

Closing Cases of Children and Adolescents Reintegrated into their Family and Community Environment in the Demonstration Area

Guatemala Report September 2021







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Lastly, we extend our admiration and respect to the CTWWC psychosocial team for their hard work and commitment in accompanying each family from child identification to reintegration into a family environment.

List of acronyms

Acronym	En español	En inglés
CTWWC	Cambiando la Forma en que Cuidamos	Changing the Way We Care
CNA	Consejo Nacional de Adopciones	National Council of Adoptions
GAC	Directrices sobre las Modalidades Alternativas de Cuidado de los Niños	Guidelines for the Alternative Care of Children
GDA	Alianza Global para el Desarrollo	Global Development Alliance
GDI	Directrices sobre la Reintegración de Niños, Niñas y Adolescentes	Guidelines on Children's Reintegration
GHR	Fundación Gerald y Henrietta Ruaenhorst (GHR)	Gerald y Henrietta Rauenhorst (GHR) Foundation
NNA	Niños, Niñas y Adolescentes	Child (boy and girl) and Adolescent
OJ	Organismo Judicial	Judicial Branch (Body)
PGN	Procuraduría General de la Nación	Guatemala Attorney General
SBS	Secretaría de Bienestar Social de la Presidencia de la República	Secretary of Social Welfare
USAID	Agencia de los Estados Unidos para el Desarrollo Internacional	United States Agency for International Development)

Glossary of terms

Assessment: The process of identifying the specific needs, strengths, and resources of a child and family. An assessment explores a person's socioeconomic status, health status, nutrition, psychosocial wellbeing, emotional status, and education. Each child, as well as the conditions affecting the family, should be evaluated individually. The assessment is conducted by social work and psychology practitioners, who will document and provide evidence that the child and the family are candidates for reintegration, according to the child's best interest.

Best interest of the child: Determining the best interest of the child requires a clear and thorough assessment of the child's identity, especially their nationality, upbringing, ethnic, cultural, and linguistic background, as well as their vulnerabilities and special protection needs.¹ The concept of the child's best interest is flexible and adaptable. It must be determined and adapted to each child's specific and individual needs. The decisions about the child should also be made and assessed on a case-by-case basis.²

Birth family: The child's biological parents and siblings³.

Care plan: It is the process of developing a written plan that outlines how to improve the child's wellbeing and safety and increase the resilience of the child and the family to risks and vulnerabilities. It is based on the child's best interest, the views of the child and the family, and other individuals who are close to the child and the family to support successful family reintegration. The Care Plan shall include goals and actions towards child reintegration into a family.

Case conference: It is a meeting to review and discuss the social and psychological assessments, the services available to the children and the families, and make decisions related to the Care Plan and follow up based on the child's best interest. It is an investigation and learning tool that allows practitioners (phycologists, social workers, educators, and lawyers) to learn about the specifics of a case, identify the child's needs and find options to improve his/her current situation. After an indepth analysis of all the factors, practitioners will select the option in the child's best interest.

Case closure: It occurs after reunification and by providing systematic follow-up to the child in his/her family environment; when based on evidence, the caseworkers are confident that the child's safety and wellbeing are secure. Case closure should only be considered when the objectives agreed in the most recent version of the Care Plan have been met – i.e., when there has been adequate progress against clear benchmarks and where relevant assessments provide evidence that the child is emotionally stable and integrated into the family and community.⁴

Case follow-up: Regular home visits to the child and the family to ensure that the reintegration process serves the child's best interest. Caseworkers review the Care Plan with the child and the

¹ RELAF (2014). International Human Rights Standards Manual Applicable to Migrant Children and Adolescents, Buenos Aires, Page 24.

² UN Committee on the Rights of the Child (2013). General Comment No. 14 on the right of the child to have his or her best interests taken as a primary consideration (art. 3, para. 1).

³ Guatemala's Supreme Court, Agreement 40-2010, "Reglamento para la Aplicación de Medidas de Protección a Niños Privados de su Medio Familiar por parte de juzgados que ejercen competencia en materia de Niñez y Adolescencia Amenazada o Violada en sus Derechos Humanos", Art. 6.

⁴ Guidelines on Children's Reintegration, Inter-agency group on children's reintegration, Op Cit. Page 37.

family, identify needed psychosocial services and link them to service providers. These visits also serve to monitor a child's progress in establishing an emotional connection and reintegrating him/her into the family and to identify challenges. Follow-up will be conducted for two consecutive years.⁵

Case management process: It is the process of organizing, planning, and implementing the work in different stages for prevention, reintegration, and adoption of children deprived of parental care or who are at risk of separation. The first step is to identify a child or adolescent who is vulnerable or whose situation requires support or assistance. Case management involves a practitioner (on social work and psychology) or a team of practitioners assessing the needs of the case and organizing, coordinating, supervising, and defining a package of services to meet the needs of the specific case. It involves the participation of all the organizations working in the child protection system at each stage of the protection process.

Caseworkers: Social work and psychology professionals responsible for coordinating child reintegration process in the demonstration area, conducting assessments and case analysis, linking the child/family with necessary social services and conducting the training process towards reunification. They are also in charge of coordinating with orphanages and partner organizations working towards reunification, such as PGN, SBS and the OJ (Child & Youth Court).

Child (boy and girl) and adolescent or NNA: A child is any human being under 13 years. An adolescent is anyone between the ages of 13 to 17.6

Child protection measures: Actions carried out by a competent judge to reinstate the rights of children whose rights have been violated. The application of the measures will take into account the needs of the affected person, prevailing those aimed at strengthening family and community ties, respecting personal and cultural identity.⁷

The Law for the Comprehensive Protection of Children and Adolescents establishes two types of measures depending on the functions, purposes, and stage of the proceedings of the case in question. Precautionary protection measures and definitive protection measures. The purpose of the precautionary protection measures is to prevent further physical or moral damage to the child caused by a threat or violation of their rights. These must be issued immediately after learning about the event, and the best interest of the child victim must be a primary consideration at all times over any other interest. An example of a precautionary measure is the temporary placement in foster care. The definitive protection measures are determined by the competent Child and Youth Court and are intended to reinstate the right Infringed and stop the threat of the violation or onslaught to which the child is being subjected. The judge applies a definitive measure to ensure that the event that led to the breach is not repeated. However, a thorough investigation of the specific case must be conducted. All interested parties must be heard, especially the affected boy or girl and the state

⁵ Standard Operating Procedures for Reintegrating Children in Residential Care into Family Care – Pilot, Op Cit, Page 9.

⁶ Guatemalan Congress (2003). The Law for the Comprehensive Protection of Children and Adolescents, Decree 27-2003, Article 2.

⁷ Guatemalan Congress (2003). Law for the Comprehensive Protection of Children and Adolescents, Decree 27-2003, Chapter II, Article 111.

duty bearers responsible by law to intervene in this type of process. An example of a definitive measure is when the court declares a child's adoptability.⁸

Children's views: Ensure that the opinion of the child is heard and taken into consideration by the authorities when making decisions and that the child is informed and advised about his/her rights. State parties should ensure the right of the child to be heard, "when the child can form his or her own views." These terms should not be seen as a limitation but as an obligation to the state parties to assess the child's ability to form his or her own opinion as much as possible. This means that state parties cannot act based on the assumption that a child is incapable of expressing his or her views. On the contrary, state parties shall assume that the child can form his or her opinions and recognize their right to express those views. It is not up to the child to prove that capacity before speaking. 10

Child preparation for reunification and reintegration: It is the work conducted to prepare the child for reunification/reintegration with the birth or extended family or before placing them with a foster family. Preparation includes working with children's physical, emotional, social, and relational aspects to prepare them before reunifying them with the family and community and conducting activities to disconnect them from the orphanage and link them with the family with whom they will be placed/reunited.

Extended family: It includes a person's relatives outside the birth family, related by blood or affinity, or a person who maintains the equivalent of a family relationship with the child whose rights have been threatened or infringed based on national and community cultural practices and customs.¹¹

Family tracing: Planed investigation and search activities conducted by a professional social service worker or PGN investigator to locate the birth or the extended family of a child who is currently living in residential care. The existing family care option must meet the principle of suitability and comply with the relevant assessments to shelter and protect the child and provide evidence of their ability to build/rebuild the bonds or relationships with the child.

Family preparation for reunification and reintegration: Orientation provided to the birth or extended family that will receive a child/adolescent. Foster care families are also prepared before child placement. Caseworkers prepare families socially and emotionally and with actions to protect the child's physical and emotional integrity and strengthen parenting capacities needed for reunification. They should also consider the child's life cycle and development stages, always seeking a sustainable and healthy reintegration.

⁸ Universidad de San Carlos de Guatemala, Facultad de Ciencias Jurídicas y Sociales (2008). "Análisis jurídico de los aspectos negativos del internamiento de niños y adolescentes en un centro estatal de protección y abrigo cuando no se especifican legalmente las circunstancias particulares de cada caso concreto" Alegría Hernández Jeammy Corina, (2008), Page 45.

⁹ UN General Assembly (2010). Guidelines for the Alternative Care of Children Op. Cit. 103, b, Page 17.

¹⁰ The Committee on the Rights of the Child (2009). General Comment No. 12. "The right of the child to be heard" Geneva, Page 9.

¹¹ Guatemala's Supreme Court, Agreements 40-2010, Op. Cit. Art 8.

Identification: It is the first step of case management. It encompasses identifying children who will go through an assessment and eligibility process for reintegration. Identification is based on a specific profile. The child must comply with certain criteria that include age, the reason for entering the orphanage, and family situation.¹²

Orphanage: Per the United Nations Guidelines for the Alternative Care of Children, this term refers to "residential care" for children provided in any non-family-based group setting, such as safe places for emergency care, emergency transit centers, and other short and long-term residential care facilities, including orphanages.¹³ In Guatemala, it refers to public and private institutions whose main role is to provide child protection and shelter.¹⁴

Reintegration: The process of a separated child or adolescent making what is anticipated to be a permanent transition back to his or her family (usually of origin), to receive protection and care, and to find a sense of belonging and purpose in all spheres of life. It is the process that takes place after reunification, and it means that a stable emotional connection has been established between the child and the family and that a healthy and sustained reintegration has taken place.¹⁵

Reunification: The physical reuniting of a separated child and his or her family or previous caregiver. It only refers to the physical reunion, always seeking a permanent family for the child.¹⁶

United Nations Guidelines for the Alternative Care of Children: Desirable orientations for policy and practice to promote the implementation of the Convention on the Rights of the Child and of relevant provisions of other international instruments regarding the protection and wellbeing of children deprived of parental care or who are at risk of being so.¹⁷

¹² Standard Operating Procedures for Reintegrating Children in Residential Care into Family Care – Pilot, Components of Case Management, February 2017, page 9.

¹³ UN General Assembly 2010 "Guidelines for the Alternative Care of Children," Scope of the Guidelines, section IV, Page 7.

¹⁴ Guatemala's Supreme Justice, Agreement 40-2010 "Reglamento para la Aplicación de Medidas de Protección a Niños Privados de su Medio Familiar por parte de juzgados que ejercen competencia en materia de Niñez y Adolescencia Amenazada o Violada en sus Derechos Humanos", Article 11. Page 4

¹⁵ Inter-agency Group on Children's Reintegration (2015). Guidelines on Children's Reintegration, Page 7.

¹⁶ Standard Operating Procedures for Reintegrating Children in Residential Care into Family Care – Pilot, Op Cit, Page 10.

¹⁷ UN General Assembly (2010). Guidelines for the Alternative Care of Children: Resolution adopted by the General Assembly, February 24, 2010, A/RES/64/142, Page. 1.

Presentation

<u>Changing The Way We Care</u> (CTWWC) - Cambiando la Forma en Que Cuidamos is a global initiative designed to promote safe family care and prevent unnecessary child-family separation. It includes strengthening families and reforming national systems for the protection and care of children, including family reunification and reintegration, and the development of alternative family-based care (in line with the United Nations Guidelines for the Alternative Care of Children). ¹⁸

The CTWWC initiative is a consortium formed by Catholic Relief Services and Maestral International through a Global Development Alliance (GDA) and with the support of three donors (McArthur Foundation, USAID, and GHR Foundation). CTWWC is operating in a context of growing interest in care reform and as a result of a growing global understanding that institutional care of children is a significant problem that will be best addressed through collaboration between national, regional and global stakeholders to develop alternative care systems supportive of family care.

CTWWC began demonstration interventions in Kenya and Guatemala and regional and global influence work in October 2018. In 2019, the CTWWC Board of Directors renovated its commitment to implement the initiative in seven demonstration countries. During implementation year two, interventions extended to Haiti and India based on SRI seed funding, a fundraising strategy that includes eventual intervention in Lebanon and Indonesia.

Changing the Way We Care has three main strategies: 1) Governments promote family care through the improvement and implementation of policies; workforce investment on social workers, therapists, and other social service staff; and national and community systems serving vulnerable children and families; (2) Children stay or return to families through various family strengthening interventions that consider the child's opinion, the engagement of the local community, and the transition of orphanages into family care initiatives; and 3) Family care is promoted globally through global, regional and national advocacy to advance policies, best practices and the redirection of resources by multi-lateral, bilateral, corporate, philanthropic, faith-based and secular organizations and individuals, increasing the interest of other countries to support family-based care. The global effort will use learning and evidence from CTWWC demonstration countries and other countries going through similar reforms to influence policies and practices that lead to redirection of funding to support family care over institutions.

 $^{^{18} \} UNGA \ (2010). \ Directrices sobre las \ Modalidades \ del \ Cuidado \ Alternativo \ de \ los \ Niños. \\ \underline{https://bettercarenetwork.org/spanish-section/marco-internacional/directrices/directrices-sobre-las-modalidades-alternativas-de-cuidado-de-los-ni%C3\%B1os$

Background

In January 2019, CTWWC began advocacy efforts to sign a collaboration agreement with the Secretary of Social Welfare (SBS), officially signed on March 27, 2019. Signing parties agreed to work with the Special Early Childhood Protection Program (Temporary Early Childhood Orphanage in Zacapa) to implement the case management methodology for child reintegration. They focused on children originally from the Zacapa department, CTWWC demonstration area, to implement best practices to prevent unnecessary child-family separation and strengthen families by identifying and coordinating with general and specialized social services and bringing those services closer to the families.

From June to November 2019, CTWWC caseworkers analyzed, assessed, and investigated the files of the children living in residential care in the Temporary Early Childhood Orphanage in Zacapa. They started working on several cases based on the methodology described in more detail in the Application of the Case Management Methodology Process developed in 2020¹⁹. They also conducted trainings on the case management methodology in Zacapa.

In January 2020, CTWWC psychosocial team identified five more cases of **17 children** (8 girls and 7 boys from ages 3-16) through the privately-run orphanage **Esperanza de Vida** in Zacapa. Caseworkers began working these cases through the case management process. Thus far, **11 out of these 17 children** have reunified with their birth or extended family, two children were prevented from separation from their family, and the last case of four siblings did not end in reintegration despite caseworkers' accompaniment and family preparation for 20 months. First, because the children did not wish to return to their family and the Child and Youth Court prioritized their opinion after the family failed to make the changes related to household hygiene or relocation that the judge had requested. Second, caseworkers identified security issues in the neighborhood where the family lived, which added to the little willingness of the family to care for their children, represented a high risk for the children to stay with them. No other family option was found, so these four children continue living in the orphanage. In the end, four out of the five cases found through Esperanza de Vida residential facilities were closed.

Below is a summary of the **closure of 12 cases (15 boys and 9 girls)** of the 13 cases identified in 2019 and 2020 in the Temporary Early Childhood and the Esperanza de Vida orphanages in Zacapa. Using the case management process (which included an in-depth analysis of the Care Plans, follow-up forms, and the reintegration criteria), caseworkers determined that reintegrating 24 children into their family environment was feasible as they provided a safe and stable place for their emotional and physical development. As explained above, caseworkers exhausted family tracing efforts for one case, so four siblings were not reunified with their family.

 $^{^{19}\,}CTWWC, Vanesa\,Guillermo.\,2020.\,https://bettercarenetwork.org/library/principles-of-good-care-practices/leaving-alternative-care-and-reintegration$

Implementation of the case management methodology towards a sustainable reintegration

Caseworkers used the CTWCC case management methodology for all cases documented in this report to prevent separation and reunifying and reintegrating children deprived of parental care or at risk of separation.

The first step is to identify a vulnerable child or whose situation requires support or assistance, whether in residential care or in a family environment where he/she is at risk. Case management involves a practitioner or group of practitioners assessing the needs of the case and organizing, coordinating, supervising, and defining a package of services to meet the needs of the specific case. It involves the participation of all the duty bearers working in the child protection system.

In Guatemala, the case management process encompassed nine phases: 1) Identification of the child; 2) Assessment of the child; 3) Family tracing and assessment; 4) Developing a care Plan; 5) Preparing the child and the family for reunification; 6) Reunification; 7) Case Follow-up; 8) Reintegration, and 9) Closure.²⁰ Each of these steps included a series of activities that allowed caseworkers to support the children reunification and reintegration to safe and stable family environments. After two years of periodic follow-up and assessment in case conferences, caseworkers determine their reintegration and closure.

Reintegration is what is anticipated to be a permanent transition back to the child's family and indicates that the child and the family have built a healthy emotional connection. It takes place after the reunification, and it is the completion of accompaniment and counseling to strengthen positive parenting practices. It indicates that the reintegration benchmarks included in the Care Plan have been met.²¹ Caseworkers determine which case can be closed after verifying that children's rights have been reinstated through accessing health and education services and positive parenting. It occurs when there is no threat to the violation of their rights and when the child is ready to develop in a safe and sustainable family environment and when case management support is no longer needed.

Caseworkers use the following criteria to guide care planning, provide follow up to families and determine case closure when the time comes:²²

- **1. Protection and safety**: Children and caregivers' level of protection and safety from violence, exploitation and neglect. Case closure meant analyzing the family and community environment, ensuring the child's inclusion for their healthy development.
- **2. Heath and development**: Children's physical health in terms of nutrition, access to healthcare, food intake, and cognitive changes that characterize normative and social development according to his/her development stage. Caseworkers monitored if families were attending the social services

²⁰ CTWWC, Vanesa Guillermo. 2020. https://bettercarenetwork.org/library/principles-of-good-care-practices/leaving-alternative-care-and-reintegration

²¹ Ibid

²² CTWWC, Vanesa Guillermo. 2020. https://bettercarenetwork.org/library/principles-of-good-care-practices/leaving-alternative-care-and-reintegration, Page 39.

that they were referred to and the proper provision of the services. At times, it was necessary to coordinate directly with health providers.

- **3. Child-primary caregiver healthy relationship**: Children's relationship and attachment with their caregiver/mentor or family care option. This is a crucial factor for child-family reintegration and is one of the key elements to ensure a child's protective, safe and reliable setting. Caseworkers verified the child's significant progress in developing an attachment with his/her primary caregiver in all cases presented in this report.
- **4. Psychosocial wellbeing and community belonging**: Children's and caregivers' psychological health and wellbeing, and socio-emotional functioning, including self-esteem, resilience, and belonging. This is a fundamental factor throughout the process, ensuring that the child feels welcomed and included not only in a family but in the wider community and raising awareness with key community members to protect children against potential stigma.
- **5. Education & Training**: It includes children's access, enrollment and attendance, and transition to school. This entitled finding schools accessible to families and raising the awareness of school authorities to allow children to attend school outside regular enrollment dates and despite COVID-19.
- **6. Households Economy**: It relates to caregiver/family's ability to meet the household members' unexpected urgent and basic needs. CTWWC assisted all families in developing a plan of economic opportunities where they described the income-generating projects that they could start. Although not all families could carry out productive activities, the majority made essential changes to their lifestyle, contributing to successful reintegration.

The reintegration benchmarks are a key and cross-cutting piece in the case management process. They are a fundamental part of the assessments, care planning, follow-up, and accompaniment based on the goals set by the families and the children, depending on their age and evolving capacity. These criteria inform the case closure phase.

Follow-up activities for reintegration

During the first round of case closure, 24 children and adolescents went through the entire case management process and achieved a safe and sustainable reintegration. In most cases, caseworkers provided follow-up for over two years to prevent secondary separation. This included referring children and families to social services, guidance on positive parenting practices, psychosocial assistance, and household economic support. Main activities included:

- Therapeutic follow-up: Each of the cases that achieved successful child reintegration received specialized therapeutic follow-up by CTWWC psychosocial teams in collaboration with other organizations such as the SBS' departmental offices.
- Customized guidance on positive parenting: CTWWC provided families with positive and assertive parenting advice during follow-up. Caseworkers prepared families before and after reunification, which included guidance on assertive discipline and discussion about the child's life cycle and development stages to provide them with more tools for adequate child care and protection practices.
- Plan of economic opportunities: CTWWC helped families develop a plan of economic opportunities based on their own ideas and proposals to improve household income and administer their funds

more effectively. Some families were very interested in starting their own small business, while others prioritized making improvements in their homes so that the children feel more comfortable.

- Income-generating projects: The idea for these projects came from the families and as a result of the plan of economic opportunities. They were designed based on the preferences and skills identified in each family. Some families decided to start with a small chicken farm, while others purchased kitchen equipment to prepare and sell food. Other families began selling food items in their communities.
- **Subsidy:** CTWWC provided families with pre-paid cards that can be redeemed for groceries and other food items. This allowed some families to save funds they would generally use to buy food and use them for their plan of economic opportunities/income generation projects.
- Identification and referral to social services: CTWWC caseworkers mapped the social services available in the communities of reintegration, contacted the service providers, and linked families to those services, primarily related to health and education.
- Family strengthening social services: Caseworkers referred families to social services specific to their situation and the cause for separation. This included guidance on positive parenting practices and psychological support to strengthen the relationship and attachment to their children.
- Support for school insertion or re/insertion: Several of the children included in this case closure report were behind in their studies when this process began. Caseworkers identified schools accessible to the children and made the necessary arrangements to enroll them or looked for out-of-school education alternatives in their communities. They also spoke up with school authorities to ensure their inclusion in their facilities. During the COVID-19 pandemic, caseworkers provided guidance and follow-up to families to support their children with the guides provided by the school authorities. These guides include the school work students need to complete every week and submit as part of the remote school activities the following week.
- Referrals to health services: CTWWC social workers and psychologists coordinated and linked families with the relevant health services. In some cases, this support was crucial to make a safe and sustainable reintegration possible. During COVID-19, caseworkers also provided information, guidance, and hygiene supplies (masks, hand sanitizer, alcohol wipes) to families to promote healthy household and protective practices.
- Nutrition guidance: Based on the medical history included in the case files, CTWWC social
 workers and psychologists identified the families that needed nutritional support and
 referred them to specialized nutrition recovery centers/services.
- Coordination for interinstitutional support: The case management team coordinates with the organizations working in the child protection system (Guatemala's Attorney General, the Judicial Branch, and the National Council of Adoptions), as well as with schools, RENAP National Registry, public and private orphanages, the local government and the Catholic Church to link and bring services closer to the families. To strengthen coordination and deliver services in a more integrated manner, in 2019 and 2020, CTWWC coordinated with the Secretary of Social Welfare to implement the case management process and a roadmap for follow-up and referrals with SBS's Department of Special Early Childhood Protection and departmental offices.

Case closure occurs based on the analysis of the specific situation and progress made in each case, when the caseworkers determine that the child's rights have been reinstated, when an emotional attachment between the child and the family has been established, when the child has remained within the family without any risks and when there is evidence of significant progress in meeting the reintegration criteria and the goals of the Care Plan, then, only then, it is possible to propose the closing of the case due to reintegration.

Case closure encompasses a series of steps to ensure the child and family's wellbeing once the case management accompaniment ends. Below is a summary of these steps and information about the cases closed.

- a. Case analysis against reintegration criteria (Care Plan and follow up): As they monitored the child and the family during the home visits and as families made progress towards the goals set in the Care Plan, the psychosocial team analyzed each case to identify progress in achieving each of the reintegration benchmarks prioritized for each particular case.
- b. Case conferences to analyze the achievement of the goals set in the Care Plan: CTWWC organized case conferences with the psychosocial team to discuss and analyze each case and determine the pending actions and when would it be appropriate to begin preparing the family and the children for the case closure and set a tentative date for it. Both the case analysis and conferences began four months before the date set for the case closure.
- c. Preparing families for the case closure: Once CTWCC caseworkers determined that the priority reintegration benchmarks had been met and the tentative dates for closure had been set, they informed the families that the case management assistance would be ending and started preparing the families and the children for case closure. In addition, 12 of the cases proposed for case closure already had a file archived at the Child/Youth Court, which meant that when the case was closed due to reintegration, they would too be closed legally at the child protection system. Caseworkers prepared families for four months before case closure, stressing the significant work they did during the case management process and their strengths while encouraging them to continue loving their children and applying the improved child care practices on their own.
- d. Case closure forms: To register the case closure, caseworkers used a checklist to verify the actions taken with each case and provided evidence of the progress made by the child in his/her Care Plan and a case closure form that included the date of the most recent visit made and the reason for the closure. It also has a caregiver feedback form used to inform the caregiver about the closure of the case and where he/she provides his/her opinion about the case management services received. All these forms are kept in each case closure file.
- e. Inform duty bearers (PGN, SBS, OJ) about the cases to be closed: For CTWCC is truly important to inform the organizations working in the child protection system about the cases where CTWWC accompaniment will end. Hence, CTWWC organized a meeting with all the organizations involved (PGN, SBS, and OJ) to present and discuss each case and the progress made in the past two years, stressing the interinstitutional coordination which contributed to attaining significant achievements in the lives of these children and families.
- f. Transferring complete electronic case files to SBS, PGN and OJ: As one of the last steps of the process, CTTWC transferred a digital copy of all case files worked through the CTWWC case management process to the organizations of the protection system involved in Zacapa: The Director of the Temporary Early Childhood Orphanage of the SBS, the departmental

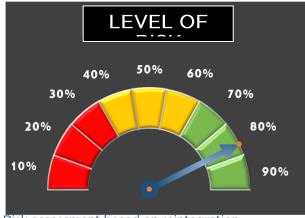
delegate of the Attorney General's Office, and the social workers of the Child and Youth Court of the OJ. The entire child's case file includes all documents about the child and their families, from the identification of the case to its closure. A hard copy of the file will be transferred after CTWWC completes its intervention in the demonstration area. These will be useful when and if there is a need to monitor these cases again in the future.

Breakdown of Cases

Below is a list of the children who were reintegrated into a family environment during the first phase of case management (coincidentally, the reason for admission to the residential care for most of them was neglect). During this process, caseworkers realized that these families needed family strengthening support, access to social services, and guidance on positive parenting skills. Children's institutionalization could have been avoided had they received this type of support from the start. Interestingly, all these children already had a file archived in the Child/Youth Court of the OJ, but that was not enough to determine that a safe and sustainable reintegration had occurred. Therefore,

CTWWC decided to continue supporting the families until the case met CTWWC criteria for a safe reintegration.

Caseworkers conducted case conferences to determine families' level of risk by analyzing each dimension of the reintegration criteria and by assigning a score from 1 to 5 to each benchmark of the each being analyzed: 1 means the benchmark has not been achieved; 2 means it is starting to, 3 means is in the process; 4 means there is progress and 5 means that the benchmark has been met. This gives an average score per case, facilitating the decision to observe what cases are ready for closure and which cases need monitoring or follow-up for a longer time. In the chart, red represents a high-risk level and green a low-risk level. All the cases presented below have a low-risk level, not only because they received accompaniment and follow-up but because the families complied with the actions set in the Care Plan and the reintegration benchmarks.



Risk assessment based on reintegration benchmarks 2021.

#	Reason for admission to the protection system	Sex	Age	Date and Place of Birth	Current Location	Schooling Level	Type of Care	Age of the caregivers	Case Status	Follow up	Family Strengthening Actions
1	Neglect	F	13	10/21, 2008 Morales, Izabal	Morales, Izabal	3rd Grade	Birth family	49	Case file archived in Child & Youth Court. Case closure by CTWWC.	2 years and 2 months after case identification	 Home visits, guidance for improving parenting skills. Parents showed being more assertive in their parenting practices with their daughter. Guided parents to respect the rights of their girl by reinstating her right to education. Advice to parents to protect and meet the basic needs of their daughter Referred family to social services and coordinated with education and health providers Guidance for improving housing arrangements

#	Reason for admission to the protection system	Sex	Age	Date and Place of Birth	Current Location	Schooling Level	Type of Care	Age of the caregivers	Case Status	Follow up	Family Strengthening Actions
											Received six pre-paid cards
2	Neglect	F	10	07/24/2012 Puerto Barrios, Izabal	Rio Hondo, Zacapa	First Grade	Birth family	24	Case file archived in Child & Youth Court. Case closure by CTWWC.	2 years and 2 months after case identification	 Home visits, counseling to mother and stepfather to improve parental practices. They showed being more assertive in their parenting practices. Couples therapy to strengthen the relationship of the children's caregivers Guidance to meet children's needs related to
3	Neglect	F	6	11/16/2015 Puerto Barrios, Izabal	Rio Hondo, Zacapa	N/A	Birth family	24	Case file archived in Child & Youth Court. Case closure by CTWWC.	2 years and 2 months after case identification	 affection, protection, security, and other rights Coordination with education and health providers for services referral Guided parents to access social services when they need them. Guidance for implementing an economic
4	Neglect	M	8	01/29/2014 Morales, Izabal	Rio Hondo, Zacapa	First Grade	Birth family	24	Case file archived in Child & Youth Court. Case closure by CTWWC.	2 years and 2 months after case identification	opportunity Provision of ten pre-paid cards.
5	Neglect	M	4	04/20/2017 Morales, Izabal	Rio Hondo, Zacapa	N/A	Birth family	24	Case file archived in Child & Youth Court. Case closure by CTWWC.	2 years and 2 months after case identification	
6	Neglect	F	8	02/07/2013 Rio Hondo, Zacapa	Rio Hondo, Zacapa	First Grade	Extended family	29	Case file archived in Child & Youth Court. Case closure by CTWWC.	2 years after case identification	 Home visits Guidance to uncle and wife to improve their parenting practices. They showed being more assertive in their interactions with their nephews. Guidance to protect and meet children's basic needs
7	Neglect	M	6	10/12/2015 Rio Hondo, Zacapa	Rio Hondo, Zacapa	N/A	Extended family	29	Case file archived in Child & Youth Court. Case closure by CTWWC.	2 years after case identification	 Coordination with the school, health center and RENAP National Registry to provide services to families to reinstate children's rights. Guidance for implementing an economic opportunity Provision of ten pre-paid cards

#	Reason for admission to the protection system	Sex	Age	Date and Place of Birth	Current Location	Schooling Level	Type of Care	Age of the caregivers	Case Status	Follow up	Family Strengthening Actions
8	Maltreatment and Neglect	M	5	07/17/2016 Zacapa, Zacapa	Esquipulas, Chiquimula	N/A	Extended family	46	Case file archived in Child & Youth Court. Case closure by CTWWC.	2 years after case identification	 Home visits Guidance to the caregiver to improve parenting skills, child care practices and protection for the child and the rest of her grandchildren Guidance to protect, show affection and meet the basic needs of the child Guidance for accessing social services Guidance for implementing an economic opportunity. The family put a down payment for a lot to build a house Provision of seven pre-paid cards
9	Neglect	M	9	04/09/2012 Zacapa, Zacapa	Zacapa, Zacapa	Second Grade	Extended family	63	Case file archived in Child & Youth Court. Case closure by CTWWC.	2 years after case identification	Home visits Guidance for household hygiene and order Received information on how to access social services Coordination with school authorities Guidance to strengthen emotional attachment with the child, strengthen parenting skills, and recognize children's rights Guidance to reinstate the infringed right and respect other child's rights Provision of ten pre-paid cards
10	Neglect and negligent treatment	M	14	07/25/2007 Zacapa, Zacapa	Zacapa, Zacapa	Fourth Grade	Birth family	41 and 42	Case file archived in Child & Youth Court. Case closure by CTWWC.	2 years after case identification	 Home visits Guidance to parents to improve parenting skills. Parents showed being more assertive in their parenting practices. Guidance to meet children's needs related to affection, protection, security, and other rights. Coordination with school authorities to reinstate the child's right to education Guidance for accessing other social services when
11	Neglect and negligent treatment Neglect and	M	12	09/22/2009 Zacapa, Zacapa	Zacapa, Zacapa	Third Grade	Birth family Birth family	41 and 42	Case file archived in Child & Youth Court. Case closure by CTWWC.		they need them. Guidance for implementing an economic opportunity Provision of ten pre-paid cards

#	Reason for admission to the protection system	Sex	Age	Date and Place of Birth	Current Location	Schooling Level	Type of Care	Age of the caregivers	Case Status	Follow up	Family Strengthening Actions
	negligent treatment			Zacapa, Zacapa	Zacapa	Grade			archived in Child & Youth Court. Case closure by CTWWC.		
13	Neglect	M	9	09/01/2012 Zacapa, Zacapa	Zacapa, Zacapa	Third Grade	Birth family	39	Case file archived in Child & Youth Court. Case closure by CTWWC.	2 years after case identification	 Home visits Guidance to parents to improve parenting skills. Parents showed being more assertive in their parenting practices and loving correction. Guidance to meet children's needs related to affection, protection, security, and other rights.
14	Prevention for risk of neglect	M	16	03/15/2005 Zacapa, Zacapa	Zacapa, Zacapa	First grade	Birth family	39	Case closure by CTWWC. Case did not reach the Child & Youth Court.		 Coordination with school authorities and CONALFA to reinstate children's right to education Guidance for accessing other social services when they need them. Guidance for implementing an economic opportunity Provision of ten pre-paid cards
15	Neglect	F	8	08/14/2013 Guatemala, Guatemala	Teculutan, Zacapa	First Grade	Birth family	34	Case file archived in Child & Youth Court. Case closure by CTWWC.	2 years after case identification	 Home visits Guidance to mother to improve parenting skills and recognize the rights of her daughters Guidance for child care, attention and protection of her children and to reinstate their right to identity and education
16	Neglect	F	6	10/25/2015 Guatemala, Guatemala	Teculutan, Zacapa	Preschool	Birth family	34	Case file archived in Child & Youth Court. Case closure by CTWWC.		 Guidance to protect, show affection and meet the basic needs of their children Coordinate with school authorities and health post to facilitate access to services Guidance to strengthen emotional attachment to her children Guidance for implementing an economic opportunity Provision of ten pre-paid cards

#	Reason for admission to the protection system	Sex	Age	Date and Place of Birth	Current Location	Schooling Level	Type of Care	Age of the caregivers	Case Status	Follow up	Family Strengthening Actions
17	Neglect	F	5	02/05/2016 Zacapa, Zacapa	Zacapa, Zacapa	N/A	Extended Family	56	Case file archived in Child & Youth Court. Case closure by CTWWC.	1 year and 3 months	 Home visits Guidance to aunt to improve her parenting skills. She shows more assertive parenting practices. Guidance to protect and meet the basic needs of her niece Guidance to recognize the child's rights and strengthen emotional attachment to her niece Guidance on how to access social services Guidance for implementing an economic opportunity Provision of ten pre-paid cards
18	Neglect	M	4	07/13/2017 Zacapa, Zacapa	Zacapa, Zacapa	N/A	Birth family	39	Case closure by CTWWC.	It started on March 4, 2020, and closed on September 7, 2021. (1 year and 6 months)	 Home visits Guidance to mother to improve her parenting skills Guidance to protect and meet the basic needs of her child Guidance to recognize the rights of her child and to strengthen her emotional attachment to him Guidance for accessing social services Provision of nine pre-paid cards
19	Neglect	M	12	03/08/2009 Zacapa, Zacapa	Zacapa, Zacapa	Second Grade	Birth family	41	Case file archived in Child & Youth Court. Case closure by CTWWC.	Case identified in January 2020 and was closed in August 2021 (1 year and y 7 months)	 Home visits Guidance to mother to improve parenting skills. She shows to be more assertive in her parenting skills. Guidance for improving household hygiene Advice to protect, show affection and meet the
20	Neglect	М	10	07/20/2011 Zacapa, Zacapa	Zacapa, Zacapa	Second Grade	Birth family	41			basic needs of their children Guidance to protect and meet the basic needs of her children
21	Neglect	F	7	04/07/2014 Zacapa, Zacapa	Zacapa, Zacapa	First Grade	Birth family	41			 Guidance to recognize the rights of her children and reinstate their right to education Coordination with the health center and the local
22	Neglect	М	15	06/18/2006 Zacapa, Zacapa	Zacapa, Zacapa	First Grade	Birth family	41			school to facilitate access to services Guidance for implementing an economic opportunity
23	Neglect	М	18	04/28/2003 Zacapa, Zacapa	Zacapa, Zacapa	First Grade	Birth family	41			Provision of ten pre-paid cards

#	Reason for admission to the protection system	Sex	Age	Date and Place of Birth	Current Location	Schooling Level	Type of Care	Age of the caregivers	Case Status	Follow up	Family Strengthening Actions
24	Neglect	M	14	09/01/2007 Zacapa, Zacapa	Zacapa, Zacapa	Second Grade	Extended family	62 and 55	Case file archived in Child & Youth Court. Case closure by CTWWC.	The case was identified in January 2020 and it was closed in August 2021 (1 year and 7 months of follow up).	 Home visits Advice to grandparents to improve parenting skills. They demonstrate being more assertive in their parenting skills. Guidance to protect and meet the basic needs of their grandson Guidance to recognize the rights of their grandson and reinstate his right to education Coordination with the local school to facilitate the child's enrollment Provision of ten pre-paid cards
25	Neglect and negligent treatment	F	12	06/11/2009 Zacapa, Zacapa	Zacapa, Zacapa	Fourth Grade	Residential care	N/A		It started on January 14, 2020, and it was	Psychosocial evaluation of the children living in the household Family tracing (birth and extended family)
26	Neglect and negligent treatment	F	9	10/18/2011 Zacapa, Zacapa	Zacapa, Zacapa	Third Grade	Residential care	N/A		closed on September 7, 2021 (8-month	 Direct support to birth family so that they could follow the recommendations given by the Child and Youth Court to return the children to their
27	Neglect and negligent treatment	F	8	07/06/2013 Zacapa, Zacapa	Zacapa, Zacapa	First Grade	Residential care	N/A	Case closure by CTWWC.	follow up)	 care Coordination with PGN to collaborate in family tracing. However, they could not locate another
28	Neglect and negligent treatment	М	7	08/16/2014 Zacapa, Zacapa	Zacapa, Zacapa	Preschool	Residential care	N/A			family option. Caseworkers agreed that the birth mother is not a suitable care option for the girls. Therefore, the girls stayed at the Paraíso Infantil orphanage.

Families and children's progress in achieving the goals of the Care Plan and current reintegration status

A brief description of each case and its reintegration status is presented below. This includes the changes made by each family to achieve a safe and sustainable reintegration based on CTWWC reintegration benchmarks.

Case 1: The girl was separated from her parents for several months due to a situation interpreted as negligence. After a case management process, the child was reunited with her birth family. Caseworkers provided follow up, which was later done remotely due to COVID-19. The family was able to reinstate the rights that had been infringed, especially regarding her access to education. The right to education was also restored for the other children living in the household. Her family made changes in the household to make it safe for all the members of the family.

"I am very satisfied. You never left us. Your support helped me and I am very thankful for it." Marta Ramírez Méndez.

Case 2: Four siblings were put in residential care after her mother failed to look after them when she gave birth to their youngest sibling. She did not have anybody to look after her kids or access to daycare, so she left her four children alone when she went to the hospital to have a baby. This was enough to be separated from her children for several months. With CTWWC caseworkers' accompaniment and follow-up, the family made some changes and reinstated children's right to protection and safety. Today, all the children are in school, and the parents received emotional support to take better care of their children. With CTWWC's economic support, the family started selling bread in their house, which was crucial to increase their income, especially during and after the COVID-19 pandemic.

"When they came and interviewed us to learn about our little business of selling bread, we felt important. We felt we were doing a good job with our children" Alfonso, father of the children.

Case 3: Two siblings (boy and girl) were separated from their birth family for infringing their identity rights. In addition, during the investigation, caseworkers found that the mother was not a suitable caregiver for them. CTWWC located a family option within the extended family. After reunifying the children with their uncle and aunt, caseworkers began establishing an emotional attachment between the children and their uncle and aunt. Caseworkers guided the family about the children's development stage so that they knew how to support their physical and emotional needs. CTWWC provided the extended family with economic support that they used to start a small chicken farm, which helped them generate some funds.

"What impacted me more about the follow-up support I received was all the tips to take care of my nephews. We are thrilled to have them with us." Alejandro, children's uncle.

Case 4: This is one of the most complex cases. A child was placed in residential care twice. The first time, one of his parents was incarcerated, and the second time, he received maltreatment from an extended family. CTWWC conducted a comprehensive investigation and located a distant relative, whom the Child and Youth Court accepted as extended family. After reunification, caseworkers prioritized helping build an emotional attachment between the relative and the child and supporting the new caregiver in the entire process. After two years of providing accompaniment, follow up and preparation, we can say that the child has formed an emotional attachment to the caregiver and the other members of her family. The economic support provided by CTWWC helped them move to another house with better conditions for the family.

"Thank you for all the support and accompaniment. Your help, your tips, thank you for everything. You have been very helpful" Reyna Bartola Peña.

Case 5: The child was separated from his family due to poor personal hygiene and lousy household hygiene. CTWWC investigated the case and realized the birth family was not a potential care option but located a caregiver in the extended family already considered by a Child and Youth Judge as a possible care option due to her emotional attachment with the child.

Caseworkers began a series of actions to support both the birth and extended families. They guided the birth mother to improve the household conditions, but the birth family did not make many changes. An attempt was made to have the child live with them again, but it did not work out. At the same time, caseworkers provided orientation to the new caregiver in the extended family, an elderly woman who had to relearn how to care for a young child. The child's case file at the Child and Youth Court has been archived and the child is living permanently with the elderly lady in the extended family where he has what he needs for his integral development.

"What I appreciate more from all this process is that you helped me to have Carlos with me. You helped me and did everything so that this kid could be with me." María Bertila Salguero.

Case 6: Three siblings were separated from their birth family because they spent a long time in the street and were not attending school. When CTWWC caseworkers learned about the case, they realized birth parents had little knowledge about child care. After reunification with the birth family, caseworkers conducted a strong orientation on positive parenting with the birth parents and helped them reinstate the children's right to education. All three are currently studying and the family was able to make significant changes in their attitudes and child care practices. They used CTWWC economic support to purchase kitchen equipment to cook and sell food to generate funds.

"You helped us a lot to get the kids out of the orphanage. We needed advice and you showed up, helped us, and gave us a hand." Everilda Pérez.

Case 7: The boy was separated from his family because his mom used discipline methods that were not assertive. Two months later, the child was reunified with this birth family. CTWWC caseworkers focused on a Care Plan and worked on positive parenting practices with the parents. They also recommended incorporating their other son (14-year-old) into educational services and linked them to Guatemala's National Literacy Program CONALFA. CTWWC provided follow-up to the child and the family for two years. The family made significant changes in using assertive discipline and understanding children's rights and the responsibility they have as parents in the integral development of their children.

"You gave us advice on how to improve our home, be more united and counsel our children more. You gave us big support." Silvia Elena Ramírez.

Case 8: Two girls were separated from their birth family because their right to identity was infringed. After being in residential care for a little over two months, they were reunified with their birth family. Caseworkers began a close follow-up to rule out any other right violation concern. In this case, children had a strong attachment to their mother. CTWWC caseworkers' main focus was providing orientation on positive parenting practices.

"What I am most thankful for is the support you gave me. You came here and guided me" Marlyn Hernández Marroquín.

Case 9: The girl was admitted to residential care because her parents had difficulties looking after her, so they were not considered a suitable care option. Caseworkers located an extended family with whom she is currently living. CTWWC followed up on the case and verified that the child has grown a lot and has

improved her integral development. The girl's file has been archived at the Child/Youth Court, and she will remain under the care of her aunt, with whom she has a strong attachment.

"Thank you for giving me a hand. I appreciate it. You did a good thing with the girl and with me" Josefina Ramírez Ramos.

Case 10: This is a case of prevention of separation. The youngest child is the only one who was not separated from his family environment; some of his siblings are already living with other relatives while others continue under residential care. During follow-up to this family, CTWWC psychosocial team determined that there was a high risk that the child would be separated from his family, so they supported the family with orientation and parenting practices. The family has demonstrated a high degree of commitment to the child's care. However, it cannot make the changes required for their other children to return to their home. The child in question is currently in stable condition, and his family provides him with what he needs for his integral development.

"Thank you for the card and the support you gave me" Victoria Vásquez Hernández.

Case 11: The four brothers included in this case remain in residential care. CTWWC evaluated the case and provided support to prepare the family; however, the family was not a suitable family option. CTWWC caseworkers accompanied them for nearly two years in which the family made no effort to receive their children again. It was impossible to locate another relative despite the consistent efforts and coordination with other organizations within the child protection system. Some children are currently in residential care and others are living with some relatives. None of the siblings would like to return to that family environment and the Child and Youth Court Judge has listened to their wish.

Case 12: The five children entered a residential care facility due to parental negligence. However, after three months of separation, the parents committed to making significant changes in their parenting style. CTWWC supported the parents by providing information and guidance for improving their child care practices. The children are currently developing in an integral and safe manner in the birth family environment.

"I am very grateful for the things and everything we have learned. When you come from a small village like we do, we don't know anything. I think we're good now. We improved the house and the kitchen too. "Mayra Isabel Herrera.

Case 13: A teenage boy was separated from his family because his parents were infringing his right to education. The boy reunified with an extended family. His right to education has been reinstated, and CTWWC guided the extended family on the child's growth and development phase. His new caregivers are old adults, so caseworkers linked them to receive a subsidy from a government program.

"We thank you for the help you gave us. We are so grateful for all the advice you've given us." José Luis Jolón.²³

²³ Testimonials extracted from the Caregiver Feedback Forms filled out during the closure process.

Lessons Learned

- Child/family preparation for reunification is key to achieving a safe and sustainable reintegration.
- It is crucial to continue providing follow-up support after reunification even when the child's file has been archived at the Child/Youth Court, which does not imply a secondary separation will not occur. Caseworkers' follow-up to the child and family will help ensure the child's sustainable reintegration to a safe family and community environment. This process can take up to a year after the child's file has been closed at the Youth/Child's Court.
- All cases require parental orientation on positive parenting practices, including improving communication within the household, using assertive discipline, and learning about the child's growth and development phase. Carrying out this process with the families based on the specific situation and the individual needs of the child and the family is crucial to obtain good results.
- Family strengthening through linking and referring families to specialized social services related to health, education, psychology, and social work was essential in the child reintegration and case closure process.
- CTWWC's economic support, orientation, and the development of a plan of economic opportunities
 based on families' strengths positively impacted some of the families that implemented
 entrepreneurial and income generation activities to increase their household income. In contrast,
 other families could save funds that they used to pay off their debts.
- Case closure required an in-depth reflection and analysis of each case based on the progress in
 meeting the reintegration criteria, the goals stated in the Care Plan, and the progress documented in
 the follow-up forms, especially the child and family strengths. This process was conducted with the
 CTWC psychosocial team to determine the right timing to begin preparing the family for case closure
 and the end of accompaniment.
- The reintegration of **24 children and adolescents** into a safe and sustainable family environment demonstrates the importance of carrying out an orderly and planned case management process. A process that includes measurable reintegration criteria and allows caseworkers to make informed and non-discretionary decisions. Having a systematic record of each of the stages and progress made by the families is also critical.
- Each case presents different and complex challenges. Hence, it is essential to promote self-care
 processes with the psychosocial team, including coaching, mentoring, reflective sessions, and
 helping them resolve difficulties, identify exhaustion and deal with feelings of frustration. This is
 useful to remind them that reunification and reintegration are not always possible and are in the
 child's best interests, despite all their efforts invested in accompanying and preparing the families.
- By playing an active role in the entire process, families recognized their strengths and weaknesses.
 Building on those strengths, they could make changes in their home environment, positively affecting children's lives as they were reintegrated back to a family environment, even though many families were initially skeptical that it could happen.

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Annexes

Annex 1: Case Closure Form

Ins	tructions: To be used during the final follow-up visits to families	
Dat	te of closure: Case file number:	
RE	ASON FOR CLOSURE (choose one and tick appropriately)	
1.	Case review, observations, and child/family consultations indicate Care Plan goals have been achieved, reintegration has progressed to a sustainable level, and the family can continue caring and providing for the child without ongoing support from the caseworkers.	
2.	Others: a) Death b) Attains the age of majority	
3.	The child and family are no longer willing to participate in the program. Case reported, and transfer made to:	
4.	The child and family moved outside the intervention area. Case transferred to:	
5.	The family could not safely meet the needs of the child and he/she was removed from the family home and sent back to an orphanage.	
Na:	me and contact number of authorized person/body who conducted the removal:	
	tails of new care placement (i.e., residential facilities, foster family, adoption, caregiver, eworkers, and contact)	
CAS	SE CLOSURE CHECKLIST	Yes/No
		DATE
1.	Fi nal visit scheduled with child and family	
2.	Recommendation for closure made by caseworkers and discussed and approved in a case analysis meeting with the teams from Guatemala's Attorney General, the Secretary of Social Welfare, and the Judicial Branch.	
3.	Referrals and the Care Plan have been completed with the child and family. Caseworkers have recognized and appreciated the achievements of the child(ren) and family.	

4.	The child and the family have been informed of available, relevant support services and contact information in case support is needed in the future.	
5.	If a child or adolescent was removed or referred, copies of relevant paperwork have been attached to the child's case file and provided to statutory authority and new care placement provider.	
6.	The child and the family were prepared for the case closure.	
7.	Was the Secretary of Social Welfare, Guatemala's Attorney General, and the Judicial Branch informed about the ending of psychosocial accompaniment and case closure?	
8.	Paper child's case file was transferred to the statutory authority (Secretary of Social Welfare). Acknowledgment of receipt is available.	
Exp	plain the child and family's progress in achieving the goals set in the Care Plan.	•
Exp	plain the child and family's progress towards a sustainable reintegration:	
Coi	mments:	
Car	regiver's name and signature (or Care Leaver's):	Date:
Cas	seworkers' names and signatures:	_Date:
Cas	seworker Supervisor's name and signature:	_ Date:

Annex 2: Caregiver feedback form

(Give this form to the family who received the support about the services rendered during the follow-up process	·
I,(Caregiver's na	ame) have received case management services from
CTWWC. I certify that the caseworkers have discussed of	closing the case and have made arrangements for me
to continue being supported by services if necessary, so	that I can continue to raise my child in my home.
Signature or Thumb Print:	Date:
Caregiver's feedback for case management services:	
I am:	
Very satisfied with the services I received	
Mostly satisfied	
About half and half	
Mostly unsatisfied	
Very unsatisfied	
The best part of the support I received was:	
The services would have been better if:	

Annex 3: Case closure checklist

Competencies or areas to consider and determine if a case should be closed

CHILD'S NAME

Instructions: Below is a checklist from the CTWWC Caseworker Toolkit for the eventual case closure following reintegration. The form must be filled out by the caseworkers who followed-up that particular case. The tool includes six reintegration benchmarks. Each benchmark contains five specific questions that evaluate the progress of the main actions implemented in the Care Plan. Caseworkers can access different means of verification, such as the forms filled out during each monitoring/follow-up visit, the vaccination card, proof of school enrollment, certificates of completion, or a development scale tool. Caseworkers will fill out one checklist per case. For cases with more than one child, they will evaluate each item per child individually. The answer for each item will be "Yes" or "No." A majority of positive responses will guide caseworkers towards closure.

YES NO Question **Benchmark 1. Protection and Safety** The child's basic needs of affection, food, shelter, health and clothing are met. The child lives in a safe place, free of violence, exploitation or maltreatment. The child's caregiver has demonstrated his/her commitment to protecting him/her and meeting his/her basic needs. The designated caregiver can identify children's rights and is aware of his/her obligations to fulfill them. The child recognizes his/her primary or designated caregiver. **Benchmark 2. Health and Development** The child has proper nutrition and is not exposed to malnutrition. 6 The child is healthy and has a general appearance of vitality without any severe or preventable disease. The infant has been receiving his/her vaccines on time. The child who has passed vaccination ages eventually attends health services for disease prevention. The child lives in a clean place with access to safe drinking water. The child's evolving capacity is according to his/her age and the child development 10 assessment tools used by the psychologist. Benchmark 3: Healthy relationship and attachment between the child and the primary caregiver The child receives affection, love, and protection from his/her primary or designated 11 caregiver. 12 | The child can express who represents his/her protector and who shows love and affection. The child shows an attachment with his/her caregiver during observations and case follow-13 During follow-up visits, the primary or designated caregiver has shown affection and love to 14 The safety net that the child identifies as reliable outside his/her family environment 15 represents protection. He/she is not exposed to danger based on information provided by collateral sources. Benchmark 4. Psychosocial wellbeing and community belonging The child feels identified within the context where he/she is living. He expresses feeling accepted and included and can mention his/her friends.

17	Based on observations and follow-up visits, the child is treated equally concerning other children in the household.	
18	Caseworkers have identified during follow-up visits that the child or adolescent has adapted to the new environment and has a sense of belonging where he/she is currently living.	
19	The primary or designated caregiver knows the social services available in his/her community and can access them when the child needs them.	
20	The primary or designated caregiver can assign chores to the child according to his/her age.	
	Benchmark 5: Education and Training	
21	There is a school or training center at the reunification location where the child can study.	
22	The child in school age is enrolled and stays in school. Young children who are not yet school age receive stimulation according to his/her age.	
23	The school-age child has adequate performance and passes the grade. The young child who is not yet school age shows cognitive abilities according to his/her age.	
24	The school-age child receives support from his/her parents or primary caregiver to attend school, and the one who does not attend school yet is engaged in adequate activities to develop their fine and gross motor skills.	
25	During the follow-up visits to the school, the child's teacher or tutor mentions that the caregiver keeps an eye on the child's education, attending meetings and other school-related activities. As for young children who are not yet school age, their caregiver shows that he is committed to working on their psychomotor skills.	
	Benchmark 6: Household Economy	
26	The designated caregiver can afford the basic needs of the child.	
27	The family where the child is reunified/reintegrated has a source of income to meet his/her basic needs.	
28	The designated caregiver has shown a commitment to meeting the basic material needs of the child.	
29	Observations and follow-up visits do not indicate a lack of meeting the child's material needs that may put his/her health or development at risk.	
30	The family and the child show abilities and skills that can be useful to increase family income to meet basic needs.	

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