents should be considered only after all means of addressing the problems of the family have been exhausted. What can CCWCs do in this regard?

#### Example: Supporting a vulnerable child to prevent separation





**Checklist:** Who is at risk of family separation?

- Children from poor families
- Children with only one parent or whose parents are not living with them or with an old caregiver (ex. grandparents) who faces difficulties to take care of the child
- Children living in families with high domestic violence
- Children living in families experiencing alcohol, gambling and substance abuse
- Children with families experiencing chronic illness and disability
- Children from households that already have a child living in an 'orphanage'
- Children who are in conflict with the law

**Checklist:** What direct support can CCWC provide?

- Provide on-the-spot advice, such as the importance of avoiding violence, sending children to school and meeting medical and nutritional needs of children Refer families to local service providers or vice versa for services such as education support, livelihood support, medical support, counselling
- Conduct home visits for riskiest cases
- Refer children who cannot stay with families to family- and/or community-based alternative care providers, such as kinship (with other family members) or foster care. Remember, the 'orphanage' should be the last option and if unavoidable, for a temporary period only
- Educate families and community members about the negative impact of family separation and promote positive parenting to protect and provide adequate care for children in their communities

Remember to keep a list of service providers in your community and foster carers.

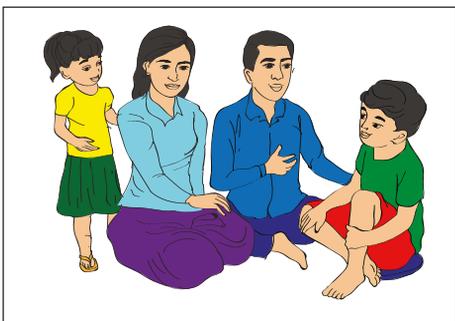
## 2. Gatekeeping

Gatekeeping is the process of referring children and families to services or care arrangements to limit the number of inappropriate placements and children entering 'residential care institutions'. As mentioned in the Prakas Procedures on the Implementation of Alternative Care Policy and MoSVY Action Plan for improving child care, CCWCs' signature is required before a child is placed in residential care, they must carefully review each case being put forward to ensure that all alternatives to residential care have been exhausted. Has the family been properly supported? If this didn't work, was foster care, kinship care and options of community-based alternative care sought?

## Care Options

- Best option:** Growing up with biological parents
- Second option:** Family-based care options such as kinship care (relatives), foster care or adoption (families not related to the child)
- Third option:** Community-based options such as group home (family-style small units)
- Last option:** Residential care institutions ('orphanages') that meet the Government's Minimum Standards

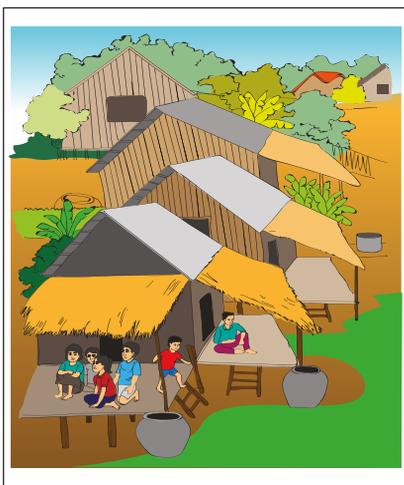
Family- or community-based alternative care are preferred to institutional alternative care, however, ALL care arrangements must be monitored for safety and care as stated in the existing Alternative Care frameworks. All placements of children in family and community based care should be implemented with the technical support of MoSVY/DoSVY/OSVY and in compliance with specific existing procedures.



**Best option**



**Second option**



**Third option**



**Last option**

### Example: Good gatekeeping

At all stages, ensure the best interests of the child and 'do no harm' Family separation should be the last resort, as when the child is in danger of experiencing imminent harm

DO NOT refer to residential care as the first option.

CCWC receives a request for placing a child in alternative care.

1) CCWC assesses the family situation. Has everything been done to help to keep the child together with their family? This is the priority.

As a last resort and for a temporary period and where family preservation or family-based alternative care is not possible, refer to OSVY/ DoSVY for children to be placed in residential care (i.e., provide written authorization). Remember: Children under 3 should not be placed in residential care. Prioritize family-based options such as kinship care and foster care.

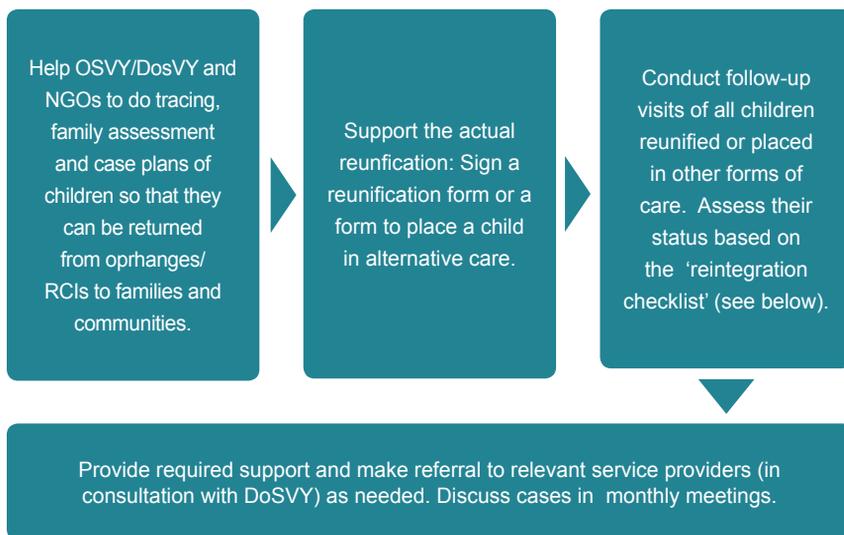
2) What options have been considered for alternative family-based care (foster care, kinship care, domestic adoption). This should be used in situations when families cannot stay together or a family member cannot be found.

### 3. Reunification/Reintegration

As part of the Prakas Procedures on the Implementation of Alternative Care and MoSVY Action Plan on improving child care, children living in different 'orphanages'/RCIs are being returned to their families. This is a long and complex process. CCWCs can help OSVY/DoSVY and NGOs to find biological parents and other relatives for returning children and assess them before bringing children home. By law, CCWCs are required to sign the form reunifying a child with their families/relatives or placing them in any type of alternative care.

CCWCs should closely monitor all children returning from orphanages, mobilize resources and follow up on their needs. They should visit these children and report to OSVY or DoSVY on their status, suggesting immediate action to support children who are at risk after reunification with families. Children will require material and other advisory support to endure the reintegration process. If required, link them with relevant service providers. CCWC should also share the information on children being reintegrated with district WCCCs.

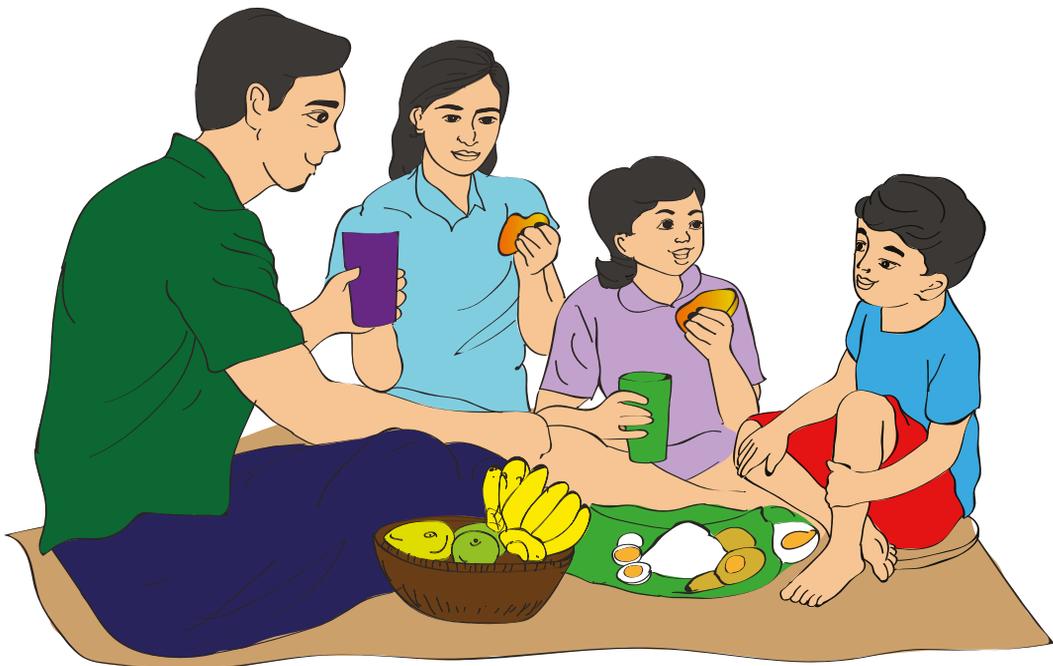
#### **Example: Helping children return from residential care institutions**



**Checklist:** What to look for while assessing reintegration status (Reintegration Checklist)

- The child is going to school
- The child has access to basic food and shelter
- The child has access to health care when sick
- The child shows no sign of psycho-social distress and anxiety
- There are no protection risks (e.g., the family where the child is placed/reunified is not violent or abusive; there is no child labour and exploitation)
- The child and the family are satisfied with their current arrangement
- The child takes part in community events
- The family is financially stable to look after the child





Which key service providers for vulnerable children can CCWCs coordinate with to provide preventive and reintegration support?

CCWCs should keep their own local record of available agencies in the community.



ChildSafe Hotline (run by 3PC members):

**012-311-112 (Phnom Penh)**

**017358758 (Siem Reap)**

**012 478 100 (Sihanoukville)**



National Police Hotline:

**1288 or**

**023 997 919**



Cambodia Child Helpline:

call **1280 or**

 **SMS 017 985 810**

## What principles should CCWC follow while conducting reintegration-related work?

**Best interest of the child:** This must be the primary consideration in making decisions that may affect children. All adults should think about how their decisions will affect children and honour the physical, psychological, moral and spiritual integrity of the child. A child's dignity should be promoted. Remember that every child has a specific situation, her own story, situation and needs.

**Tip:** Family separation should be the last resort, as in cases where the child is in danger of imminent harm. All decisions concerning alternative care should attempt to keep the child as close as possible to his/her place of residence in order to facilitate contact and potential reintegration with the family and minimize disruption of the child's educational, cultural and social life.

**Do no harm:** 'Do no harm' means that the well-being of children must not be reduced or compromised under any circumstance. All reintegration processes should aim to benefit children and never jeopardize their physical and psychological safety.

**Equity:** The fundamental rights of every child, regardless of gender, race, religion, income, physical attributes, geographical location or other status should be protected. Particular attention should be paid to children with special needs to ensure that they are not left behind.

**Checklist:** What data should be kept by CCWCs?

- Number of vulnerable children at risk of separation
- Number of children who have returned from 'orphanages' and reunified with family or other forms of care and their status
- Number of children supported by CCWC (for prevention and reintegration – such as tracing, reunification, follow up, referral)
- Number of alternative care providers in your commune and children living there
- Number of children who have joined a residential care institution (in any province)
- Number of children referred by CCWC for residential care and other types of alternative care



## Glossary

<b>CCWC</b>	Commune Committee for Women and Children
<b>DoSVY</b>	Department of Social Affairs, Veterans and Youth Rehabilitation
<b>NGO</b>	Non-Governmental Organization
<b>OSVY</b>	Office of Social Affairs, Veterans and Youth Rehabilitation
<b>RCI</b>	Residential Care Institution
<b>WCCC</b>	Women and Children Consultative Committee
<b>3PC</b>	Partnership Programme for the Protection of Children

## Case Stories

### Preventive support

In Siem Reap, a grandmother approached the CCWC focal person to place one of her granddaughters in an 'orphanage'. The parents had recently migrated to Thailand and she could not afford to look after her grandchildren. The CCWC focal person told her about the advantages of staying with the family and how damaging 'orphanages' are. After consulting with other members of the CCWC, the focal person linked the family to a local NGO. The 3PC NGO worked with the family to keep them together, providing education and income-generation support. While the family still faces difficulties, they are working to improve their situation and are happy to be together.





## Case Stories

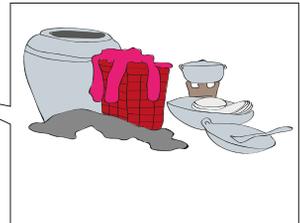
### Preventive/family preservation support

Smart and hard working, Sovann\* is one of the best students in her 7th grade class. But as recently as last school year, her grades didn't reflect this. Serious financial strains on her family prevented Sovann from reaching this potential.

Phan\*, Sovann's father, a tuk-tuk driver, fell sick last year. Then his tuk-tuk broke down. With seven people under one roof, it was harder and harder to survive. Thy\*, as a wife and mother, started scavenging. With her mother working, Sovann stepped in to help with household chores and her younger siblings. She often missed school. Despite the family's hard work, the situation was not improving. They were desperate.

They were identified as an at-risk family by 3PC NGO, which helped Sovann return to school and monitors her school performance. They also helped the family repair the tuk-tuk. Phan has recovered from his illness and is now earning again.

Now that Sovann is resuming the life of a teenager, she dreams of becoming a doctor to help the Cambodian people.



## Case Stories

### Reintegration

After an unhappy three-year period in an ‘orphanage’ in Battambang Province, 11-year-old Dara\* and eight-year-old Vanna are back in the care of their family after a government-led intervention programme reunited them all.

The boys’ parents had placed them in the ‘orphanage’ prior to their migration to Thailand to work as construction workers.

As part of the 30 per cent return of children from orphanages, MoSVY conducted case management of children at the orphanage where Dara and Vanna were living. Most had one living parent, and the orphanage did not provide adequate food or services. Family tracing and family assessments helped locate the children’s parents or wider family members. Dara and Vanna were reunited with their parents in January 2016. Social workers worked closely with the local CCWC to facilitate the process. They made follow-up visits, provided counselling and arranged for the boys to re-enrol in primary school.



***“I felt very safe and secure when I arrived home,” Vanna told social workers. “My mother hugged me. I’m very happy to play with friends in the neighbourhood and school.”***

Dara shared these feelings. ***“My family takes good care of me,” he said. “I like my teacher and friends at school.”***

DoSVY social workers have cooperated with social workers from the local 3PC NGO to provide extra support for the family, focusing on education and livelihood. The boys’ mother said she would never send her children to an orphanage again. ***“I was so lonely without them. I am very happy that they are home.”***



## Case Stories

### Reintegration

Twelve-year-old Ravy\*, who has a slight intellectual disability, lives with her mother and two older siblings in Phnom Penh. When she had a fight with her mother, the young girl ran away from home and took a bus to Sihanoukville. A police officer working in the area saw Ravy get off the bus and noticed there was something a little unusual about the quiet young girl traveling alone. After approaching her and talking briefly, the officer called over a ChildSafe-certified motorcycle taxi driver who was working nearby. The ChildSafe agent called the 3PC (NG)-run ChildSafe 24-hour confidential hotline. The 3PC NGO Child Protection team was then dispatched to meet the girl, who then worked with local authorities and CCWC members to bring Ravy back to Phnom Penh to be reunited with her family.

*\* Names have been changed to protect the families' identities.*



