

MacArthur Foundation

Embracing childhood: Opinion study on residential care and alternative family care in Guatemala



Changing the Way We Care July 2020

Data collection: Consultoría Interdisciplinaria en Desarrollo, S. A. (Interdisciplinary Consulting for Development, S.A.), according to contract number GT(R3)-FY19-CT-V3947-738-3.

Analysis: María José Ortiz, Director for Guatemala for the Changing the Way We Care (CTWWC) program.

Editing: Ronaldo Robles, Advocacy and Communications Advisor, Changing the Way We Care (CTWWC) program

Technical Review: Kelley Bunkers, Global Technical Advisor for the Changing the Way We Care (CTWWC) program, Sully Santos de Ucles, Masters Consultant and Technical Advisor for Guatemala.

Format review and design: Diego Salazar, MEAL (Monitoring, Evaluation, Accountability and Learning) Specialist for the Changing the Way We Care (CTWWC) program.

The Changing the Way We Care initiative is being implemented by the consortium formed by Catholic Relief Services, the Lumos Foundation and Maestral International. They work in collaboration with their donors, which include the MacArthur Foundation, the People of the United States through the United States Agency for International Development (USAID), the GHR Foundation and individuals. The content of this publication is the sole responsibility of the Changing the Way We Care Guatemala Program and does not necessarily reflect the views of its donors.

© 2020 This material may not be reproduced, displayed, modified, or distributed without the prior written permission of the copyright holder. To obtain permission, write to:

info@changingthewaywecare.org.

Table of Contents

ACRONYMS	5
GLOSSARY ACCORDING TO THE CTWWC OPERATING MANUAL	6
EXECUTIVE SUMMARY Perceptions and realities of the protection system Alternative Family Care Residential Care	10 12
PRESENTATION Documentary research Quantitative research Qualitative research	19 20
I. SOCIAL PROTECTION AND SPECIAL PROTECTION. 1.1 An exclusionary structure. 1.2 Perception of violence against children	23 33
 1.3 Knowledge about the Child Protection System 1.4 The judicialization of social protection 1.5 Causes for dysfunction in the Child Protection System	40 44
Inter-institutional stewardship and coordination Budget Appointments system and tenure (civil service career)	46 47 49
1.5 Other key stakeholders of the Child Protection System Children and adolescents Other Ministries and State Secretaries Government at the local level The community	51 51 53
Academia International cooperation The economic sector	55 55 56
1.6 Gender and the system for the comprehensive protection of children and adolescer Mothers Girls	56 58
II. ALTERNATIVE FAMILY CARE. 2.1 Types of families and their importance The concept of the family	61 62
 2.2 Alternative family care in the cultural context of Guatemala. The duration of alternative family care. 2.3 The willingness of Guatemalan families to be foster families. Motivation. Age 	70 72 72

Sex	77
Ethnicity	
Disability	
2.4 Factors to be strengthened for the expansion of foster care	
Support and accompaniment	
2.5 The Secretariat for Social Welfare's Foster Families Program	
Regarding the operational capacity of the program 2.6 Adoption	
The myth of the complexity of adoption	
The myth of orphanhood	
Age	
Sex	
Disability and other characteristics (ethnicity, HIV, family history)	
Other findings	
III. RESIDENTIAL CARE	
3.1 Background of residential care in Guatemala	
3.2 Conditions of residential care	
Damages caused by residential care	
Perceptions about orphanages	
Perception of orphanage directors on the services they provide	
3.3 Reintegration of children and adolescents	
3.4 Transformation of services	
CONCLUSIONS	
RECOMMENDATIONS	
BIBLIOGRAPHY AND REFERENCES	
Interviews	
Books	
Resolutions	145
Jurisprudence	145
Legislation	

ACRONYMS

CRS	Catholic Relief Services
CRS-USCCB	Catholic Relief Services-United State Catholic Conference of Bishops
CTWWC	Changing the Way We Care
SBS	Secretaría de Bienestar Social de la Presidencia - Presidential Secretariat for Social Welfare
PGN	Procuraduría General de la Nación - Attorney General's Office
CNA	Consejo Nacional de Adopciones - National Council for Adoptions
OJ	Organismo Judicial - Judicial Branch
UNICEF	Fondo de las Naciones Unidas para la Infancia - United Nations Children's Fund
NNA	Niños, Niñas y Adolescentes - Children and adolescents
LEY PINA	Ley de Protección Integral de la Niñez y Adolescencia - Law for the Comprehensive Protection of Children and Adolescents
DI	Deinstitutionalization
SGT	Sistema Informático de Gestión de Tribunales - Court Management Computer System
CND	Comisión Nacional de Desinstitucionalización - National Commission for Deinstitutionalization

GLOSSARY ACCORDING TO THE CTWWC OPERATING MANUAL

Adoptive family: The adoptive family is the person or persons who, through legal procedures, adopt as their own child a person who is the son or daughter of another, with the purpose of granting him/her all the rights and benefits that the Constitution grants to biological children.

Biological family: The biological family includes the parents and siblings of the child or adolescent.

Care Plan: A process for developing a written plan that details how to improve the wellbeing, safety, and resilience of the child and family in the face of risks and vulnerabilities. It is based on the best interests of the child, the opinions of the child, family, and others close to the child and family, with the goal of supporting successful reintegration. The plan must define goals and actions for the child to be reintegrated into a family.

Case closure: Occurs when the social work and psychology professionals (*dupla*, in Spanish) are convinced by evidence that the child's safety and well-being are effective. Case closure should only be considered when the objectives agreed upon in the most recent version of the care plan have been met; that is, when adequate progress has been made with clear benchmarks and it can be argued through relevant assessments that the child is emotionally stable and integrated into the family and community.

Case follow-up: Regular visits to the child or adolescent and family to ensure that the reintegration process is in the best interest of the child. The care plan is reviewed together with the family and the child, and necessary psychosocial services are identified, as well as referral to service providers. These visits serve to monitor the progress of the child's reintegration into the family and the challenges to be addressed. They will be conducted for two consecutive years.

Child or adolescent: A child is any person from conception to the age of thirteen, and an adolescent is any person from the age of thirteen to the age of eighteen.

Courts for Children and Adolescents in Conflict with Penal Law: The Judicial Branch is responsible for exercising judicial power in the Republic of Guatemala. The specialized competence to impart justice in cases of children and adolescents is conducted by the Courts for Children and Adolescents and the Courts for Adolescents in Conflict with Penal Law. Among their functions are the following: a) To hear, process and resolve facts or cases referred, denounced, or that require that the court acts ex officio, when these constitute a threat or violation of the rights of children and adolescents and, through a judicial resolution, the violated right is restored or the threat or violation thereof ceases. B) When it is necessary to hear, process and solve situations created by the conduct of children under thirteen years of age that violate criminal law, through dictating the adequate protection measures that, in no case, can be deprivation of liberty. C) To carry out the judicial control of the provisional measure or measures.

Dupla: Social work and psychology professionals in charge of coordinating the reintegration process in demonstration and evaluations, case studies, links with social services, and training processes that involve the reunification of a child or adolescent with their family. They are the ones who coordinate with the orphanage or children's shelter, and the government entities for the reunification of the child or adolescent.

Evaluation: Process to identify the specific needs and strengths/resources of a child and/or family. Assessments (or profiles) explore issues related to socioeconomic status, health, nutrition, psychosocial well-being, emotional state, and education. It is important to assess children individually, as well as the conditions that affect the family. Social work and psychology professionals, who evidence and document that the child and family are candidates for reintegration, based on the child's best interest, carry out this process.

Extended family: The extended family includes all persons who are not biological family, but who are related by blood, marriage or whose relationship is comparable to that of those related to the child or adolescent at risk or whose human rights have been violated. The extended family is understood according to national and community practices, uses, and customs.

Foster family/temporary care: A foster family is one that, without having legal kinship by blood or marriage, temporarily takes in the child or adolescent deprived of his/her biological or extended family environment or a child or adolescent that is declared at risk or whose right to a family has been violated. According to the UN Guidelines, these are the cases where children are placed by a competent authority in the domestic environment of a family other than the children's own family for the purpose of alternative care. The foster family must be previously selected, qualified, approved and supervised for providing such care. In the case of Guatemala, it is the Presidential Secretariat for Social Welfare that has the role and responsibility of selecting, evaluating, and training families who enter the foster care program.

Independent living: The support provided to an adolescent who is in a shelter or orphanage, and who cannot be integrated into a family to make the transition to life outside the institution by his/her own means. Assistance may include timekeeping, budgeting, cooking, job search, counseling, vocational training and parenting. This process is supported by psychology and social work.

Independent Living Plan: It is part of the adolescent's preparation for independent living and includes all aspects in which the adolescent will work to live independently outside the orphanage. Goals are detailed with clear and achievable objectives.

Protective measures for children and adolescents: Protective measures are actions carried out by a competent judge to restore the violated rights of children and adolescents. The application of these measures should consider the needs of the affected person, prevailing those measures that aim to strengthen family and community ties, while respecting their personal and cultural identity.

The Guatemalan Law for the Comprehensive Protection of Children and Adolescents establishes two types of measures according to their functions, purpose, and procedural stage of the case: preventive protection measures and definite protection measures. Preventive or provisional measures are intended to prevent the continuation of the physical or moral harm that the child or adolescent suffers because of a threat or violation of his/her rights. It must be issued immediately after the fact and must always attend the protection of the interests of the child victim over any other interest. An example of a preventive measure is the provisional placement of a child in a foster family or temporary care. Definitive protective measures are issued by the competent Judge for Children and Adolescents and aim to restore the violated right and cease the threat of violation or abuse to which the child is being subjected. The judge applies a definite measure to guarantee that the event that caused the situation is not repeated, but must do a thorough investigation of the particular case and listen to the interested parties, mainly the child affected and the institutions called by the law to intervene in this type of process. An example of a definite measure is the declaration of adoptability.

Reintegration: The process of transition and permanent return of a child to a family (usually of origin), to receive protection, care, and find a sense of belonging and purpose in all spheres of life. It is the process following reunification and implies that an emotional bond has been established between the child and the family, thus, the reintegration has been successful.

Orphanage or Children's Shelter: Care provided in any non-family-based group setting, such as places of safety for emergency care, transit centers in cases of emergencies, and all other short- and long-term residential care facilities, including group homes. In Guatemala, it refers to public or private entities dedicated to protecting children and adolescents whose primary function is to provide them with protection and shelter.

Reunification: It is the physical reunion of a separated child or adolescent with his/her family or previous caregiver. Reunification refers only to the physical return of the child to a family, with the goal of becoming a permanent family.

Search or investigation of family resource: This is the research that a social work professional carries out to find or locate a family member of the child or adolescent who is institutionalized or at risk, and who meets the criteria for taking responsibility for the child. This means that he or she has complied with the pertinent evaluations to shelter and protect the child or adolescent, and that it is possible to construct, or reconstruct an emotional bond.

Self-help groups: Group formed by people who face or have faced the challenges of foster care. They meet to exchange experiences and provide each other moral support. Parallel to the training processes with parents, a self-support group will be created with persons who are willing to participate. The purpose is to create a space for people in similar situations. Psychology and social work professional will guide these groups to ensure the support is effective and relevant to the various care options, and to prepare the families to assume the responsibility for the children.

Therapeutic follow-up of the child or adolescent and families: Part of the follow-up and supervision is the identification of needs for emotional support. During the supervision visits, the psychological support that each family needs will be determined, as well as the frequency of the sessions with the children or adolescents and other family members, to support the reintegration and to identify possible problems in the process of reunification.

EXECUTIVE SUMMARY

Perceptions and realities of the protection system

Guatemala is a country with high levels of poverty and inequality, where wealth is concentrated in few hands. There are major structural problems derived from an exclusionary economic model in which children and adolescents are most vulnerable.

Within this economic model with many shortcomings, we see how poverty affects most of the population and makes families very vulnerable, as they are unable to fill their basic needs, and they reproduce the cycle of poverty from generation to generation. The most important variable for entering the protection system has to do with an individual's position on the social ladder, since in the absence of social policies and State assistance, the poorest families run the greatest risk of separation. Reports of possible violations of rights will be associated with the most excluded people, due to the very selectivity of the system.

Vulnerability is not a casual or fortuitous phenomenon, but a selective event that targets the right victim. Prevention programs must be oriented to counteract these risk variables. In other words, social protection is basic and requires investment in social development programs and access to services.

This report analyzes the results of the Opinion study on knowledge, attitudes and practices on family separation, residential care and alternative family care for children and adolescents conducted by CTWWC to identify opportunities for and threats to paradigm shifts regarding the transition from residential care to alternative family-based care and to diagnose the target groups' perceptions.

This descriptive cross-sectional study includes tri-modal, documentary, quantitative, and qualitative research, and for analytic purposes, it was necessary to subdivide it into the following phases:

- 1. Public opinion survey
- 2. Survey of private orphanages and children's shelters.
- 3. Interviews with key stakeholders related to the investigation's topic.
- 4. Focus group with youth from the "Esperanza de Vida" private orphanage.
- 5. Life stories of individuals who were institutionalized or adopted during their childhood or adolescence.

The results of this study show that the main causes of institutionalization of children and adolescents are associated with poverty. Contrary to what many people think, children living in orphanages or children's shelters are not orphans, but have at least one parent or living relative. Children and adolescents' rights have been violated, but in the social imaginary, there is a stigma that associates them with rebellion, difficult behaviors, and places them almost on the threshold of conflict with the law.

According to the results of the study, it is encouraging to observe that violence against children is considered wrong by most of the population, who rejects physical punishment as a disciplinary mechanism. However, a significant number of children and adolescents enter the protection system because of abuse, probably because of the widespread violence in the country, from which families do not escape.

This is the national context where what is known as the system for the comprehensive protection of children and adolescents is articulated. This system is composed of a series of social policies, which aim to guarantee the fundamental rights of all children and adolescents. It also promotes social assistance policies, which aim to provide family support when detecting any risk of rights violation to prevent the violation from happening.

Additionally, there is a special protection system that should only work in cases where other control mechanisms have failed. However, because of the exclusion mentioned above, many families do not have access to social policies and even less to assistance mechanisms that could strengthen them. In practice, it is found that cases of rights violation, such as lack of access to food or education, enter the special protection system and are "solved" in many instances with institutionalization.

These cases embody the system's failure. For example, the cases in which children or adolescents are admitted due to malnutrition are often not because of negligence on behalf of the parents, but because of a lack of resources; and in fact, the whole family is hungry. However, the complaint is made against the parents and the child is removed from parental care, instead of incorporating the whole family into a food security program. However, there are not enough services to deal with these cases.

The social imaginary considers that the judges must resolve all cases. This is how we have reached a judicialization of social protection, in which violations that should have been addressed by social services or through family strengthening actions are resolved in court, often mandating institutionalization as a protection measure, since the family does not have the tools or support to remedy its problems.

There are many reasons for this dysfunctional system, but the one that stands out is the need for a different approach. Special protection is still seen as charity. There has been some progress towards real comprehensive protection with a rights-based approach, but for a true change of paradigm, there must be a change in the structure through which special protection services are provided. A 180-degree shift in the structure of residential care would be required to strengthen family-based care, either by strengthening the family of origin, or if this is not possible, through alternative family care options.

Another important problem is the lack of leadership in child protection. There are several institutions with mandates to care for children and adolescents, but none of them has the power to lead the transformation process. From the opinion study, there

is no unanimous criteria on whether the Presidential Secretariat for Social Welfare should exercise the steering role, or whether this entity has the political strength to do so.

The budget is another factor that affects the dysfunctionality of the system. Guatemala is one of the countries with the least investment in children and adolescents. The entities that make up the protection system have extremely low budgets, which do not allow them to expand their services. Most services are centralized in the metropolitan area or near large cities, which reproduces exclusion, since in practice services are only available to a few individuals.

The system also has inadequate human resources. The institutions of the protection system need enough specialized and dignified personnel with access to education and training, pre- and in-service induction, as well as job permanence. In other words, there must be a true civil service career based on skills and merit, with the corresponding disciplinary responsibilities and performance control, which allows specialization, personal growth and continuity of the good practices that are being installed.

A care system reform requires the involvement of other stakeholders, some within the State itself, since it is a task that must assumed by social policies. It must involve other Ministries and State Secretariats to have an impact. The Ministry of Public Finance in particular should prioritize caring for the new generations when planning public spending.

It is also necessary to involve local governments, as representatives of the central government in their district, empowering them to map the vulnerabilities or lack of protection in their area, and then organizing the creation of social services in a strategic way, to counteract these vulnerabilities.

The community must be part of this model to be the support network for vulnerable families, and eventually be willing to support a child or adolescent by providing care, but also by having an inclusive disposition toward them. The success of the model requires social cohesion, especially in societies with weak States. The academic sector, international cooperation and the private sector must be incorporated into this effort.

Emphasis must also be placed on the role of mothers and girls in the protection system. Derived from the prevailing patriarchal system, mothers reproduce circles of exclusion and violence for generations. Girls are more vulnerable than boys are and, according to statistics, are more often separated from their families than boys are. Even the residential care model reproduces gender stereotypes, as women are the ones who usually take care of children and adolescents.

Alternative Family Care

When considering childcare reform, we are forced to rethink traditional family models. In contemporary society, the concept of the nuclear family made up of parents and children has changed. What never changes is the importance of establishing solid affective bonds, with at least one stable affective figure, whether there is a blood relation or not.

In the Guatemalan cultural context, there has always been alternative family-based care. Sometimes family members provide it and sometimes not. In some cases, it is temporary, and occasionally, it is permanent. Most of the Guatemalan population has known cases of alternative family-based care and, given the low coverage of the official foster care program, these cases are referred to as informal care.

In multicultural and multilingual societies, which is the case of Guatemala, it is important to recognize the care given by the community. Cohesion in indigenous societies is strong. Cultural rights are part of the fundamental rights of children and adolescents. The cultural practices of indigenous societies are part of their identity and their survival as peoples.

The UN Guidelines for the Alternative Care of Children promote the inclusion of children and adolescents in a formal system that provides the protection and support they need to face the challenges of alternative family-based care, including economic assistance when in the care of relatives. The support must include mechanisms of communication with the children and adolescents to guarantee their wellbeing.

Due to the operational context, it advisable to discuss the alternative care options that are required. The complicated topography of Guatemala, lack of roads and lack of transportation make it difficult for the extended family of a child or adolescent to immediately respond to a call when his/her rights are violated. All stakeholders agree that looking for a family resource is not immediate, and the time needed to evaluate if the family is suitable should be considered.

Therefore, if it is known that these operational procedures will last at least two days, emergency and short-term foster care mechanisms must be considered, and it is recommended that these mechanisms be family-based rather than residential.

According to the opinion study, a high percentage of the population is willing to care for a child or adolescent. This large disposition should be taken advantage of to promote alternative family-based care mechanisms. The main motivation is the desire to help and serve; consequently, many families may be suitable for this purpose. It is also necessary to work with other motivations to put them on the right track; for example, families that wish to have a child should not be foster families, but adoptive families.

No differences were found in terms of gender preference, but there is a marked preference for taking in younger children. This is probably due to stigmas related to bad habits that young people may have picked up, or to the challenges that adolescence implies, since any adolescent, even biological children, will challenge authority. Disability is another challenge, since families may not have the abilities to handle these conditions. Families with special skills are required for special care. The family must be able to adapt to the needs of the child and not the other way around.

Two factors were identified that need to be strengthened to expand foster care: support of the families and economic assistance.

Supporting and providing follow-up to the families is crucial because the challenges of alternative care are different from biological upbringing. For example, it must be possible to address the trauma suffered by children and adolescents, and to know strategies to deal with it. The support must be present especially in moments of crisis, which are not necessarily related to behavior, but to illness or other situations in which the foster family should not be left alone. It also requires the ability to work through the grief of separation. The foster family will always be significant in the child's life, but the care provided will be temporary.

Financial assistance was another constant observed in the study. Once the incidence of poverty in family separation has been addressed, financial assistance must be addressed to promote alternative care. Family members could often achieve foster care if they were given financial support because extended families generally belong to the same economic stratum as the biological family. The costs associated with childcare should not be made invisible; because of Guatemala's poverty rate, money is a constraint on alternative care.

The Presidential Secretariat for Social Welfare's Foster Family Program is not well known amongst the general population. Communication and promotion actions are required to strengthen its recruitment capacity. Operative actions are also needed to increase its capacity to tend to families and follow-up on children and adolescents. Private support is a good option. There are best practices of interventions carried out in the past, which can be replicated today.

For the model to be successful, it must be deconcentrated from Guatemala City. There should be foster families throughout the country, to prevent the child or adolescent from being uprooted from his or her environment, thus weakening his/her bond with the biological family.

According to the opinion study, the general population is willing to consider the creation of a family care model that would be preferable to the residential care model.

Regarding adoption, no significant differences were observed in terms of sex or particular characteristics of the children and adolescents, but there were differences with respect to age. Most families are looking for a small child. It is necessary to raise awareness of the true profile of adoptable children.

A misperception was identified regarding the complexity of the adoption process. Most prospective adoptive parents aspire to a child in its early childhood, which contrasts with reality: most adoptable children are not in this life cycle.; most are actually adolescents.

Residential Care

Orphanages and children's shelters in Guatemala have played an important role in the care of children and adolescents. Most of them are in the hands of private and religious groups. They have come to occupy a space that the State has not been able to cover. Many orphanages have a long history. The vast majority exist before the regulatory law on the matter was passed, and they have had problems adapting to the change from the doctrine of irregular situation to the doctrine of comprehensive protection.

The law on the matter set a deadline for existing orphanages and children's shelters to be registered, an action known as Registration, but did not set a deadline for them to comply with the quality standards required for comprehensive protection. This compliance with standards is called Authorization. Thus, in Guatemala there are some homes that are registered (understood as coming out of hiding), but they have not been authorized, which means they do not meet the quality standards required by the State.

There are no unanimous criteria on whether orphanages are "good" or "bad". It is recognized that many children and adolescents would never have had access to some services if they had not been in an orphanage or children's shelter. However, documented research shows that institutionalization causes serious damage to children and adolescents.

Life in orphanages and children's shelters causes serious damage to the physical and mental development of children and adolescents, including their ability to develop emotional ties in the future. Growing up in institutions reduces life opportunities, causes serious difficulties in integrating into society in the future, and affects the ability to become independent. For this reason, it is important to make the shift towards a familybased care model that replaces residential care.

There is an opening in the road ahead since most of the population believes that, if there is a family, it is preferable to integrate the child into it, instead of sending it to a residential care facility.

The private orphanage directors and children's shelters rate the services they offer as good, being already aware of the importance of family care. The UN Guidelines for the Alternative Care of Children establish that residential care centers should generally aim to provide temporary care for the child and actively contribute to their family reintegration or, if this is not possible, achieve their stable placement in an alternative family environment. This leads us to analyze the challenge of reintegration.

Most of the boys, girls and adolescents who enter an orphanage or children's shelter could be reintegrated into their families, with due accompaniment. Reintegration is possible only if you work with the child and the family. The child must mourn and overcome the situation of violation, but the family needs to change the conditions that caused that violation.

Sometimes families can get ahead simply by having access to social services and support networks, but other times they require attending a parenting school to overcome poor parenting patterns and sometimes they need psychological therapy in order to solve their own internal conflicts or traumas.

This will be a slow process, which requires a lot of accompaniment and support, since a child cannot be returned home if conditions have not changed, nor can the child be expected to change the entire family circle. Not enough resources are allocated to state institutions for this process; therefore, the orphanages and children's shelters play an important role. Orphanage staff are suited for this task because they know the child and the family well.

Support and accompaniment during the reintegration process is especially important, because if a child leaves and then returns, the damage is irreparable. Therefore, a lot of attention should be devoted to following up with the cases.

There will be cases that are exceedingly difficult to reintegrate, such as those involving sexual violence, which in most cases occur within the family.

Each case must be analyzed individually. Those that may not be reintegrated will be the ones who in the future will be served by the adoption system or by an independent life preparation program.

Finally, the transition of orphanage services was addressed. This is the trend within protection systems worldwide. In Guatemala, half of the private orphanages and children's shelters already implement other services in addition to residential care, and some are ambulatory services.

It is a fact that private orphanages and children's shelters assume the role of the State with respect to protection; they are self-financed to provide care to children and adolescents. However, they must comply with the quality standards requested by the State, without receiving any financial assistance from the State to implement the service.

The orphanages and children's shelters have limited financial resources and do not receive any compensation to cover the expenses incurred to answer court hearings, including transportation and food for children and multidisciplinary teams. Limited financial resources are one of the main obstacles to implementing new ambulatory services.

The second challenge is the approach of these services, as growing up within a family is the best option for children or adolescents and an orphanage will never "be" or " replace" a family, even if done with the best intentions.

There are some international examples of service transition experiences, in which the following aspects were relevant:

- a. Develop a transformation plan, together with the staff, that foresees all children being placed in family care. This process should include preparing the children and adolescents, transferring them to their new locations in phases, and monitoring them.
- b. Build and implement an awareness and recruitment plan for alternative foster families.
- c. Involve children and adolescents in the process.
- d. Involve the personnel working in the institution.

Given the debate taking place worldwide regarding the change in the care model, private orphanages and children's shelters are very fearful about how this transition of services will be carried out. They are afraid that homes will be closed and their good work will not be recognized even though there are good practices that are important to take into account.

It is difficult for these institutions to address this issue with their boards of directors and their donors. Many of them receive funding for having children in the orphanage and do not want to lose those resources. They will have to work with their donors to make them aware that they can continue to support the same children with a focus on a family-based comprehensive protection system. Entities need support to explain to their donors that the services must no longer must be residential or institutional, but that it is important to increasingly invest in community services. A lack of confidence in the transition to a family-based care model is common because in doing so, the existence of the orphanage or children's shelters is questioned.

The reality is that, when making the transition to family care, the number of professional for direct care is frequently insufficient to provide a comprehensive and individualized service for children and adolescents, as well as for their families. When institutions decide to start a transformation process, they should try, whenever possible, to offer their staff new job opportunities in the new care modalities, helping them to become certified in new skills.

PRESENTATION

The global initiative "Changing the Way We Care" (CTWWC) promotes childcare reform that seeks safe family-based care for children and adolescents who are institutionalized or at risk of being separated from their families.

The initiative anticipates strengthening family-based care and reforming the national child and adolescent care systems, including family reunification/reintegration, alternative family care and adoption. A consortium made up of Catholic Relief Services (CRS), Lumos, and Maestral International implements it. Currently, it is implemented in Moldova, Kenya, Guatemala, India, and Haiti.

The initiative works towards three objectives:

- Governments promote family care by supporting and improving adopted policies, investing in the workforce, and strengthening the national and community systems.
- Children remain in or return to their families through family strengthening that includes the opinion of children and adolescents, the commitment of the community, as well as monitoring to ensure the reintegration and transition from orphanages to family-based support initiatives.
- Family care is endorsed through global, regional and national advocacy to promote policies, best practices and redirection of resources by multilateral, bilateral, corporate, philanthropic, religious and secular organizations and individuals, thus increasing the number of countries that support family-based care.

The process is based on the United Nations Guidelines for the Alternative Care of Children and provides support to the system for the comprehensive protection of children and adolescents in Guatemala.

In Guatemala, the initiative began its work in October 2018. During its initial stages, it identified the importance of knowing the perception of the general population and key government and civil society stakeholders working in the sector of the comprehensive protection of children and adolescents, family-based care and residential care, as a baseline that would allow the design of future interventions.

Thus, the opinion study on knowledge, attitudes, and practices on family separation, residential care and alternative family care for children and adolescents was carried out. Its objectives were to identify opportunities and threats for a paradigm shift regarding the transition from residential care to alternative family-based care, to diagnose the perceptions of the target groups and stakeholders, and for these data to help CTWWC validate the strategies and intervention actions defined in the care reform proposal promoted by the initiative.

This descriptive cross-sectional study includes tri-modal, documentary, quantitative, and qualitative research. Additionally, for the purposes of analysis, it was necessary to subdivide it into the following phases:

- 1. Public opinion survey.
- 2. Survey of private orphanages and children's shelters.
- 3. Interviews with key stakeholders related to the investigation's topic.
- 4. Focus group with youth from the "Esperanza de Vida" private orphanage.
- 5. Life stories with people who were institutionalized or adopted during their childhood or adolescence.

The general objective was to diagnose the perceptions of the general population, orphanage directors and specialized stakeholders of the protection system of familybased and residential care to identify opportunities and threats to the childcare reform proposal.

In addition, a specific objective was to measure the knowledge of the general population on the unnecessary separation of children and adolescents from their families, their opinions on the sectoral responses to addressing the issue at the national level and, in the event it were favorable to the residential care, make recommendations to focus the paradigm shift.

A first step was the development of the survey instruments and the collection of information for the five phases of the descriptive cross-sectional study for both quantitative and qualitative research.

The data collection for this study was carried out from September 2019 to January 2020. This document contains the results of each phase of the study, as well as a unified analysis of those results.

For this part, the entity Consultoría Interdisciplinaria en Desarrollo, SA, trade name Cid Gallup, was hired for its experience and prestige in preparing and collecting information from all phases of the opinion study. The entity applied the following methodology for data collection:

Documentary research

A desk research method was used to broaden the conceptualization of the analytical framework and define the most appropriate data analysis plan for the development of the consultancy, considering it as a baseline for the definition of tools and fieldwork. This component of the consultancy helped define important information gaps and

made it possible to satisfy information needs by complementing these gaps through the evaluation tools to be executed. Likewise, the historical data helped the consultancy define and identify perceptions, knowledge, and practices on the family separation of children and adolescents whose rights have been violated.

Quantitative research

Public Opinion Survey

- Methodology: Quantitative
- Data collection technique: Personal interviews, face to face, applied with the TADI-Tablet Assisted Interviewing system.
- Geographic Coverage: National
- Questionnaire or collection instrument: Prepared by CID Gallup; reviewed and authorized by CRS representatives. The tool was validated before its application.
- Primary sources of information: Guatemalan men and women 25 years of age and over.
- Sample:
 - o Sampling strategy:
 - Stratified probability sampling; using the statistical formula
 n: N * Z2N * Z2∞p * q * (N-1) + z2∞ * p * q Margin of error: ± 2.8 points on total results. 95% confidence.
 - o Sample size:
 - One thousand two hundred interviews.
 - The data was collected in the 22 departments of the country.
 - In total, 1,411 surveys were conducted, with a slight predominance of female respondents. The mean age of survey respondents is 36 years; however, the most frequent age was 25. Of the sample, 83.5% of the interviewees have children and on average, the number of children is 2.7. Finally, 100% are of Guatemalan nationality.

Census of Orphanages and Shelters

- Methodology: Quantitative
- Data collection technique: Personal interviews, face to face, applied with the *TADI-Tablet Assisted Interviewing* system.
- Geographic Coverage: National
- Questionnaire or Collection Instrument: Prepared by CID Gallup; reviewed and authorized by CRS representatives. The tool was validated before its application.
- **Primary sources of information:** orphanages and children's shelters and adolescents in Guatemala.
- Sample size: Ninety-four surveys.

Qualitative research

- Data collection technique: in-depth interviews, focus group and life stories, the three techniques had audio recording with the prior informed consent of those interviewed.
- Geographic Coverage: National
- **Questionnaire or Collection Instrument:** Prepared by CID Gallup; reviewed and authorized by CRS representatives. The tool was validated before its application.
- Primary sources of information: For in-depth interviews: Key stakeholders related to the issue of children. For the focus groups: Young graduates of the Esperanza de Vida orphanage in Río Hondo, Zacapa and for the life stories, young people contacted by the consultant who were institutionalized or adopted.

After completing the collection of information in January 2020, the information was analyzed with a focus on the doctrine of the protection of children and adolescents and the application of international instruments for the protection of children and adolescents, national legislation and jurisprudence of the Inter-American System for the protection of human rights.

This analysis was approached as a descriptive study of the qualitative and quantitative results of the data obtained, and a correlational explanation of them. This was aimed at explaining the weaknesses and challenges of the child protection system and promoting the discussion on the current child care model and the need for an eventual reform, based on the Guatemalan social reality, recurring variables in the problems of childhood and adolescence, and the need for the existence of a special protection system.

The study addresses the perceptions and realities of the system for the comprehensive protection of children and adolescents in Guatemala and the alternative family-based care system, which includes temporary foster care, adoption and residential care provided by orphanages and shelters.

The applicable doctrine, good practices, national laws, international instruments for the protection of children and adolescents, national legislation, jurisprudence of the inter-American system for the protection of human rights, and comparative law were analyzed. The inputs provided during the socialization of quantitative results with the Presidential Secretariat for Social Welfare, the National Council for Adoptions, The Children's Shelter (El Refugio de la Niñez, in Spanish) and the Association of Christian Orphanages in Guatemala (Asociación de Hogares Cristianos de Guatemala, ASOCRIGUA, in Spanish) were incorporated, as well as feedback from the global CTWWC team.

We thank all the people who collaborated with this study. We place special emphasis on the good work done by CID Gallup Guatemala, as well as all the citizens who took part in the different phases of the study for the trust they have placed in us.