



## Guidance

# CHILD SAFE PROGRAMMING AND SAFEGUARDING IN INTERIM CARE CENTRES

November 2019

## Safeguarding Children

### Interim Care Centres

Our child protection (CP) teams work with governments and partners around the world to enhance systems to protect children and their families. One of the most protective environments for a child is a safe and loving family. In line with the [UN Guidelines for Alternative Care of Children](#), Save the Children works to promote family based care and support parents and caregivers to adequately care for their children. However, our teams need to carefully consider whether or not setting up an ICC is appropriate as it should only be used as a last resort option. Preferred alternative care options include kinship care, foster care, or other forms of community-based care. Prior to setting up an ICC – it is recommended that this be discussed with the Child Protection Backstop or the co-leads of the Appropriate Care Task Team. For further programmatic guidance on establishing or supporting appropriate care, please see the [Alternative Care in Emergencies Toolkit](#) and the [Steps to Protect Common Approach](#).

Interim Care is defined as care arranged for a child on a temporary basis of up to 12 weeks. The placement may be formal or informal with relatives, foster carers or in residential care such as an Interim Care Centre (ICC). While interim care can and should be family and community based, in some specific circumstances based on the age of the child, the risk to the child and the lack of alternative family care options, a residential Interim Care Centre may be necessary. The children who may require care in an ICC include unaccompanied children, a lost child or a child that is in imminent danger such as risk of violence, abuse or exploitation. The name for these centres varies across contexts and include: shelter, safe space, residential care or childcare facilities. For the purpose of this guidance, the term ICC is used throughout.

It is important to note that children under the age of three should only be placed in an ICC as an absolute last resort option. If it is unavoidable (i.e. child is found, natural disaster, etc.), they should not remain in the ICC for more than a few hours.

Due to the nature of our work, some of our Child Protection interventions are high risk, including Interim Care Centres (ICC) as they involve working directly with the most vulnerable children 24/7. The risk of abuse against children in residential care has been well documented. This document outlines some potential child safeguarding risks of ICCs and suggests how to manage them to ensure children are as safe as possible.

*Eliminating opportunities for children to have isolated 1:1 time with staff and volunteers will dramatically reduce the likelihood of sexual abuse and exploitation occurring.*

### Common types of harm & abuse in ICCs



#### Sexual exploitation & abuse



#### Emotional abuse



#### Physical & humiliating punishment



#### Unsafe programming

### Key 'people' risks

#### Insufficient recruitment and HR practices leading to:

- Low staff to child ratios (especially for young children) resulting in neglect and potential violence, exploitation and abuse
- Lack of gender balance in staff (due to recruitment practices and/or cultural norms of females working overnight)
- Stressed staff may be more likely to resort to physical and humiliating punishment; and less likely to notice warning signs of abuse
- Staff showing favouritism towards particular groups of children or a single child; or not responding to peer-on-peer abuse among children – staff might consider it 'play' and normal behaviour

#### Insufficient capacity leading to:

- Untrained or poorly supervised/managed staff who might miss signs of sexual exploitation and abuse and/or fail to act swiftly on concerns
- Staff being unaware of power dynamics between staff and partners and children who are uniquely vulnerable (e.g. are marginalized, living with

disabilities, are separated from caregivers) – could lead to child abuse

**Inadequate monitoring and awareness** of the people in or near the space leading to:

- Proximity of any individuals or groups that may pose a threat (Example: soldiers, militias or others such as construction workers and contractors) in, or near, ICCs
  - Militias near the site demanding access to the ICC
  - Contractors who are on site and not familiar with our policies
- Risk of media/communications revealing the location of the ICC and/or the identity of the child. This could lead to the centre or child targeted by child abusers. (Example: Human traffickers, armed groups etc.)

## How can we mitigate these ‘people’ risks?

In order to mitigate risks linked to **recruitment and HR practices**:

- Recruitment checks – ensure HR adhere to Safer Recruitment practices even when rapid recruitment is necessary. For ICCs, it is also recommended to gain additional reference checks from community members or leaders
- Ensure appropriate staff to child ratios based on the age and needs of the child. Please refer to the [Alternative Care In Emergencies \(ACE\) Toolkit](#) on P.73 for the appropriate standards
- Strive for at least 50% representation of females (in some contexts it may be more appropriate to have only female staff)
- Support staff wellbeing and reduce stress to a manageable level; notice signs of exhaustion and burnout and report it
- Increase the number of staff members in the team on site and consider staff to child ratios. This would be necessary where the team is small and there is an increased risk of isolated 1:1 time with a child. (i.e. if there are only 2 staff members on site and they don’t work together at all times)
- Nominate a minimum of one Child Safeguarding focal person for a team of 10 staff including partners. This should include gender considerations based on the context. It is also recommended to have a CSG focal point specifically for alternative care.



Photo credit: Fiorella Ramos / Save the Children

In order to mitigate risks linked to **insufficient capacity**:

- Ensure that training on the Code of Conduct is provided, and that all staff sign it and apply it. Ensure policies to monitor and respond to violations of Code of Conduct are in place
- Clearly state and re-state organisational rules (the Child Safeguarding Policy, the Code of Conduct) that govern behaviour and ensure that senior staff in particular ‘live’ the principles of Child Safeguarding visibly
- Train, support and empower staff & guards to say ‘no’ to uninvited/unexpected guests to the ICCs; and for all to report concerns. Staff are expected to be trained or briefed on the key concepts in the “Parenting without Violence” (PwV) resource
- All staff should have completed first aid and fire safety training
- Ensure staff and volunteers are trained in child and youth resilience
- Hold sessions with staff on issues of gender equality, child participation, and promoting positive social norms
- Provide training on referral and reporting protocols to all teachers, staff, and children. Children need to know that they can and should report any violations and how to seek support if they feel unsafe

In order to mitigate risks linked to **monitoring and awareness** of the people in or near the site:

- Where appropriate, work with community members, leaders, religious leaders and other influential individuals on:
  - the behaviour they should expect from our staff and partners and how to report any concerns; alongside any nutrition key messages

- how best to maintain the ICCs anonymity
- becoming 'champions of child safeguarding'
- talking to others about the behaviour the community can expect and how to report any concerns
- Only allowing visitors who provide a concrete service inside the ICC, and limiting the number of people the child is exposed to while in the ICC
- It is not recommended to have media/comms teams engage with children. However, we would need to have clear SOPs and training for media/comms in case there is work in ICCs
- Remove opportunities for children to have isolated, 1:1 time with CP staff and other adults in the in the ICCs (reducing the likelihood of sexual abuse).
- Reduce anonymity –wearing a Save the Children visibility when working in a ICC, displaying photo ID when working (unless it places the staff member or child in danger or risks anonymity of the space if needed), always making a point of introducing all visitors to the ICC centre by full name and job title to children
- Do not allow children to contact staff or volunteers on their personal mobiles, only ever via shared work phones
- Recognise and challenge any incident of dehumanisation of certain children or groups of children (e.g. refugee groups, ethnic minorities, castes groups, children in detention) and allow individual culture and religion to be practiced
- Ensure that hard copies of Save the Children's Code of Conduct and Child Safeguarding policies are available and accessible to staff onsite as an easy reference. In cases where staff may have lower literacy rates, consider using;
  - Child-friendly Child Safeguarding IEC materials (i.e. posters) as well as multiple routes displayed visually to report any issues
  - Focus Group Discussions (FGDs) on CSG
  - Story-telling and scenario based exercises as useful tools in contexts where it is culturally appropriate
- Link up with case workers and ensure reporting and referral pathways are in place at the ICC to identify, report, and respond to suspected or confirmed cases of violence and other child protection concerns.

## Key programme and process risks

**Inherent risks** associated with programming such as:

- The risk of the ICC causing family separation. For instance, a family may decide to give up their child to the ICC in cases where they believe that the quality of the ICC is significantly better than their living conditions
- Lack of context-specific analysis of the legal framework, existing structures and how the government operates in relation to UASC or other vulnerable children
- Programming with groups who may be subjected to stigma and/or retaliation (example: Children Affected by Armed Conflict) without sufficient confidentiality measures in place

**Inadequate programme preparation and process** leading to:

- Lack of follow-up on children's case plan. Once children are placed in the ICC, the sense of urgency on their case could diminish leading to lack of follow-up.
- Lack of an established routine for children with regular mealtimes, bedtimes, structured play times and not taking into consideration the needs of different age groups
- A mix of significantly different age groups of children in a small space
- Overcrowding when there is high number of children at any given time at the ICC
- Children being isolated from the community and not able to integrate
- Lack of site safety management protocols and monitoring increases risk of harm and accident
- Lack of appropriate reporting mechanisms available for both staff and the community
- Lack of consideration and appropriate measures to reduce risk of harm/accidents & sexual abuse that can happen while transporting children
- Risks of the child leaving the ICC to live with an inappropriate caregiver, due to mistakes or negligence during the family tracing and reunification process
- Not seeking informed consent of the child's primary caregiver (as it may not be possible) and/or informed assent from the child to participate in services



Lack of adequate **child participation** leading to:

- Absence of child participation in ICC design, management, project development and implementation

## How can we mitigate these risks?

In order to mitigate risks linked to **inherently risky programmatic activities**:

- Have clear eligibility criteria and ensuring that the space is in line with community standards. Example: food provided should be in line with what is available to the community
- Have an understanding of the legal framework prior to establishing an ICC. In the absence of a legal framework, having local authorities' approval in writing
- Ensure adequate confidentiality measures are in place. Where feasible (and safe) coordinate with local authorities and inform them of children in the space. Conduct community sensitization on stigma related to marginalised groups

In order to mitigate risks linked to **programme preparation and process**:

- Promote the roll out of relevant Common Approaches (Steps to Protect and Parenting without Violence) and enhance reporting and monitoring systems. Train and engage staff, volunteers and community members responsible for physical locations on spotting the signs of abuse and how to report concerns (and reassure that it is safe to do so) Give relevant staff the skills to better understand children's behaviour and attachment, and work positively with children on challenging behaviour by ensuring that all relevant staff members have taken the PwV and/or relevant courses such as PFA II
- During changes between shifts in residential care settings, there should always be more than one staff when starting the next shift and two staff in each shift to make sure no staff member is left alone with a child
- Include content on safe/unsafe touch and relationships within the activities. Let all staff know that the children have been trained on consent; so they know that children are more likely to report concerns. For more details, please refer to the PwV course
- There must always be more than one adult present when activities take place and children should be within eyesight or hearing of others – especially when there are activities that involve physical contact.
  - Activities with children must be properly staffed, according to the age of the children, the nature and

	EXAMPLE 1	EXAMPLE 2	EXAMPLE 3	EXAMPLE 4
0–12 months	1 child	0	0	0
2–4 years	2 children	3 children	0	0
5–7 years	2 children	2 children	5 children	0
8–16 years	3 children	3 children	3 children	8 children
Maximum total number of children per caregiver	8	8	8	8

duration of activities and any additional needs (e.g. medical). In emergency and interim care, each staff member may care for a maximum of eight children. For longer-term care (more than 12 weeks) these numbers should decrease to a maximum of three to four children (with the exception of keeping sibling groups together)

Please refer to the [Alternative Care In Emergencies \(ACE\) Toolkit](#) on P.75 for the appropriate standards.

- Child Safeguarding Focal Point (CSFP) specifically for alternative care (ideally two, mix of genders and ethnicities) who make regular visits to ICCs or have a CSFP covering certain sites, and ensure children in ICCs and other programming know their CSFP and how to contact them.
- Site safety management protocols should be in place and available to staff
- On departure of a child from the ICC, there needs to be approval from the relevant Child Protection or Case Management senior staff member – this can be done verbally but needs to be documented and a handover form should be completed
- Have multiple accessible forms of reporting mechanisms for children and the community (the use of a toll-free hotline or similar can also be beneficial) Put in place an adult and child friendly reporting system that is confidential, checked regularly (at least once a day) and that work.
- Give staff regular opportunities to report poor practice, breach of procedures or concerns and reiterate that they will not lose their jobs for sharing any concerns. This can be done through regular meetings with staff to restate the importance of reporting CSG concerns
  - Provide coaching and training for all staff, guards, cooks & drivers on reporting child safeguarding concerns. Staff should challenge unsafe behaviour, poor practice and other staff seeking to be alone with children

- Ensure there are CSG messages (e.g. what behaviour children can expect) and messages explaining the available reporting mechanisms within ICCs
  - Example: post relevant IEC materials such as 'exploitation is a crime', 'abuse harms children', positive discipline messages and available reporting channels
- Where possible children are integrated as much as possible into the local community and encouraged to interact with other children living in the community (Example: school, religious activities, cultural activities, sports clubs etc.)
- Establish a culturally sensitive routine for children including regular meal times, bed times and structured play times. For example, meals 3x per day, clean drinking water, bed-time routines and quiet hours.
  - In child-friendly language, draft a daily schedule and rules and place in the centre.
  - Where possible get children to feed into the creation of this schedule and the activities they would enjoy participating in
  - If children are provided with snacks, they must be nutritious and in line with cultural norms. Drinking water should be clean. Children must always be supervised whilst eating
  - Activities should be age appropriate and where possible offer choice to the children
- ICC Safety Checklist in each site, revisited on a quarterly basis
- The child's care plan should be reviewed weekly in order for a longer-term plan and placement to be put in place.
- Ensure that siblings remain together as much as possible
- Unexpected site visits by authorized CP and/or Child Safeguarding staff, who are observing with a 'child safeguarding lens'
- Any transport or outings with children must be in line with the accepted staff to child ratios. If children are provided with travel to and from the ICCs:
  - Children never sit in the front with the driver
  - Children must never be alone with the driver
  - All drivers must have a current driving licence
  - Vehicles must be road worthy
  - Vehicles have functioning seat belts which must always be worn whilst the vehicle is moving
  - Vehicles are equipped with fire extinguisher and a first aid kit.

- Smoking is prohibited at all times in the vehicle
- There is clear segregation of vehicles and children (this includes vehicles using areas for turning).
- All children's data, including case files are kept in lockable storage and any data stored on work laptops should be password protected. Access is limited to case worker and/or programme manager (as per the in-country data protection protocols)

In order to mitigate lack of **child participation**:

- Where possible involve children in the design and improvement of the ICC
  - Conduct follow-up monitoring calls
  - Have FGDs with children
  - Take into consideration suggestions from children and the community from feedback and complaints mechanisms

## Risks in the physical space

**Risks inside the ICC:**

- Any areas within the ICC which are isolated, obstructed or poorly supervised
- Insecure, easily accessible areas that should be private may increase the risk of sexual abuse (e.g. latrines, changing rooms)
- Lack of clear segregation with signs for female, male, staff and children latrines
- Unsafe or poor-quality materials used for children's toys or equipment
- Poor lighting or inappropriate wiring for ICCs with electricity



Photo credit: Fiorella Ramos / Save the Children

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- Lack of clear segregation with signs of girls and boys sleeping areas and proximity of beds
- Choking or strangulation hazard from toys or items in areas that children can access (e.g. cords near windows)

## **Risks outside the ICC:**

- Unmonitored entrances and exits from ICC (cannot be seen who is meeting/picking up children)
- Insufficient or dangerous entry and exit routes to/from the ICCs, leading to crowding or injury
- Latrines may be in separate locations to the ICC leading to risks on route
- Poor maintenance or build of structures or linked services such as WASH (e.g. latrines)
- Proximity to threats such as building sites, water, traffic, limited shade, UXO or armed actors (including militias, police forces, armed guards)

## **How can we manage these risks?**

### **In order to mitigate risks inside the ICC:**

- Make sure that the ICC is equipped with appropriate, in date, first aid kit. (Check all first aid items to ensure that they have not expired. Expired or used First Aid items must be disposed of). Fire safety equipment and evacuation plans must also be on site
- Record all incidents such as injury, fire, breakages and note the details of the incident, date, name of those involved and actions taken
- Ensure that the ICC is well-lit at all times, especially at nighttime. During the daytime this should be with natural light
- There is clear segregation of sleeping areas for boys and girls as well as a physical barrier between these areas. (Ex: curtains). There should also be sufficient distance between beds.
- Separate latrines with signs for children (girls and boys) and staff (women and men) and ensure privacy for areas such as latrines, changing rooms etc.
- Windows and fixtures should be free from strings, cord and other strangulation hazards. Any broken windows must be boarded up and replaced. Glass is to be disposed of by a responsible adult
- Lack of inclusivity and accessibility to the latrines for children with disabilities and other needs

- All latrines should have sufficient lighting and lockable doors
- Safe hygiene practices are followed:
  - There are accessible handwashing facilities at child friendly heights
  - Soap is provided at all handwashing stations

### **In order to mitigate risks outside the ICC:**

- Involve Safety & Security and construction colleagues in regular assessments of the ICC and consider the space with child safeguarding in mind:
  - No windowless doors, no lockable, small dark rooms, no 'blind spots.' Well-lit areas with plenty of 'natural surveillance' by trained staff where appropriate
  - Monitor the surroundings of the ICC for crowded public areas that appear such as a distribution sites, a hospital or areas where commercial sexual exploitation happens. This should be done to maintain anonymity of the ICC as much as possible
  - Addressing safety risks for children on routes children travel to and from the ICC site.
- In cases where latrines are located separate to the ICC :
  - Well-lit paths to and from the latrines
  - No 'blind spots' on paths to latrines
  - No pit-holes nearby or on paths
  - No physical threats nearby (e.g. armed actors, large bodies of water, steep cliffs, falling rocks)
- Control and monitor access to the ICCs carefully, monitor movements of staff and others (Example: guards). Ensure there is nowhere in the grounds which are not regularly supervised to enable staff to check on the safety and welfare of children
- Generators are for external use only and at a safe distance from the project site. They must be fenced off. Under no circumstance should children have access to this area
- Access to electrical sockets and wiring is out of reach from children, sockets are covered and/or disconnected when not in use
  - Use of extension leads kept to a minimum and sockets should not be overloaded. Where possible extension leads should be clearly marked and taped / tied down to avoid tripping hazards.

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- Socket outlets and wiring are at least 5 metres away from running water outlets
- Natural and artificial ventilation is adequate (both hot and cold)
  - Air Conditioning units are fenced off / boxed and inaccessible to children. An annual maintenance check should be conducted to ensure they are still of a safe standard.
- Wall-mounted fixtures, shelving and furniture are well maintained, secure and sharp corners are covered.
- Play equipment is age-appropriate, well maintained, with no sharp edges and free from toxic paints. Replica toys of violent objects such as guns and knives are strictly forbidden. During free play, there is supervision of children using different equipment in all areas
  - Choking Hazards: All recreational materials and toys, including removable or breakable toy parts, are to be larger than a child's fist. Balloons are strictly forbidden

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