

## Terms of Reference

### Literature review on the role of residential care in the alternative care of children

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#### Summary

##### Objective research:

The objectives of the research are:

1. To obtain an overview of existing research regarding residential care, and the insights this brings in terms of the care needs that residential care responds to, the effects on the well-being of children/youth, and its role within the range of care options.
2. To gain insight into the discourse within the body of research, and the evidence-base for divergent conclusions.
3. To identify the gaps in existing research.

##### Main research Question:

What does the research say regarding the role of residential care options in the alternative care of children, and how it (does or does not) complement family based alternative care options in meeting the needs of children who have temporarily or permanently lost parental care?

**Budget:** app. 32.000 EUR

**Deadline:** March 2020

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#### 1. Context/background

In 2009, the **Guidelines for the Alternative Care of Children** were welcomed by all member States in the framework of the United Nations (UN) ([A/RES/64/142](#)). The UN. They provide in the implementation of the articles in the Convention on the Rights of the Child (UNCRC) that address the needs of children who are without or at risk of losing parental care. It outlines principles and orientations that legislation, policy and practice need to follow, in order for child care systems to deliver services that meet the needs and rights of this specific group of children.

Ten years after the Guidelines were welcomed, different actors in the child care sector are looking at the Guidelines in different ways for the design, implementation and reform of alternative care regulations and services. There is an overall agreement on the need to support families to avoid unnecessary child-family separation, and tackle the root causes that create these situations.

However, national as well as international key players are divided on what range of alternative care services should be available for children within any given system when –through due process and taking the child's best interest as primary consideration – a decision is made to place them in alternative care settings. While there is general consensus on the need to provide family based alternative care options, there is no unified position on the role of residential care options within the range of alternative care options.

While the Guidelines clearly recognise the complementary role of residential and family based care options in meeting the individual needs of children, some advocate that all forms of residential care are to be considered harmful to child development and replaced with family-based care solutions. Such positions are often intermingled with the debate on the quality of care, whereby all actors do agree that there should no longer be any form of *institutional care*.

What evidence is available and sufficiently used to inform the different positions is not always clear. There is therefore a need to identify what relevant evidence and data is available with regards to the role of (good quality) residential care in the range of care options.

SOS Children's Villages is commissioning a literature review in order to collect evidence and data about the pros and cons of residential care as a form of alternative care service for children, and how it complements other services in meeting the needs of children who have temporarily or permanently lost parental care.

## 2. About SOS Children's Villages

SOS Children's Villages International is the umbrella organisation for the global federation, active in 135 countries and territories, meeting the care needs of approximately 400,000 children and young people in more than 550 communities worldwide. We work together with a single vision: every child belongs in a nurturing/family environment and grows with love, respect and security.

Among other services, we provide family-like care (FLC) for children who have lost parental care and for whom this type of care setting is in their best interests.

We also work with vulnerable families and communities to empower families to take care of their children and prevent child-family separation. This is done by providing family strengthening services (FS).

## 3. Objective of the research

The objectives of the research are:

1. To obtain an overview of existing research regarding residential care, and the insights this brings in terms of the care needs that residential care responds to, the effects on the well-being of children/youth, and its role within the range of care options.
2. To gain insight into the discourse within the body of research, and the evidence-base for divergent conclusions.
3. To identify the gaps in existing research.

## 4. Research Question(s)

### **Main research question:**

*What does the research say regarding the role of residential care options in the alternative care of children, and how it (does or does not) complement family based alternative care options in meeting the needs of children who have temporarily or permanently lost parental care?*

### Sub research questions:

1. To what regions, in what time periods and to what care settings does the body of evidence on residential care refer? And what, if any, are the *developments* herein?
2. What research offers evidence on the key care needs that residential care options typically accommodate, and what conclusions does it draw regarding what it could or should accommodate?
3. What research is offering evidence that is either *supporting*, or *challenging* the added value of residential care options, or is not making any conclusions either way?
4. If there are divergent (or even contradictory) conclusions drawn regarding the role and added value of residential care options, where does this disparity come from? And are these conclusions specific to residential care or do these apply to all care options?
5. What *gaps* are there in research with regards to this added value? And what do these gaps mean for the conclusions that are and/or can be drawn with regards to the added value of residential care in the range of care options?

## 5. Methodology & scope

### Methodology

- Review and meta analysis of existing research literature
- Possibly interviews with key actors, to gain insight into terminologies used, and/or provide insight into available literature, key researchers/research institutes in the field.

### Scope, frame and terminology

Within the context of this review, **residential care** includes all forms of formal alternative care that are *not* family based. Residential care can therefore refer to different alternative care settings such as Small Group Homes, Family-Like Care, youth homes, emergency shelters, transit homes etc.

As much as possible information in the report should be presented by using the terminology as agreed upon within the frame of the UN Guidelines for the Alternative Care of Children.

The content of the analysis should focus on residential care, including but not limited to institutional care. According to the UN Global Study on children deprived of liberty (2019) institutions are often characterized by *“living arrangements that are inherently harmful to children. The characteristics include but are not limited to: separation and isolation from families and the wider community; forced co-habitation; depersonalization; lack of individual care and love; instability of caregiver relationships; lack of caregiver responsiveness; lack of self-determination; and fixed routines not tailored to the child’s needs and preferences.”*

It should thereby be noted that within the research body, the term ‘institutional care’ can be used in different ways, and include the type of care as described above, as well as good quality residential care. The analysis should therefore clearly distinguish between evidence found with regards to good quality residential care, and poor quality residential care (institutional care), whatever the terminology used. Where terminology in the literature body deviates from what has been agreed upon within the UN Guidelines, in the analysis, the reviewer should be clear what was *meant* with a specific term used.

Furthermore, the analysis needs to clearly distinguish between *the type* of care setting (e.g. foster care, small group homes etc) and the *quality* of care provided in this care setting (e.g. individual

approach, community integration). This as *all* alternative care settings within the range should adhere to certain quality criteria. Therefore quality features can never be the determinant factor in describing the (non) added value of a care setting, unless the presence or the lack of quality is specifically related to how the care setting is organized. As such, the research should clearly distinguish between residential care that is organized in a way that allows it to offer quality care (residential care), and that which does not (institutional care).

## 6. Deliverables

### Intermediate deliverable

1. Overview of literature scan, including proposed cut-off point.
2. Proposed system to capture and categorize the research literature, including proposed key criteria for categorisation, such as:
  - Terminologies used to indicate residential care
  - 'positive' and 'negative' conclusions vis-à-vis the role of residential care
  - Determination of validity of the data, and its relevance for the conclusions drawn.
  - Regional distribution
  - Distribution over time (when was the data obtained, when was the article published)
  - etc

### Final deliverable

1. Final report including:
  - Executive Summary
  - Brief presentation of the key (and possibly different) terminologies used within the research, as compared to the terminology used in the prevailing debate and the Guidelines, as well as possible changes therein; brief description of what is seen to be residential care, what care settings it includes, what are the main characteristics.
  - Overview of the research body related to the time period, the geographical setting, the type of care settings it describes, the type of care that is provided within residential care, and the possible developments therein
  - Insight into developments with regards to how residential care and institutional care are described and presented in the evidence body, including how residential care is (or is not) distinguished from institutional care.
  - Overview and analysis of the key evidence in the literature with regards to the care needs it generally accommodates and how.
  - Overview of the conclusions drawn with regards to its specific added value within the range of care options, including any challenges found in conclusions drawn.
  - Brief overview and analysis of the key developments/trends in the literature with regards to the added value of residential care and the discourse within the research body.
  - An analysis of where an identified divergence in conclusions drawn, or evidence found, may come from.
  - Presentation of remaining gaps in research and some conclusions of what these gaps mean for the conclusions drawn and the current debate.
  - Final remarks with regards to the main conclusions drawn within the research body, and where possible divergence may come from.
  - Annexes: References and categorization of evidence
- App. 50 – 60 pages

- Excl. list of references, appendices and overview tables

## 7. Budget & timeline

**Budget:** 30.000 – 32.000 EUR

**Deadline:** March 2020

## 8. Qualification of researcher(s) and criteria for selection

One medior/senior researcher, or a team of 2 (junior and medior/senior) with the following qualifications:

- Social academic research background/experience
- Experience with meta-analysis
- Knowledgeable in one of more of the following areas: social policies, child protection, child rights, social services, alternative

## 9. Contacts for the research

**Main contact:** Valerie Jans: [valerie@soskinderdorpen.nl](mailto:valerie@soskinderdorpen.nl)

**Other contacts:** Douglas Reed : [Douglas.Reed@sos-kd.org](mailto:Douglas.Reed@sos-kd.org)

## 10. Key reference materials

*Sources:*

Google scholar;  
Researchgate;  
University libraries.

*Reference documents:*

UN Guidelines for the Alternative Care of Children  
Moving Forward: Implementing the 'Guidelines for the Alternative Care of Children'  
SG report on the UN resolution

## 11. Process of submission of proposals

This bid is open to all suppliers who are legally constituted and can provide the requested services. The bidder shall bear all costs of the bid; costs of a proposal cannot be included as a direct cost of the assignment.

### **Language and currency of the bid**

The proposal and all supplementary documents have to be submitted in English. The financial bid needs to be stated in Euros. The proposal should include:

### **Documents to submit**

- Proposal outlining intended methodology including:
  - A review of our criteria for the selection of research materials

- A proposal for a data management system, based on quality data analysis programme, such as ATlas-Ti.
- Activity plan and timeline
- Budget
- CVs of the research team member(s) including relevant experience
- List referees and any relevant examples of previous experience comparable to this assignment

**Deadline for submission**

The proposal has to be received by latest on **November 20, 2019**, by the end of the day. Proposals received after the deadline will be not be considered.