



# CTWWC and PGN's Mechanism for the Prevention of Unnecessary Child-Family Separation

## Guatemala Report

September 2021



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# Changing the Way We Care

## Guatemala

### September 2021

**Prepared by:** Mariela Hernández and María José Pérez, Consultants for Changing the Way We Care, Cambiando la Forma en que Cuidamos (CTWWC)

**Technical Review:** Vanesa Guillermo, CTWWC Family Strengthening Technical Coordinator, Sully Santos de Uclés, Technical Advisor for CTWWC-GT, and Kelley Bunkers, Global Technical Advisor for CTWWC

Changing The Way We Care<sup>SM</sup> (CTWWC) is implemented by Catholic Relief Services and Maestral International, along with other global, national and local partners working together to change the way we care for children around the world. Our principal global partners are the Better Care Network and Faith to Action. CTWWC is funded in part by a Global Development Alliance of USAID, the MacArthur Foundation and the GHR Foundation.

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## List of Acronyms

Acronym	In Spanish	In English
CTWWC	Cambiando la Forma en que Cuidamos	Changing the Way we Care
GHR	Fundación Gerald y Henrietta Ruaenhorst (GHR)	Gerald y Henrietta Rauenhurst (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.<sup>1</sup> 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.<sup>2</sup>

**Birth family:** The child's biological parents and siblings<sup>3</sup>.

**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 Analysis:** Research and learning tool aimed at learning and understanding the characteristics of a specific situation found in case management, allowing practitioners (psychologists, social workers, educators, and lawyers) to inquire about the needs of a child and find answers and options to improve his/her situation. After an in-depth analysis of all factors, practitioners will select a solution based on the child's best interests.

**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.<sup>4</sup>

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

<sup>2</sup> 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).

<sup>3</sup> 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.

<sup>4</sup> Guidelines on Children's Reintegration, Inter-agency group on children's reintegration, Op Cit. page 37.

**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 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.<sup>5</sup>

**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.<sup>6</sup>

**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.<sup>7</sup>

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

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

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

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

ensure that the event that led to the breach is not repeated. However, a thorough investigation of the specific case must be conducted, and all interested parties must be heard, especially the affected boy or girl and the state 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.<sup>8</sup>

**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.<sup>9</sup> 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 views and recognize their right to express those views. It is not up to the child to prove that capacity before expressing it.<sup>10</sup>

**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.<sup>11</sup>

**Family tracing:** Planned 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 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.

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<sup>8</sup> 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.

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

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

<sup>11</sup> 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.<sup>12</sup>

**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.<sup>13</sup> In Guatemala, it refers to public and private institutions whose main role is to provide child protection and shelter.<sup>14</sup>

**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.<sup>15</sup>

**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.<sup>16</sup>

**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.<sup>17</sup>

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

<sup>13</sup> UN General Assembly 2010 “Guidelines for the Alternative Care of Children,” Scope of the Guidelines, section IV, Page 7.

<sup>14</sup> 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

<sup>15</sup> Inter-agency Group on Children’s Reintegration (2015). Guidelines on Children’s Reintegration, Page 7.

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

<sup>17</sup> 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

Changing The Way We Care (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).<sup>18</sup>

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 international 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.

Based on its objectives, principles, and strategic direction and within the collaboration agreement signed with Guatemala's Attorney General (PGN), CTWWC initiated discussions with the Office of the Child and Youth Advocate (PNA) to analyze the implementation of a roadmap to prevent unnecessary child-family separation in the department of Guatemala. This roadmap aims to contribute to PNA's institutional efforts of helping families reinstate children's rights by solving the issues administratively.

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<sup>18</sup> UNGA (2010). Directrices sobre las Modalidades del Cuidado Alternativo de los Niños.

<https://bettercarenetwork.org/spanish-section/marco-internacional/directrices/directrices-sobre-las-modalidades-alternativas-de-cuidado-de-los-ni%C3%B1os>

Many of the reports of child rights transgressions by parents and caregivers received by PGN are cases that can be solved by referring children and families to social services or family strengthening support.

As a result, CTWWC scheduled meetings with PGN's Child and Youth Advocate to discuss and analyze implementing interventions to help children stay with their families as long as the child isn't in imminent danger. The Child and Youth Advocate agreed that predominant weight should be given to the child's best interest and support families to prevent unnecessary separation.

After conducting several meetings to discuss the need to establish coordination mechanisms to prevent unnecessary child-family separation, PGN agreed to use a prevention roadmap where the PGN would play a leading role as a duty bearer in safeguarding children's rights in Guatemala.

Implementing the roadmap and inter-institutional coordination to prevent unnecessary separation resulted in direct support to 18 families and 66 children and adolescents, prioritizing the child's permanence in their family environment.

## Acknowledgments

We want to thank the 18 families that participated in the process to prevent unnecessary child-family separation for allowing us to learn about their family dynamics. We at CTWWC value parents' willingness to make changes in their parenting patterns and take action to ensure the rights of their children are respected. Special thanks to 66 children and adolescents who entrusted PGN-CTWWC to reinstate and ensure their rights.

CTWWC would also like to thank PGN's Office of the Child and Youth Advocate for the trust bestowed upon CTWWC and their hard teamwork. A special thanks go to their inter-institutional psychosocial teams for their sensitivity and commitment to the case management process towards children's wellbeing and protecting their rights.

## Introduction

From April to September 2022, CTWWC and PGN implemented a process to prevent unnecessary child-family separation and provide accompaniment using the case management methodology and reintegration criteria with 18 families to promote children's permanence within their current family environment.

The first step was identifying children vulnerable to rights violation or at risk of unnecessary family separation. For these cases, the PNA/PGN had already determined the possibility to reinstate their rights through an administrative process and all of the families resided in the municipalities of the department of Guatemala.

The PNA and PGN psychosocial teams from the department of Guatemala referred the cases to CTWWC staff by submitting a detailed case report in a form designed by PGN and CTWWC. PGN and CTWWC caseworkers later validated the information in a case-analysis meeting. They analyzed the support options and the start date for CTWWC/PGN accompaniment and follow-up to the PNA/PGN Protection Plan. This included home visits to 18 families, referral to social services, and family strengthening through economic and psychosocial support.

CTWWC psychosocial team registered the observations and discussion about the wellbeing of the child and the family based on the six wellbeing domains of the reintegration model promoted by CTWWC. All this facilitated the implementation of the Protection Plan and helped caseworkers provide orientation to families during the home visits. Caseworkers documented the progress of the activities implemented in a follow-up report, which they later submitted to the PNA/PGN caseworkers every month. The information presented in this report was enriched by the revision of the detailed reports issued by PGN and the data obtained from case review meetings held with PNA/PGN psychosocial teams.

This report includes the key lessons learned and the achievements resulting from CTWWC/PGN follow-up and family and economic strengthening activities provided to 18 families, along with information about 66 children and adolescents who remained with their family and community environment. The project also raised families' awareness about the importance of providing children with safe and protective settings to foster their wellbeing through positive and loving parenting.



# 1. Description of the Process to Implement a Roadmap to Prevent Child-Family Separation

PGN's Office of the Child and Youth Advocate (PNA) constantly receives reports of suspected violations of children's rights. PNA analyzes each complaint received and identifies the protection measure deemed necessary. There are some cases where the reason behind the child concern report does not require undertaking any legal child protection proceeding, so family separation does not have to occur either. These cases are usually related to poverty conditions or lack of access to social services. PNA prioritizes the child's best interest and the right to remain with their family through a Protection Plan, highly dependent on referral and linkages to social services for the children and their families. PNA's verification and inter-institutional coordination unit later validate the Protection Plan.

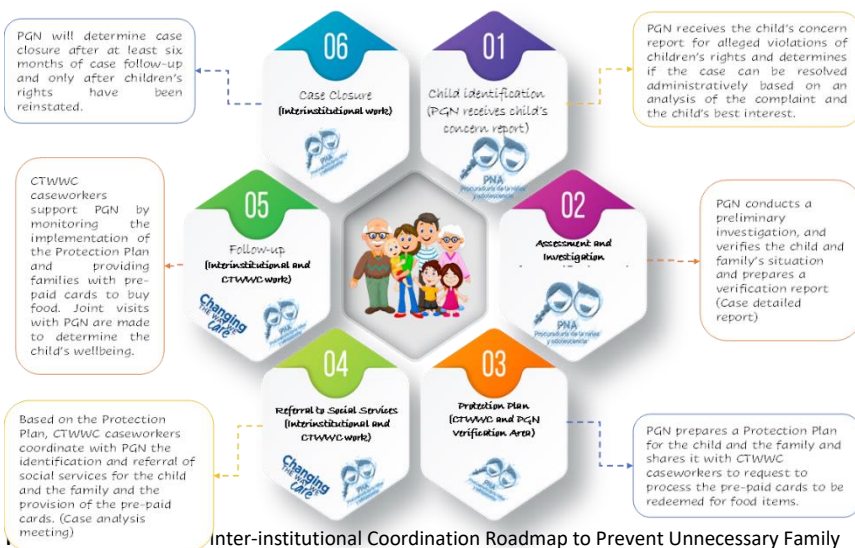
In January 2021, CTWWC and PGN/PNA began coordinating and discussing how to implement a roadmap to support families and prevent unnecessary child-family separation, particularly for cases requiring no legal proceedings.

They agreed to resolve them administratively, always prioritizing the child's best interest.

The roadmap encompasses six stages where PNA plays a leading role as a duty bearer safeguarding children's rights. During the meetings between PGN and CTWWC to design the roadmap, they analyzed the stages that required direct PNA participation and those where they could use the support of other organizations such as the CTWWC initiative.

The first three stages of the roadmap - identification, investigation, and protection plan is the sole responsibility of PNA to implement them. The fourth and fifth stages - referral of services and follow-up are to be conducted collaboratively by PNA and CTWWC. The last phase – case closure will be determined by PNA, using CTWWC reports and families' progress in implementing the Protection Plan.

The plan was to implement the pilot roadmap with 18 families. PNA transferred each case to CTWWC by submitting a detailed report and a Protection Plan for each case. The process included case-analysis meetings to analyze the support needed to make referrals to social services and analyze the results of the joint home visits aimed at strengthening and accompanying families to prevent children's separation from their families.



## 2. Analyzing results of the cases related to stages 1, 2, and 3 of the Roadmap to Prevent Child-Family Separation

### 2.1 Reason for the child concern report

PNA's detailed reports submitted to CTWWC helped caseworkers learn about the grounds for the child concern reports made to PGN involving the 18 families to be supported during the roadmap implementation.

Chart 1 shows the reasons for the child concern reports made to PGN, most of which were anonymous. Physical maltreatment, neglect, and parental alcohol abuse were the reasons most frequently reported. There were also less frequent reports of malnourished children, physical assault by non-relatives, the right to an identity, the mother's abandonment, and sexual violence.

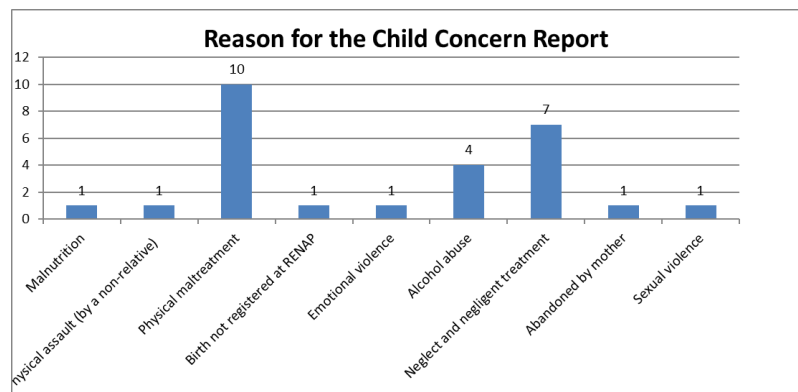


Chart 1: Reasons for the child concern report

Source: PNA/ PGN Caseworkers' Case Detailed Reports, 2021

### 2.2 Alleged violated rights based on the reports

Chart 2 presents the alleged rights being violated based on the reports made to PGN. The child's right to health has been the most disregarded. This includes physical, emotional, and mental health. Many of the reports received relate to physical maltreatment, directly affecting children's emotional and mental health.

Results also showed frequent infringement of the child's right to integrity and education. The child's right to protection, identity, safety, food, and the right to a family have also been infringed to a lesser extent.

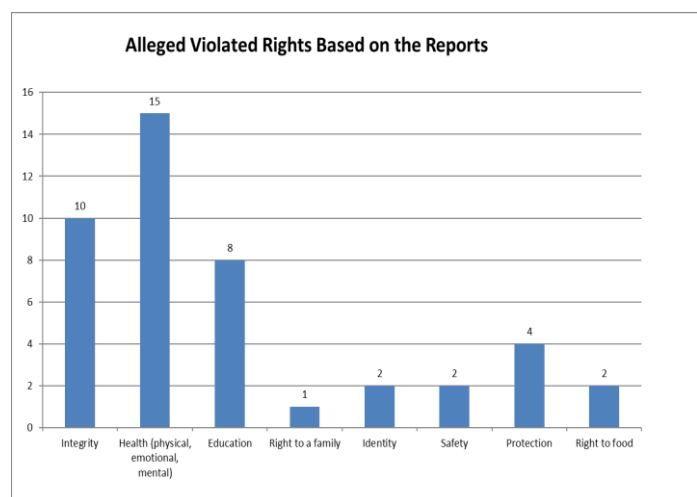


Chart 2: Alleged violated rights based on the report

Source: PNA/ PGN Caseworkers' Case Detailed Reports, 2021



Unfortunately, there were frequent cases where three different rights were being violated in one single case.

### *2.3 Risks identified during verification visits made by PGN caseworkers.*

PGN caseworkers made home visits to verify the reports received. Risks identified more frequently included parental neglect and negligent treatment, inadequate parenting patterns, parents' low schooling level, unemployment, and children's school dropout. Risks identified to a lesser extent included a type of domestic violence, the lack of housing, family disintegration, and malnutrition (a girl had a chronic disease).

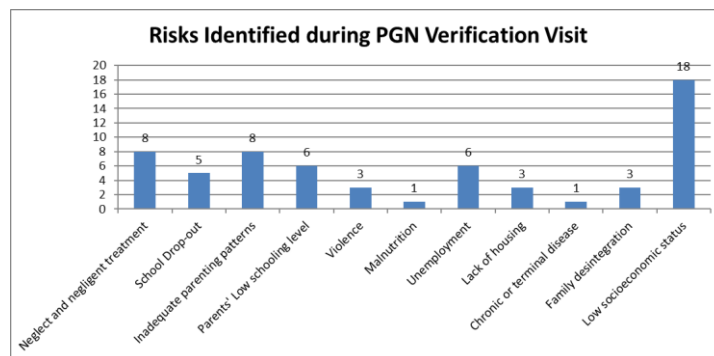


Chart 3: Risks identified during PGN verification visit  
Source: PNA/PGN Caseworkers' Case Detailed Reports, 2021

All 18 were low-income families. Therefore, they all received CTWWC family and economic strengthening support and were referred to social services.

### *2.4 Cases resolved through an administrative process by PGN*

Although the child concern reports made to PGN indicated suspicion of child rights transgressions, these did not constitute a cause for separation or legal action, so PGN and CTWWC resolved all cases (18) through administrative channels.

When PGN staff made the home visits to verify the reports, they did not identify violated rights. However, they identified risk factors that if not addressed in a timely fashion, could result in a violation of children's rights.

CTWWC offered families different alternatives to access social services to address the risk factors identified so that children and adolescents could remain within their care.

During the roadmap to prevent family separation, CTWWC learned about a girl allegedly engaged in child labor which was reported to PGN anonymously. PGN required the case to be known by a Child and Youth Court, where the judge ruled against the girls' separation from her family environment.

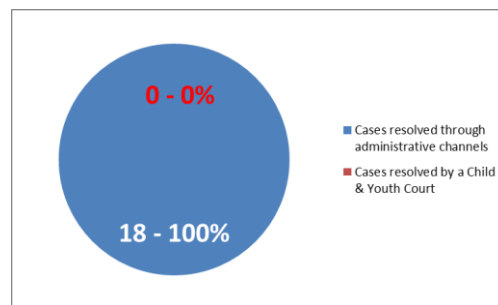


Chart 4: Cases resolved through an administrative process  
Source: PNA/PGN Caseworkers' Case Detailed Reports, 2021.

### 3. Analyzing the results related to stages 4 and 5 of the Roadmap to Prevent Child-Family Separation

#### 3.1. Number of children and adolescents and their ages

Chart 5 shows the ages of the **66** children and adolescents (**36** girls and **30** boys) who participated in the Roadmap to Prevent Unnecessary Child-Family Separation. Of these, **23** children (**17** girls and **6** boys) fall into the early childhood group (from 0 to 6 years). **14** girls and **13** boys are from ages 7-12, and there are **5** teenage girls and **11** teenage boys. This means the majority of the children were in early childhood and childhood ages, critical years to be surrounded by a safe and nurturing family environment to help ensure their integral development.

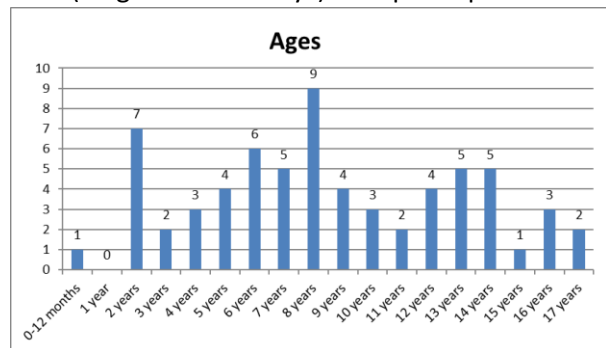


Chart 5: Ages of children participating in the process  
Source: CTWWC Caseworkers' Follow-up Reports, 2021

#### 3.2. Schooling level

Chart 7 shows the schooling level of the **66** boys and girls:

- **21** boys and girls are not attending school. **14** of these are **not** in school-age (ages 0-6).
- **Four** children were not enrolled in school. PGN-CTWWC helped families enroll **one** girl in school and is supporting **three** boys to register their birth at the RENAP National Registry. They currently receive classes as free listeners. Once they receive their birth certificate, they will be allowed to enroll in the school year 2022 formally.
- **Three** children and adolescents have a disability and were not enrolled in the regular education program. Based on PGN's Protection Plan, CTWWC suggested parents take the necessary steps to enroll them in a special education program and provided them with household economic support. Follow-up visits revealed that families used the funds to pay for tuition in special education programs such as the Down Foundation.

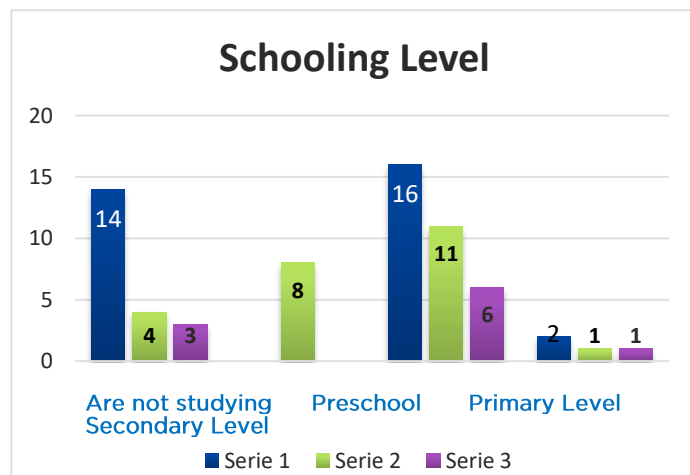


Chart 6: Schooling Level  
Source: CTWWC Caseworkers' Follow-up Reports, 2021

- **Preschool:** 8 boys and girls (ages 5 and 6) are currently studying preschool).
- **Primary level:** 16 boys and girls are studying First and Second grade, including **one** girl with moderate cognitive disability who is in First Grade in the regular education program.
- **Eleven** boys and girls are currently in Third and Fourth grade and **six** boys and girls are in Fifth and Sixth grade.
- The CTWWC/PGN initiative advocated with the **Pedro Poveda Foundation** to provide educational materials to a child studying Second Grade.
- **High school:** Four teens are studying high school (**One** is in 7th, **two** in 8th, and **one** in Ninth Grade.)

In general, Caseworkers identified a discrepancy between children's school level and their current developmental levels and ages. Furthermore, some children, especially adolescents, did not have access to the internet to receive classes online. The economic support received from CTWWC allowed families to purchase internet cards and facilitate their access to their classes.

### 3.3. Children's health status

**One** six-year-old girl out of the **66** children has Lupus and is currently receiving treatment at the Unidad Nacional de Oncología Pediátrica (UNOP). Her family used CTWWC economic support exclusively to purchase food for her as she requires to follow a special diet, which has been challenging to maintain for her family.

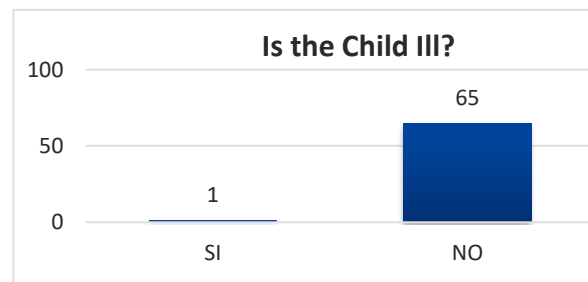


Chart 7: Is the child ill?  
Source: CTWWC Caseworkers' Follow-up Reports, 2021

### 3.4. Children's disability status

Chart 8 shows that **three** girls and **one** teenage boy have a disability. When PGN heard about the cases, only **one** was studying, and the rest had never attended school or received any medical attention.

Three out of the four families claimed that they could not afford transportation costs to take their children to the specialized centers to receive the treatment they needed. The economic support received from CTWWC allowed two families to save funds and begin taking their children to the care facilities and receive specialized therapy for their disability.

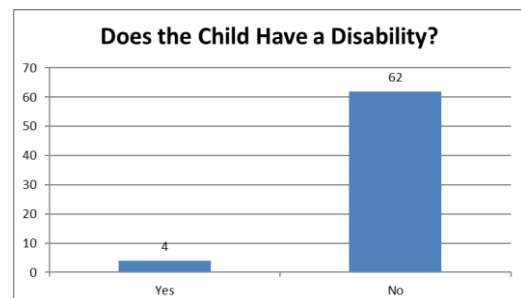


Chart 8: Does the child have a disability?  
Source: CTWWC Caseworkers' Follow-up Reports, 2021

Of the **four** children and adolescents with a disability, **one** girl has Down Syndrome, **another one** has microcephaly, and **one** girl and **one** teenage boy have a moderate cognitive disability. They all require specialized care and are currently under the supervision of their families.

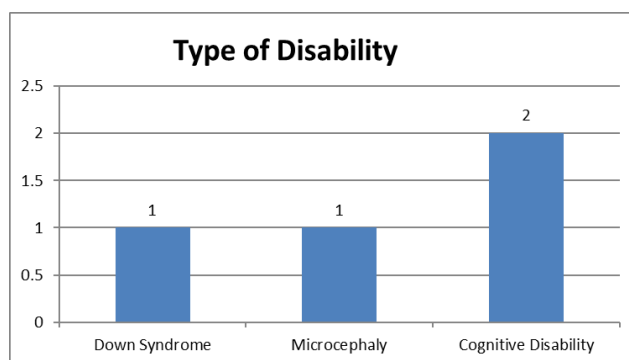


Chart 9: Type of Disability  
Source: CTWWC Caseworkers' Follow-up Reports, 2021

## 4 Characteristics of the families

### 4.1. Type of family

The implementation of the Roadmap to Prevent Unnecessary Child-family Separation has supported **18** families. Of these, ten are two-parent families, seven are female-headed households, and one is a male-headed household. All children currently live with their birth or extended family, including their grandparents and aunts.

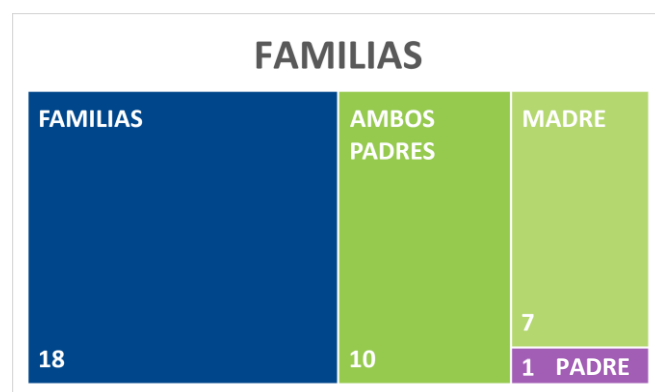


Chart 10: Type of Family  
CTWWC Caseworkers' Follow-up Reports, 2021

### 4.2. Parents' health status:

All parents are in good health and currently do not suffer from any disease that requires specialized attention or treatment.

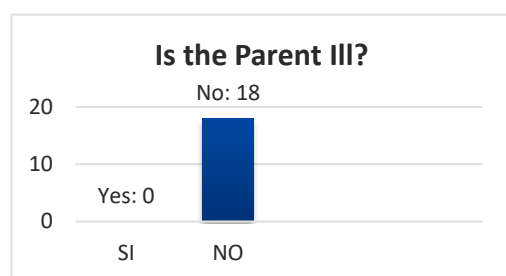


Chart 11: Is the parent ill?  
Source: CTWWC Caseworkers' Follow-up Reports, 2021

### 4.3. Parental disability:

Two families have a parent with a disability. The first family has a mother who is blind due to a car accident. She has not been able to get a job, meet her family's basic needs or provide proper care to her two children. The family discussed this situation and agreed that her boys would move in with their father and his new wife. In the second family, the father recently had a car accident which left him unable to move both legs. Both families live in precarious conditions since none have a monthly income to meet their children's basic needs. The support provided by CTWWC was crucial to helping both families who are raising two children each.

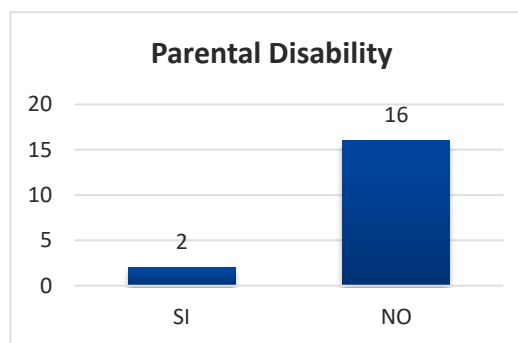


Chart 12: Does the parent have a disability?  
Source: CTWWC Caseworkers' Follow-up Reports, 2021

### 4.4. Household economic situation:

Parents' income, schooling level, and occupation indicate that 18 households have a limited economic situation. CTWWC supported all families by providing them with three prepaid cards with a total value of Q.1,500 to purchase food items.

Throughout this process, caseworkers have witnessed that financial hardship can put children at risk of separation, especially when parents cannot afford basic needs or access to essential services, causing children's rights infringement unintentionally.

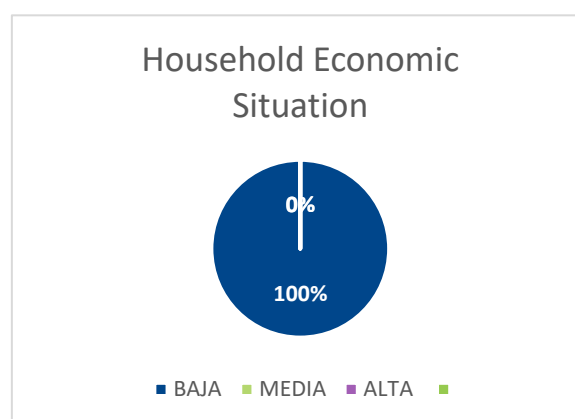


Chart 13: Household Economic Situation  
Source: CTWWC Caseworkers' Follow-up Reports and PNA/PGN Detailed Reports, 2021

### 4.5 Housing:

Of the 18 families, five families own a house, seven do not own a house and are currently renting, and six families share their home with other relatives, but they pay the expenses separately.

Some of the families who rent a house have had conflicts with the neighbors, as they are the ones who reported them to the National Police and the PGN for concerns relating to their children. The families have considered moving but cannot

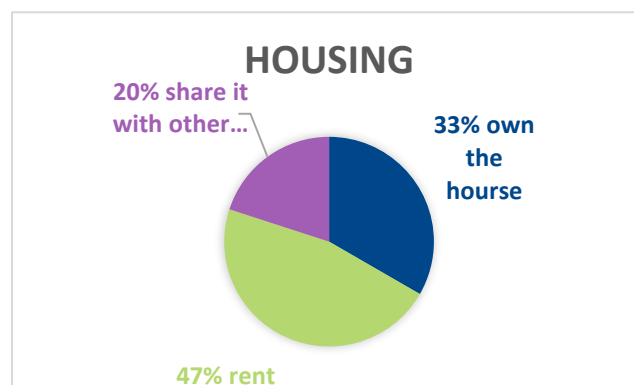


Chart 14: Housing  
Source: CTWWC Caseworkers' Follow-up Reports, 2021

afford a better place or find restrictions on the number of family members accepted in one household, which affects them because they have several children.

One of the families used the prepaid card to buy food and used the funds saved to buy a bed for the children. In general, these families live with an income below the minimum wage. Their belongings and essential furniture are scarce. Some families do not even have a dining table with chairs, let alone a place where children can do homework.

4.6. Location of the families

Although in the initial phases of institutional coordination, PGN-CTWWC agreed that they would support families living in Guatemala City and the municipalities of Villa Nueva and Mixco, given the need in other areas, the initiative was extended to all cases referred by PNA/PGN caseworkers, regardless of their location.

Chart 15 shows that most of the families supported so far live in Guatemala City and other municipalities within the department of Guatemala.

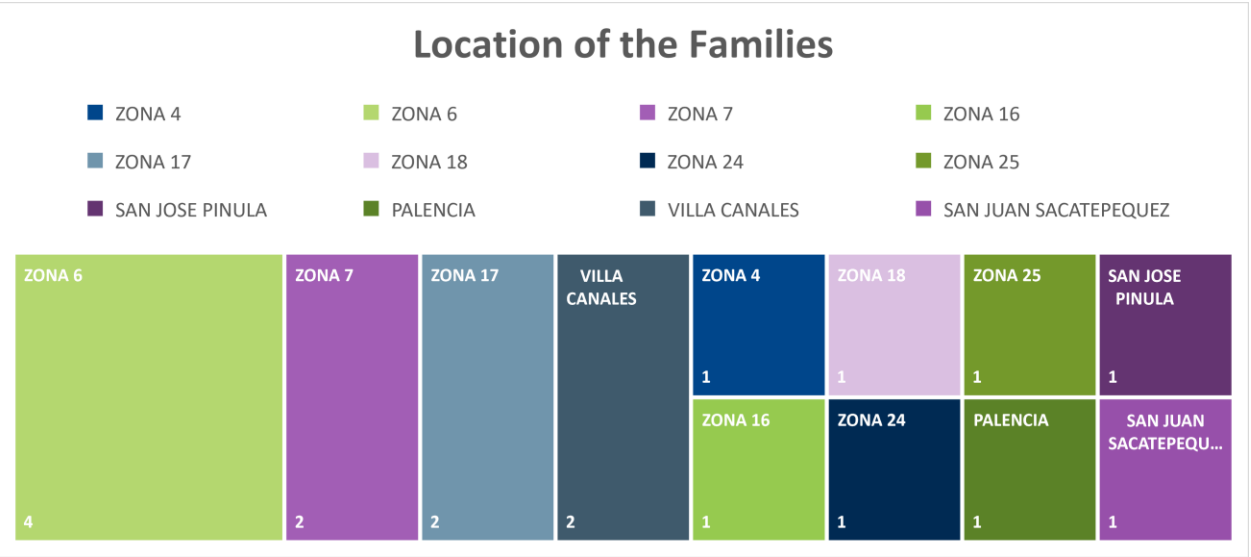


Chart 15: Location of the families  
Source: CTWWC Caseworkers’ Follow-up Reports and PNA/PGN Detailed Reports, 2021

5. Referral to social services based on the PGN Protection Plan

5.1 Referring children and adolescents to social services

Chart 16 shows the referrals made to social services. This includes 23 children and adolescents referred for psychological services, considering that emotional wellbeing was one of the risk factors and infringed rights most frequently found.

Caseworkers referred **20** children and adolescents to health services, including vaccination programs, weight monitoring, and medical examination and tests.

The chart shows that caseworkers referred **18** children to education services and psycho-educational support. They also identified that many school-age children had not started their studies yet or had dropped out of school. Caseworkers referred three teens to psychosexual orientation and three boys and girls with disabilities to rehabilitation, physiotherapy, and speech-language therapy.

Caseworkers identified that the birth of four children had not been registered at the RENAP National Registry. CTWWC coordinated with the Municipal Child and Youth Protection Office in the municipality of Villa Canales, which provided legal assistance to a family to register the births of three children at the RENAP office. Similarly, PGN provided orientation to another family to register a child's birth at the RENAP office.

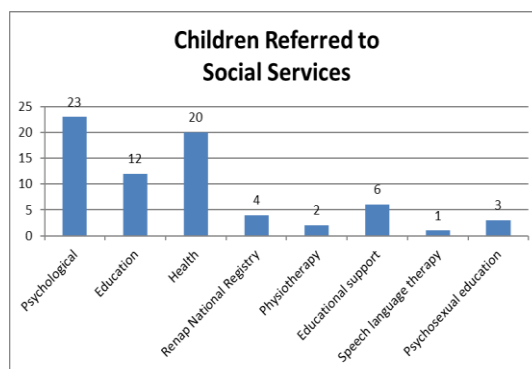


Chart 16: Children referred to social services  
Source: PNA/PGN Caseworkers' Case Detailed

## 5.2 Referring mothers to social services

The majority of the children and adolescents are living with their mothers. Caseworkers identified that the main risk factors were related to inadequate parenting practices which have affected family dynamics leading to dysfunctional relationships. Based on this and following PGN's Protection Plan, caseworkers referred seven families to parenting skills training and six families to psychological therapy.

Caseworkers referred three mothers to a health center to receive family planning counseling, two mothers to a social program that offered food aid, and one mother to RENAP to process a personal identification card (DPI).

Staff also referred one mother to visual rehabilitation therapy and another to legal assistance for delayed birth registration.

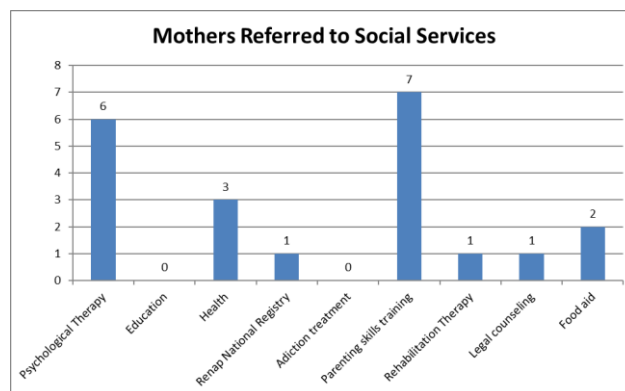


Chart 17: Mothers referred to social services  
Source: PNA/PGN Caseworkers' Case Detailed Reports, 2021

## 5.3 Referring fathers to social services

Caseworkers identified ten two-parent families and referred nine fathers from these families to social services, as shown in Chart 18. Four fathers were referred to psychological services and two to parenting skills training to improve their parenting patterns and strengthen assertive communication within the

household. Two couples were also referred to family planning counseling and one father to addiction treatment.

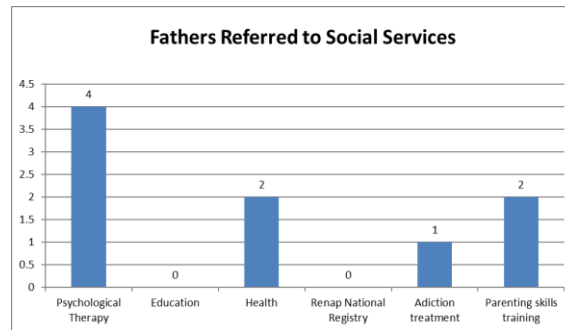


Chart 18: Fathers referred to social services  
Source: PNA/PGN Caseworkers' Case Detailed Reports, 2021

## 6. CTWWC household economic strengthening provided to families and follow-up to Protection Plan and referral of social services

Out of all the child concern reports received by PGN, caseworkers identified some cases that could be resolved through an administrative process. As a result, CTWWC provided household economic support to 18 families through prepaid cards, which could be redeemed for food items, benefiting **66** children and adolescents who remained with their families.

### 6.1 List of families who received prepaid cards to buy food

#	Family Name	Number of Prepaid Cards Received	Total Value
1	Domínguez	3	Q.1,500
2	González	3	Q.1,500
3	Arrecís	3	Q.1,500
4	Barrillas	3	Q.1,500
5	Castellanos	3	Q.1,500
6	Castro	3	Q.1,500
7	García	3	Q.1,500
8	Monroy	3	Q.1,500
9	Pérez	3	Q.1,500
10	Pérez	3	Q.1,500
11	Quisquinay	3	Q.1,500
12	Rizzo	3	Q.1,500
13	Rodríguez	3	Q.1,500
14	Soyos Xot	3	Q.1,500
15	Sumalé	3	Q.1,500
16	Urizar	3	Q.1,500
17	Vásquez	3	Q.1,500
18	Yuman	3	Q.1,500

Table 1: Families benefited by prepaid cars  
Source: CTWWC Caseworkers' Follow-up Reports, 2021



## 6.2 Home visits to follow up the Protection and Economic Strengthening Plan

From April to September 2021, caseworkers made 38 home visits to the 18 families referred by PGN to follow up on the social services they were referred to, the Protection Plan's implementation, and to distribute the prepaid cards to buy food. PGN and CTWWC caseworkers made 35 of the 38 visits together. These visits included three home visits to two families and two home visits to 16 families.



Chart 19: Number of home visits per family  
Source: CTWWC Caseworkers' Follow-up Reports, 2021

These visits served to identify progress in implementing the Care or Protection Plan and guide families about using the financial support they received. Caseworkers also encouraged them to start a small business and use prepaid cards to purchase essential items.

## 6.3 CTWWC actions to refer families to social services

- Coordination and follow-up with **CONACMI** to incorporate one family into their parenting training program and psychological support.
- Coordination and follow-up with **Pedro Poveda Foundation** to provide a group of siblings with educational materials and psycho-educational support.
- Coordination and follow-up with **CASA JOVEN** Palencia to incorporate one family into their parenting training program and psychological therapies.
- Coordination and follow-up with the **Municipality of Villa Canales**, which provided a family with legal assistance to register the births of **three** children at the RENAP National Registry. The mother never registered the births nor had a birth registry from the hospital where she gave birth to her children.
- Coordination and follow-up with **Protejo Program** to incorporate a family in their occupational workshops to help the mother develop new skills and start a small business.
- Coordination and follow-up with the **Secretary of Social Welfare** to include a family to receive family subsidies, although the support requested did not come through.
- Coordination and follow-up with the **Villa Canales Municipal Services for Women** to register one family to receive psychological therapies.

## 7. Families' progress observed during psychosocial follow-up and social services referrals

During follow-up home visits, caseworkers verified progress made by families that led to significant improvements in child care and household conditions. See a summary of progress below.

#	Family Case	Number of Children/ Adolescents per Family	Progress Made by Families
1	Case 1	4	<ul style="list-style-type: none"> <li>The family installed electricity in their household.</li> <li>The family attended social services provided by Casa Joven.</li> <li>Significant hygiene behavior change</li> <li>The family gained access to the internet so that children can receive classes remotely.</li> <li>Girls showed improved hygiene practices and are excited to continue their studies.</li> <li>Teenage girl Kimberly received psychological assistance. She looked happy for the support received and was interested in continuing her studies and helping her sisters with their studies.</li> </ul>
2	Case 2	3	<ul style="list-style-type: none"> <li>The economic support allowed the mother to save funds to buy supplies for her work.</li> <li>One of the boys received educational materials from Pedro Poveda Foundation, and his siblings received psycho-educational support.</li> <li>Darwin's school achievement improved significantly. He was excited when he received the book he needed.</li> <li>Children show respect and affection to their mother. <i>"The support received is a blessing to my children. I don't have a job right now. God Listed to our prayers through the help you are giving us."</i> Mother.</li> </ul>
3	Case 3	3	<ul style="list-style-type: none"> <li>The prepaid card to buy food helped them save funds, which they used to purchase a bed.</li> <li>The family registered the birth of his child at the RENAP National Registry office.</li> <li>The family enrolled their girl in the school year 2021. Sandra, age eight, proudly shows off her homework and the school guide used for her studies.</li> </ul>
4	Case 4	2	<ul style="list-style-type: none"> <li>The family used the prepaid card to buy food and used the funds saved to purchase a bed for one of the girls.</li> <li>The mother attended psychological therapies.</li> <li>The girls expressed being happy living with their mother, who cares about their wellbeing. The girl who received the bed is happy to have a comfortable place to sleep.</li> </ul>
5	Case 5	5	<ul style="list-style-type: none"> <li>The prepaid cards received allowed the mother to save money to buy inputs for the sale of seeds.</li> <li>The family could buy food.</li> <li>Children and adolescents displayed attachment to their mother and expressed being happy for the economic support received and the food bought with it. <i>"We like drinking milk."</i> Children.</li> </ul>

#	Family Case	Number of Children/ Adolescents per Family	Progress Made by Families
6	Case 6	5	<ul style="list-style-type: none"> <li>Parents received parenting training and psychological support through coordination with CONACMI.</li> <li>Significant household economic support, mainly because the husband doesn't have a steady income right now.</li> <li>Children gained internet access to attend remote classes.</li> <li>Children show attachment to their parents.</li> </ul> <p><i>"Thank you for the support you give us. We are going through difficult times. My husband doesn't have a job right now."</i> Mother.</p>
7	Case 7	4	<ul style="list-style-type: none"> <li>The family purchased a bed.</li> <li>The family saved some funds to take their teen to physical therapies at Fundabiem.</li> <li>The older brother was excited to be sleeping on a proper bed.</li> <li>The girls and the teenage boys show attachment to their parents.</li> </ul>
8	Case 8	4	<ul style="list-style-type: none"> <li>The family paid overdue rent. Children's integrity was at risk as they could have been evicted from their current home.</li> <li>The mother attended parenting training and psychological support.</li> <li>The mother who used to leave her children alone in the house now provides better care and protection to her children.</li> </ul>
9	Case 9	4	<ul style="list-style-type: none"> <li>The mother used the prepaid card to buy food and used the funds saved to pay off debts.</li> <li>The family complied with the requests made by PGN in the Protection Plan by attending recommended social services.</li> <li>The family improved their hygiene practices, allowing the girls and a teenage boy to develop in a healthy environment.</li> <li>The girls and a teenage boy expressed being happy and thankful for the support received and excited to attend classes and for the food items purchased with the prepaid cards.</li> </ul>
10	Case 10	1	<ul style="list-style-type: none"> <li>The family used saved funds to purchase a table so that their daughter could have an adequate place to do her homework.</li> <li>The family complied with the requests made by PGN in the Protection Plan by attending recommended social services.</li> <li>The girl used to eat and do her homework on the bed or the floor. She now has a table to eat and do her homework.</li> </ul> <p><i>"I am very grateful for the support. Not only am I taking better care of my daughter, but I could also buy several things that she needed, clothes and a table to eat and do her homework. She loves drawing and painting (showing her work hanging on the wall)".</i> Mother</p>
11	Case 11	5	<ul style="list-style-type: none"> <li>The family complied with the requests made by PGN in the Protection Plan by attending recommended social services.</li> <li>The family took her daughter with disabilities to therapies and special education offered by the Down Syndrome Foundation.</li> </ul>
12	Case 12	2	<ul style="list-style-type: none"> <li>Significant economic support to buy food and hygiene supplies, mainly because the mother does not have a steady income.</li> <li>The mother has a physical disability. The two boys have a bond with the mother, and the 11-year-old son is concerned about her wellbeing.</li> </ul>

#	Family Case	Number of Children/ Adolescents per Family	Progress Made by Families
			<i>"I cannot work. I am desperate for what I'm going through. I worry about my kids. I don't want to be separated from them. Thank you for all the support". Mother</i>
13	Case 13	3	<ul style="list-style-type: none"> <li>The family could buy food for the girl who has Lupus and has a special diet.</li> <li>Funds saved used to pay for transportation costs to UNOP.</li> <li>Children show attachment to the mother, proof that they are protected and cared for in their home.</li> </ul> <i>"I am very thankful for all the support. My daughter needs a special diet and the doctor says I should buy everything at the supermarket because the meat there has a lower level of bacteria, but I cannot buy at the supermarket all the time" Mother.</i>
14	Case 14	5	<ul style="list-style-type: none"> <li>The family received legal assistance for birth registration, coordinated through the Municipality of Villa Canales.</li> <li>The family registered the birth of her three children at the RENAP National Registry.</li> <li>The family was enrolled in occupational workshops from the Protejo Program.</li> <li>Children expressed their joy for the support received and told caseworkers that sometimes their mom could not afford to meet their needs.</li> <li>Two adolescents resumed their studies and expressed their interest in following their educational guides and doing homework.</li> <li>The right to identity of three children was reinstated by registering their births formally at the RENAP Family Registry. They are expected to begin studying in the school year 2022.</li> </ul> <i>"They intended to harm me (someone reported me), but they did me good. I no longer have a job because of COVID, so your help is a blessing for my children and me. I am committed to making changes to improve and help my children".</i>
15	Case 15	6	<ul style="list-style-type: none"> <li>The family complied with the requests made by PGN in the Protection Plan by attending recommended social services.</li> <li>During the last visit, the teens expressed their anger caused by PGN interventions, claiming that they do not see any risks or the need to ensure the respect of their rights.</li> </ul>
16	Case 16	2	<ul style="list-style-type: none"> <li>The mother attended social services coordinated with the Villa Canales Municipal Services for Women.</li> <li>The mother is receiving the psychological assistance that she needs.</li> <li>The girls show a secure attachment to their mother. The older daughter looks excited to be able to complete her homework.</li> </ul>
17	Case 17	6	<ul style="list-style-type: none"> <li>The family could purchase clothing, shoes, and diapers for the infants.</li> <li>The prepaid cards to buy food helped them create a small savings fund.</li> </ul>
18	Case 18	2	<ul style="list-style-type: none"> <li>The cards represented significant economic support to procure food and hygiene items at a difficult time. The father had a recent</li> </ul>

#	Family Case	Number of Children/ Adolescents per Family	Progress Made by Families
			<p>accident that prevented him from getting a job or generating a steady income.</p> <ul style="list-style-type: none"> <li>Children are in their early years and show attachment to both parents.</li> </ul> <p><i>"I am going through tough times. I cannot work right now and give my children what they need, but with God's help, I will. Proof of that is the support that you are giving us for our children".</i> Father</p>

Table 2: Families achievements observed during home visits  
Source: Source: CTWWC Caseworkers' Follow-up Reports, 2021

## 8. Lessons Learned

- The Roadmap to Prevent Unnecessary Child-Family Separation is the result of a concerted effort between Guatemala's Attorney General and the Changing the Way We Care initiative to promote children's permanency in their family and community environment by analyzing the specific situation and prioritizing the child's best interest.
- The PGN-CTWWC process to prevent separation through household economic support, follow-up, and referral to social services with 18 families prevented unnecessary child-family separation. It contributed to keeping children within family protection settings.
- PGN and CTWWC team collaboration were positive and helpful to ensure that **66** children and adolescents remained in their family environment. This proves that assertive inter-institutional communication and access to the social services needed by the families can bring about significant changes to protect children's rights in vulnerable situations, preventing separation from their families and their admission to residential care.
- Case-analysis meetings held by caseworkers are crucial to study and discuss the options and opportunities for families and children at risk of separation.
- The process to facilitate access to social services allowed CTWWC and PGN to identify several organizations that can contribute to the special protection of children. Inter-institutional coordination and social services mapping were valuable tools to facilitate families' access to social services to support family strengthening and modifying non-assertive parenting patterns.
- Families remained motivated and willing to comply with PGN's Protection Plan, and CTWWC family strengthening and economic support helped ease their financial distress. They were able to focus on developing skills to provide better and more loving care to their children to avoid the risk of being separated from them for putting their rights at risk.

## 9. Conclusions

- CTWWC accompaniment and family and economic strengthening supported 66 children and adolescents from 18 families at risk of separation due to alleged violation of children's rights. After analyzing these allegations and weighing the child's best interest, caseworkers resolved these cases through an administrative process and following PGN's Protection Plan.
- Caseworkers referred 66 children and adolescents protected by administrative channels to social services and family strengthening activities given the underlying risk factors to avoid family separation and admission to residential care that would harm their integral development.
- CTWWC and PGN's family strengthening support and follow up to the Protection Plan helped reinstate the rights to **identity, education, health, and food** of 66 children and, more importantly, their right to remain with their family.
- As a result of caseworkers' accompaniment, 18 families started developing assertive tools to protect and care for their children. The economic support received helped them reduce their

financial stress and meet essential needs such as buying food and hygiene items. They also saved funds to invest in their income generation activities, allowing parents to focus on improving child care practices and the relationship with their children.

- Inter-institutional coordination and prevention efforts that lead to the implementation of a roadmap to prevent unnecessary child-family separation stressed the importance of articulating interventions to prevent children's separation from their family environment as long as their families can guarantee the protection of their rights.
- Accompaniment to 18 families provided evidence that poverty and economic pressure impact children's healthy development due to the lack of access to essential health, housing, nutrition, and education, leading to violations of children's fundamental rights.

## 10. Recommendations

For Guatemala's Attorney General (PGN):

- Continue creating inter-institutional strategies with the organizations working in the child protection system, governmental and non-governmental organizations for more effective interventions and prevent children from exposure to risk situations that can limit their integral development.
- Continue accompanying families to prevent family separation and help children develop in a safe family environment with assertive parenting practices.
- Continue raising Guatemalan families' awareness about the importance of respecting children's rights as they are the most vulnerable population in the country. Many of the threats and violations of their fundamental rights occur for not knowing these rights.
- Welcome inter-institutional coordination opportunities with other programs to support children, especially those who live in poverty and lack access to basic services. All this is to prevent unnecessary child-family separation.

## 11. References

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## 12. Annexes

### Annex 1. PGN/CTWWC Detailed Report

#### DETAILED REPORT AND PROTECTION PLAN FOR ANALYSIS AND APPROVAL OF HOUSEHOLD ECONOMIC SUPPORT TO FAMILIES TO PROMOTE THE CHILD'S PERMANENCY WITH HIS/HER FAMILY

Date of the Child Concern Report: \_\_\_\_\_ # Number of Report: PGN-CRS-01-21

#### BACKGROUND INFORMATION

Child's Personal Data included in the report:

#	FULL NAME	BIRTHDATE	AGE	SCHOOLING LEVEL	HAS A DISABILITY? YES or NO TYPE OF DISABILITY?
1					
2					
3					

Other children living in the household identified when conducting a psychosocial investigation.

#	FULL NAME	BIRTHDATE	AGE	SCHOOLING LEVEL	HAS A DISABILITY? YES or NO TYPE OF DISABILITY?
1					
2					
3					

Date of the child concern report: \_\_\_\_\_

Summary of the child concern report or background information:

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\_\_\_\_\_

\_\_\_\_\_

Alleged violated rights:

\_\_\_\_\_

Date of psychosocial investigation: \_\_\_\_\_

Name of the interviewee during the psychosocial investigation: \_\_\_\_\_

Relationship to the child or adolescent: \_\_\_\_\_

Name of the family care option living with the child or adolescent at the time of the psychosocial investigation: \_\_\_\_\_

Relationship to the child or adolescent: \_\_\_\_\_

Location and municipality where the family care option lives: \_\_\_\_\_

Telephone/cellular phone of the family care option: \_\_\_\_\_

Personal ID of the family care option: \_\_\_\_\_

#### **FINDINGS OF THE CHILD'S SITUATION DURING THE PRELIMINARY INVESTIGATION**

Were the children mentioned in the concern report interviewed: Yes \_\_\_\_ No \_\_\_\_

#### **NAME OF THE CHILDREN/ADOLESCENTS INTERVIEWED**

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

6. \_\_\_\_\_

## SUMMARY OF THE CHILD'S OPINION ABOUT THE FAMILY CARE OPTION IDENTIFIED

Family Relationship: Good \_\_\_\_\_ Regular \_\_\_\_\_ Poor \_\_\_\_\_

The child wishes to stay with the family care option identified: Yes \_\_\_\_\_

No \_\_\_\_\_

The child is aware of the concern report made to PGN: Yes \_\_\_\_\_ No \_\_\_\_\_

Summary of the opinion of the child about the concern report made to PGN  
against the child's caregivers:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## SUMMARY OF THE CHILD'S PHYSICAL AND EMOTIONAL STATUS

During the interview, the child/adolescent appears to be:

Stable \_\_\_\_\_ Confused \_\_\_\_\_ Evasive \_\_\_\_\_ Trusting \_\_\_\_\_

The child/adolescent report that when they are with their caregivers they feel:

Happy \_\_\_\_\_ Sad \_\_\_\_\_ Fearful \_\_\_\_\_ Safe \_\_\_\_\_

Child/adolescent's physical appearance:

Clean \_\_\_\_\_ Dirty \_\_\_\_\_ Healthy \_\_\_\_\_ Sick \_\_\_\_\_ Sloppy \_\_\_\_\_

Children's social risks identified during the interview for the preliminary investigation. Tick all that apply:

Neglect and negligent treatment \_\_\_\_\_ Family Disintegration \_\_\_\_\_ Violence  
\_\_\_\_\_ Abandonment \_\_\_\_\_  
Low schooling level \_\_\_\_\_ Malnutrition \_\_\_\_\_ Inadequate Parenting Patterns  
School Dropout \_\_\_\_\_ Addiction problems \_\_\_\_\_ Unemployment \_\_\_\_\_ Lack of a  
house \_\_\_\_\_  
Belonging to an antisocial group \_\_\_\_\_ Low economic resources \_\_\_\_\_

The case was resolved through an administrative process: Yes \_\_\_\_\_ No \_\_\_\_\_

Reason: \_\_\_\_\_

Findings during the psychosocial investigation (based on the concern report):

Please tick all the services that you consider necessary to strengthen the child's family and prevent unnecessary separation.

Parenting training \_\_\_\_\_ Health and nutrition services \_\_\_\_\_  
Psychological support for the child \_\_\_\_\_ Psychological support for the caregiver \_\_\_\_\_  
Registration of birth \_\_\_\_\_ Household economic support \_\_\_\_\_  
Education: \_\_\_\_\_ Other: \_\_\_\_\_

If "other", please specify: \_\_\_\_\_

## REFERRAL FOR SOCIAL SERVICES

#	Name of the Child or Relative	Social Services referred to	Reason	Right to be reinstated through the service	Name of the Organization and Contact	Date for Referral
1						
2						
3						
4						
5						
6						
7						

Protection Plan start date: \_\_\_\_\_

Type of follow up

Monthly: \_\_\_\_\_ Bimonthly \_\_\_\_\_ Quarterly: \_\_\_\_\_ Other: \_\_\_\_\_

Date of the most recent home visit for psychosocial follow up to the Protection Plan: \_\_\_\_\_

**FAMILY'S CURRENT PSYCHOSOCIAL STATUS (This information should be included to determine the feasibility of the economic support)**

**ECONOMIC AND EMPLOYMENT STATUS OF THE CURRENT CAREGIVER**

¿Is he/she currently working? YES or NO		Profession or occupation		
		Type of work		
Monthly Salary or Income in Q.	Q	Job location		
Other Monthly Income: (Support from another relative, spouse, subsidy, etc.)	Q	Monthly expenses:	Expenses	Value
Total Monthly Income	Q.	Total Monthly Expenses		

**FINANCIAL SUPPORT OR SUBSIDY RECEIVED**

Financial Support	Yes		No		Indicate Amount, Frequency, and Sender	
In-kind	Yes		No		Indicate Amount, Frequency, and Sender	

**HOUSEHOLD SITUATION (Describe the household conditions)**

Number of people in the family group		Number of people living in the house	
Notes and/or comments:			

## HEALTH STATUS

**When someone in the house gets sick, where does he/she go?**

☐ Hospital      ☐ Health Center      ☐ Health post      ☐ Does not receive medical attention

Why? \_\_\_\_\_

☐ Other. Specify \_\_\_\_\_

**Does anyone in the household have a disease such as:**

Respiratory infection, gastrointestinal, dermatological, or neurological disease, cancer, high blood pressure, obesity, diabetes, etc.

☐ Yes      ☐ No

If the answer is yes, what is the disease or diseases? \_\_\_\_\_

**Does anyone in the household have a disability?**

☐ Yes      ☐ No

If so, please indicate what form of disability.

\_\_\_\_\_

Are caregivers older people (ages 60+)?      Yes ☐      No ☐

Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## BIOPSYCHOSOCIAL PROBLEMS IDENTIFIED IN ANY MEMBER OF THE FAMILY (Family care option or another family member)

☐ Deprivation of liberty      ☐ Crime      ☐ Street situation      ☐ Mendicancy  
☐ Alcoholism      ☐ Discrimination      ☐ Addictions      ☐ Illiteracy  
☐ Member of a gang      ☐ Injustice      ☐ Poverty      ☐ Unemployment  
☐ None      Other, please specify \_\_\_\_\_

**Specify which member of the family has any of the problems mentioned above**

\_\_\_\_\_

## IDENTIFIED FAMILY'S STRENGTHS

*The psychosocial team can determine the strengths based on the information collected in the interview. If possible, ask the interviewee to state his/her strengths related to the reintegration benchmarks - protection, health, education, psychosocial wellbeing, child/caregiver relationship, and household economy.*

### STRENGTHS

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### OPPORTUNITIES

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### WEAKNESSES

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**CURRENT SITUATION OF THE CASE IN TERMS OF PROTECTION, HEALTH, EDUCATION, PSYCHOSOCIAL WELLBEING, CHILD-CAREGIVER RELATIONSHIP AND HOUSEHOLD ECONOMY (Summary of main points)**

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#### Psychosocial team that conducted the case investigation

Name: \_\_\_\_\_ Position: \_\_\_\_\_ Phone number: \_\_\_\_\_

Name: \_\_\_\_\_ Position: \_\_\_\_\_ Phone number: \_\_\_\_\_

## Annex 2. Case Identification Form

### CHILD IDENTIFICATION

PGN.001

CTWWC file number: \_\_\_\_\_

Date when the child or adolescent was referred to CTWWC in case-analysis meeting: \_\_\_\_\_

*Caseworkers use this tool to identify children who are living in their home but who were referred to social services to prevent rights violation and promote their permanency with their current family environment. This information was obtained by reviewing PGN's detailed report on the case and the data provided during the psychosocial teams' case analysis and review meeting. It serves as a baseline to begin a family and economic strengthening support to prevent child-family separation as part of the CTWWC initiative.*

Full name of the child/adolescent: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Age: \_\_\_\_\_

Is he/she currently studying: \_\_\_\_\_ Current grade: \_\_\_\_\_

Is the child under family care now? YES \_\_\_\_\_ NO \_\_\_\_\_

Was the case solved through an administrative process? YES : \_\_\_\_\_ NO \_\_\_\_\_

Date when PGN learned about the child concern report: \_\_\_\_\_

Reason for the child concern report:

\_\_\_\_\_  
\_\_\_\_\_

Alleged violated rights for the consideration of PGN: \_\_\_\_\_

Protection Plan start date: \_\_\_\_\_

Date of the latest action taken by PGN (home visit, phone follow-up), specify the actions taken and date:

\_\_\_\_\_  
\_\_\_\_\_

Family's progress in implementing the Protection Plan:

\_\_\_\_\_  
\_\_\_\_\_



## CURRENT FAMILY CAREGIVER

Name of current family caregiver living with the child/adolescent: \_\_\_\_\_

Relationship to the child: \_\_\_\_\_

Address where the child lives: \_\_\_\_\_

Phone number of the family caregiver: \_\_\_\_\_

## REASON TO INCLUSION IN CTWWC's FAMILY AND ECONOMIC STRENGTHENING PROGRAM

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Name of the professional responsible: \_\_\_\_\_

Signature of the professional responsible: \_\_\_\_\_

## *Annex 3. Case-Analysis Meeting Report*

### **PRESENTATION**

As part of PGN and CTWWC's inter-institutional coordination to support the families identified by the PGN and prevent unnecessary child-family prevention and residential admission, CTWWC will provide economic strengthening support to the families that meet the criteria established in the verification report. Caseworkers conduct case-analysis meetings to analyze each case and agree on integral interventions to serve children and their families while fostering constant communication among PGN multidisciplinary teams.

The following is a proposed report format to facilitate documenting the team's discussion during the case-analysis meetings and visualizing the goals and agreements reached by the multidisciplinary teams for each case.

#### Case-Analysis Meeting Report format

##### **Heading**

1. Date of the case-analysis meeting
2. Number of the current meeting
3. Suggested date for the next case-analysis meeting

##### **Participants**

Name and position of the participants and name of the organization.

##### **Report of the cases analyzed**

1. Case number
2. Name of the child or adolescent
3. Name of the current family caregiver
4. Summary of the reason why they learned about this case
5. Proposed PGN psychological team
6. Proposed CTWWC psychological team
7. Agreed goals
8. Dates of the intervention

**Other matters discussed:** Registering other matters addressed in the case-analysis meeting (even if it is unrelated to case analysis) is crucial for family strengthening activities such as referral to social services.

**Overall Agreements:** Register the agreements reached that are unrelated to the case analysis.

Date: \_\_\_\_\_ Number of Case-Analysis Meeting: \_\_\_\_\_ Suggested date for the next meeting: \_\_\_\_\_

Name of the participants	Position	Name of Organization

#### CASE ANALYSIS AND AGREEMENTS

Case number	Name of the child or adolescent	Name of the current family caregiver	Reason why the case was known	Proposed PGN team	Proposed CTW/WC team	Agreed Goals	Dates of the Intervention (tentative)
Other issues addressed:							
Overall Agreements:							

Need to know more? Contact Changing the Way We Care at [info@ctwwc.org](mailto:info@ctwwc.org) or visit [changingthewaywecare.org](http://changingthewaywecare.org).

To provide feedback on this resource, scan the QR code.

