







A Study on Child Care Reform in Latin America and the Caribbean Aimed at Developing a Regional Advocacy Strategy

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Changing The Way We Care

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List of Acronyms

ASOCRIGUA	Asociación de Hogares Cristianos de Guatemala - Association of Christian Orphanages in Guatemala	
CAFO	Christian Alliance for Orphans	
CIPRODENI	Coordinadora Institucional de Promoción por los Derechos de la Niñez - Institutional Coordinator for the Promotion of the Rights of the Child	
CNA	Consejo Nacional de Adopciones en Guatemala - National Council for Adoptions in Guatemala	
CRAS	Centros de Referencia de Asistencia Social - Social Assistance Referral Centers	
CREADs	Centros Residenciales, Chile - Residential Centers, Chile	
CTWWC	Changing the Way We Care	
DI	Deinstitutionalization	
DINAF	Dirección de Niñez, Adolescencia y Familia (Honduras) - Directorate for Children, Adolescents and the Family (Honduras)	
FAE	Programa Familias de Acogida Especializadas (Chile) - Specialized Foster Families Program (Chile)	
ICBF	Instituto Colombiano de Bienestar Familiar - Colombian Institute for Family Welfare	
LAC	Latin-America and the Caribbean	
NGO	Non-governmental organization	
NNA	Niñas, niños y adolescentes - Girls, boys, and adolescents	
NNAsD	Niña, niño y adolescente en situación de discapacidad - Girl, boy, and adolescent with a disability	
PANI	Patronato Nacional de la Infancia (Costa Rica) - National Children's Trust (Costa Rica)	
RELAF	Red Latinoamericana de Acogimiento Familiar - Latin American Foster Care Network	
SBS	Secretaría de Bienestar Social de la Presidencia de la República de Guatemala - Presidential Secretariat for Social Welfare of the Republic of Guatemala	
SENAME	Servicio Nacional de Menores (Chile) - National Service for Minors (Chile)	
UN	United Nations	
UNICEF	United Nations International Children's Fund	
USAID	United States Agency for International Development	

Glossary of Key Terms

Best interests of the child: A flexible and adaptable concept that must be adjusted and defined according to each child's specific and individual needs. Determining the best interests of the child requires a clear and thorough assessment of the identity of the child and, in particular, of their nationality, their upbringing, and their ethnic, cultural and linguistic background, as well as their vulnerabilities and special protection needs.¹ The decisions pertaining to the child should also be made and assessed on a case-by-case basis.²

Case management process: A framework for organizing, planning, and implementing the different stages of prevention, reintegration, and adoption of children and adolescents who are deprived of parental care or at risk of separation. It begins when a child or adolescent is identified as having some type of vulnerability or is in a situation that requires support or assistance. Case management involves a social worker, a psychology professional, and/or a team of professionals assessing the needs of the case and organizing, coordinating, supervising, and defining a range of services to meet the needs of the specific case. It involves the participation of all institutions of the child and adolescent protection system in each stage of the protection process.³

Child (girl and boy) or adolescent: The Convention on the Rights of the Child considers any person under the age of 18 to be a child. The Guatemalan Law for the Comprehensive Protection of Children and Adolescents (Ley de Protección Integral de la Niñez y Adolescencia de Guatemala, or Ley PINA, in Spanish) states that a child is any person from the moment of conception to 13 years of age, and an adolescent is any person between the ages of 13 and 18.⁴

¹ Red Latinoamericana de Acogimiento Familiar -RELAF- (Latin American Foster Care Network). (2014). Manual sobre estándares internacionales de derechos humanos aplicables a los niños, niñas y adolescentes migrantes (Manual on international human rights standards applicable to migrant children and adolescents); p. 24.

² Committee on the Rights of the Child. (2013). General comment No. 14 (2013) on the right of the child to have his or her best interests taken as a primary consideration (art. 3, para. 1). Retrieved from: https://www.observatoriodelainfancia.es/ficherosoia/documentos/3990 d CRC.C.GC.14 sp.pdf

³ Changing The Way We Care (2020). Aplicación de la metodología del proceso de manejo de casos (Application of the Case Management Methodology Process). (pp. 10-11)

⁴ Decree 27-2003. Law for the Comprehensive Protection of Children and Adolescents. (2003). Article 2.

Child care reform: The changes in the systems and mechanisms used to promote and strengthen the capacity of families and communities to care for their children in a family environment. It addresses the care and protection needs of vulnerable or at-risk children and adolescents to avoid separation from their families, the decrease in reliance on residential care, the promotion of the reintegration of children and adolescents into families, and ensuring family-based care options.⁵

Child protection system: A comprehensive system of laws, policies, procedures, and practices designed to ensure the protection of children and to facilitate an effective response to allegations of child abuse, neglect, exploitation, and violence.⁶

Deinstitutionalization: The process of closing residential care institutions and providing alternative family-based care within the community. Comprises all efforts to return the child or adolescent to family-based care.⁷

Duties: The main activities or responsibilities of those who work in the system for the protection of children and adolescents.

Foster family/temporary care: A family that, without having legal kinship by blood or marriage, temporarily takes in a child or adolescent who is deprived of his/her biological or extended family environment, declared at risk, or whose right to a family has been violated. According to the UN Guidelines, these are cases where a competent authority places the child in the domestic environment of a family that is not the child's own family and which has been selected, qualified, approved, and supervised for the purpose of alternative care.⁸

Human resources working in child and adolescent protection: A concept developed based on the UNICEF global definition of Social Service Workforce for Child Protection (SSW) and contextualized to the Latin American and Caribbean

⁵ Better Care Network. (2020). Glossary of Key Terms. Retrieved from: Better Care Network: https://bettercarenetwork. org/toolkit/glossary-of-key-terms

 $^{6\} Better\ Care\ Network\ Toolkit.\ Retrieved\ from: \underline{https://bettercarenetwork.org/toolkit/glossary-of-key-terms \underline{\#C}}$

⁷ Better Care Network. (2020). Glossary of Key Terms. Retrieved from: Better Care Network: https://bettercarenetwork.org/toolkit/glossary-of-key-terms

⁸ Supreme Court of Justice, Agreement 40-2010, Op. Cit. Article 8.

region.⁹ The human resources that work within the system for the special protection of children and adolescents consist of those individuals with the necessary competencies to conduct preventive and responsive actions against violence, abuse, exploitation, neglect, and family separation suffered by children and adolescents in conflict with the law. These individuals act under the regulation and supervision of the state in line with international standards on the matter regardless of whether they are from government or non-governmental organizations (NGO) and/or they have/do not have professional qualifications.

Neglect: The intentional or unintentional failure of a caregiver – individual, community, or institution (including the state) with clear responsibility by custom or law for the well-being of the child – to protect a child from actual or potential harm to the child's safety, wellbeing, dignity, and development, or to fulfil that child's rights to survival, development, and wellbeing. Harm may be visible or invisible. An act may be categorized as neglectful, whether or not the caregiver intends to harm the child.¹⁰

Prevention of separation: Refers to the decision-making processes and procedures that are implemented to avoid unnecessary child-family separation and to ensure that when separation occurs, foster care decisions are based on the best interests of each individual girl, boy, or adolescent. This control is based on careful assessment and individualized case management to inform decision-making processes at various stages.

Reintegration: The process of transition and permanent return of a child or adolescent to a 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 following reunification and implies that an emotional bond has been established between the child and the family, and that the reintegration has been sustainable and healthy.¹¹

⁹ Definition adapted from the Global Social Service Workforce Alliance and found in United Nations Children's Fund (2019). Guidelines to Strengthen the Social Service Workforce for Child Protection. UNICEF, New York. Retrieved from: https://www.unicef.org/reports/guidelines-to-strengthen-social-service-workforce-for-child-protection-2019

¹⁰ Elliott & Thompson. (2019). Discussion Paper: Review of Existing Definitions and Explanations of Abuse, Neglect, Exploitation and Violence against Children (p.12) Retrieved from: https://alliancecpha.org/en/system/tdf/library/attachments/report_on_cp_definitions_low_res.pdf?file=1&type=node&id=33505

¹¹ Guillermo, Vanesa y *CTWWC*. (2020). Aplicación de la metodología del proceso de manejo de casos (Application of the Case Management Methodology Process). Guatemala Report. Publication pending. Guatemala, Guatemala.

Reunification: The physical reunion of a separated child or adolescent with his/her family or previous caregiver. Reunification refers only to the physical return of the child to a family, with the goal of becoming a permanent family.¹²

United Nations Guidelines for the Alternative Care of Children: The guidelines for policy and practice intended to enhance the implementation of the Convention on the Rights of the Child and relevant provisions of other international instruments regarding the protection and well-being of children deprived of parental care or at risk of being deprived.¹³

¹² Better Care Network. (2020). Glossary of Key Terms. Retrieved from: Better Care Network: https://bettercarenetwork.org/toolkit/glossary-of-key-terms

¹³ United Nations General Assembly (2010). Guidelines for the Alternative Care of Children (p.1) Resolution approved by the GA on February 24, 2010, A/RES/64/142.

Executive Summary

The Latin America and Caribbean region is one of the most unequal regions in the world in terms of income. The richest 10% of the population captures 22 times more of the national income than the poorest 10%. The richest 1% take 21% of the entire economy's income, twice the average of the industrialized world. These stark differences in income represent just one of several forms of inequality that undermine social cohesion and a sense of belonging to something greater than oneself. Gender, race, ethnicity, as well as income, are powerful determinants of access to health care, education, employment, and the legal system. Inequalities begin early in life and grow larger during childhood and adolescence, giving children of different backgrounds unequal opportunities to grow and develop.¹⁴

According to data from Lumos,¹⁵ there are an estimated 8 million children and adolescents living in institutions, often referred to as orphanages, around the world. At least 80% of these children are not orphans. It is estimated that in 2012, according to data from UNICEF,¹⁶ there were more than 240,000 institutionalized children and adolescents in Latin America and the Caribbean. This data is only an approximation, given that several countries in the region face a significant weakness in the collection and regular updating of the records of children under state tutelage.

In this context, the scenarios of vulnerability for children, adolescents, and their families in the region become risky and highly complex. Therefore, it is important to reflect on the way in which our countries have cared for children and their families. The stakeholders interviewed conclude that child care reform should involve a coordinated effort to modify or update laws and policies, reallocate funds, and inform and train government and private stakeholders involved in child care, to build a system that responds to the best interests of the child.¹⁷ They view reform as a necessary strategy aimed at transforming child and adolescent care systems to prioritize

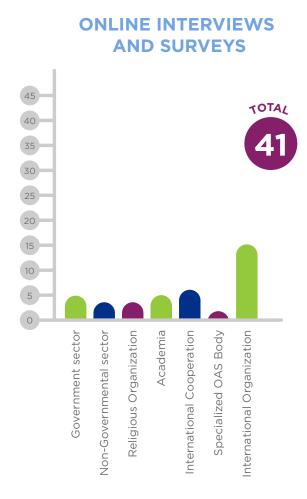
¹⁴ Edited by Busso Matías and Messina Julián. (2020). Inter-American Development Bank (IADB), La crisis de la desigualdad América Latina y el Caribe en la encrucijada (The crisis of inequality Latin America and the Caribbean at a crossroads). Page xiii.

¹⁵ Lumos. (2017). Children in orphanages: a hidden global problem. Retrieved from: https://lumos.contentfiles.net/media/documents/document/2017/02/Lumos Factsheet US.pdf

¹⁶ Palummo, J. (2013). La situación de niños, niñas y adolescentes en las instituciones de protección y cuidado de América Latina y el Caribe (The situation of children and adolescents in institutions of protection and care in Latin America and the Caribbean). Panamá. UNICEF. Retrieved from: https://www.relaf.org/biblioteca/UNICEFLaSituaciondeNNAenInstitucionesenLAC.pdf

¹⁷ Velásquez Paz, Ingrid Lorena. (August 21, 2020). Online Survey. Secretaría de Bienestar Social de la Presidencia de la República de Guatemala (Presidential Secretariat for Social Welfare of the Republic of Guatemala)

family alternatives in order to promote the integral development of children and adolescents in situations of vulnerability and at risk of family separation.¹⁸ This entails the strengthening of care for families and communities, investing more in generating protective spaces in accordance with the standards of human rights-based care, and prioritizing the right of children to live in a family in dignified living conditions.¹⁹



Graph 2: Participants in online interviews and surveys. Source: Study on Child Care Reform in the Latin America and Caribbean Region -CTWWC- August 2020.

Although there is no concurrence as to what the strategy for child care reform should encompass, experts describe this concept as a "paradigm shift," "a change in perspective," "systemic change," "the transformation of old models," "transformation strategy," "process," "change of management model," and "conversion," among others. Most stakeholders define it as responsible processes of deinstitutionalization and refocusing on family care by strengthening alternative care options. Others refer to it as a shift in focus towards preventing and understanding the causes of family separation. It is also described as a process that is not universal to the entire region, but one in which each country progresses differently from its peers.

The concepts of child protection systems and child care systems also vary in the region. Some experts state that child protection systems guarantee children and adolescents the enjoyment of fundamental rights in a universal manner, through a preventive approach and by ensuring access to support services for families. On the other hand, the child care system is typically understood as responding only in cases where caregivers

¹⁸ Oswald Ellie. (August 26, 2020). Online survey translated to English, Faith to Action Initiative

¹⁹ Velásquez Paz, Ingrid Lorena. (August 21, 2020). Online Survey. Secretaría de Bienestar Social de la Presidencia de la República de Guatemala (Presidential Secretariat for Social Welfare of the Republic of Guatemala)

have violated these rights and it is necessary to restore them through a family-based care approach; that is, an interceptive approach. Others interpret the two concepts in reverse. In countries such as Mexico and Costa Rica, the term used to refer to the child protection system is Integral Protection System; and in Argentina, the child care system is known as a Special Protection System.

CTWWC conceptualizes child care reform as changes in protection systems and mechanisms to promote and strengthen the capacity of families and communities to care for their children in a safe and welcoming family environment.

In this view, care reform is comprised of three essential components, (i) strengthening the family and preventing the unnecessary separation of the child from its family environment, (ii) deinstitutionalization processes; and (iii) strengthening alternative family care. ²⁰ Building on these essential components of child care reform, the *CTWWC* initiative conducted this regional study to gather promising care reform practices from key stakeholders, including multilateral, government, non-governmental, and religious organizations that are participating in or leading efforts in care reform in the region.

The methodology for the study consisted first of a comprehensive review of 71 documents. These included secondary data analysis, regional policies, advocacy documents, peer-reviewed articles, and global documents that highlighted child care reform initiatives in the region, as well as regional reports from multilateral agencies and NGOs. An important finding was that, at the Latin American and Caribbean regional level, there is a lack of systematization of experiences in child care reform. For this reason, experiences in other continents where child care reform has been developing for a longer period of time were also analyzed.

The second line of research consisted of virtual and written interviews with experts in child care reform in the Latin American region and other parts of the world. Between August 17 and September 16, 2020, 40 key stakeholders participated in 10 virtual interviews and 31 online questionnaires, contributing to 41 resources (see Graph 2).

In the Latin American context of structural inequalities, the COVID-19 crisis has developed at an unprecedented rate and with distributive repercussions. Conducting a study of this nature in the midst of a pandemic therefore meant that it was a

²⁰ Changing the Way We Care Guatemala. (2019). Fortaleciendo el Sistema de Cuidado Infantil en Guatemala para apoyar el Cuidado Familiar (Strengthening the Child care System in Guatemala to support Family Care). Guatemala, Guatemala.

challenge for key stakeholders to find time for interviews or respond to the online survey, given that themselves were immersed in an emergency context.

The changes or actions that are needed to promote child care reform in the region begin with the conviction that a new approach to care is needed. The transition from knowledge to practice is a complex process that may be possible if the stakeholders agree to invest in families to prevent separation, decrease reliance on residential facilities, and provide more and better family-based alternative care options. Currently, civil society is behind most of the child care reform efforts in the region. Implementing organizations struggle to come together in a single coalition and coordinate their programs, which leads to unintended duplication of efforts or interventions that do not build on lessons learned from other peers.

Some countries have achieved legislative reforms toward improving child protection systems, and although these are not sufficient and do not occur uniformly in the region, it is a start. It is clear that public policies in general are outdated in the region and that few, if any, spaces have been established for the authentic participation and involvement of children, adolescents, families, and communities in the construction and implementation of these policies. Rather than increasing budget allocations, it is important to ensure that funds or resources are redirected to interventions that have been shown to work. Each country's political context defines its government's priorities and determines which aspects of child care reform are most likely to move forward and which should await a different political moment.

Child care reform in the region does not have enough reliable studies and information to accurately portray the current situation of children and adolescents, which is constantly changing. Nor is there enough scientific evidence on effective approaches or interventions in the region to enable governments to make more efficient and sound policy decisions. Few interventions have the support necessary to systematize their experiences nor a scientifically-based methodology to verify their effectiveness. Many countries are thus stuck in a vicious cycle of investing and reinvesting in isolated interventions that further distance them from identifying sustainable and evidence-based approaches.

At the general level, there seems to be an understanding that interventions aimed at preventing family separation and strengthening the family should be a major commitment of the Latin American and Caribbean region to complement efforts in deinstitutionalization and family reintegration. Currently, there are some

evidence-based interventions underway in this area. Although they are still scarce, these efforts may begin to provide answers to the question of "How?" and in this way contribute to expanding prevention and family strengthening interventions with a higher probability of success than in the past.

Strategies to foster a change of culture towards a better understanding of and support for child care reform have better success rates if children and adolescents, as well as their families, communities, and community leaders, initiate them at the local level. The methods with the best results are those that combine the components of evidence and testimonies of those with lived experience.

Even with its difficulties, the COVID-19 crisis has created new opportunities for stakeholders, organizations, and governments to find creative and effective solutions to the issue of care for children and adolescents. The crisis has opened up virtual options for expanding knowledge beyond borders and reaching families remotely to further processes of deinstitutionalization. However, institutional weakening through budget cuts and a decrease in active human resources are evident, as is the slowing down of administrative and judicial proceedings that should define the family situation of each child and adolescent within a more reasonable time frame.

The study offers the following general recommendations for accelerating and deepening care reform in the region.

- 1. Countries must consider the resources available to them for implementation of care reform efforts. Whether it is the beginning or the continuation of reform efforts, the process must follow a plan. It must also ensure that its budget includes funds for monitoring and evaluation in order to report results. In addition, it is important to consider the formula of technical international cooperation + government + civil society, which in many cases can be an effective way to carry out interventions with an evidence-based approach and can encourage the participation of the academic sector.
- 2. Civil society, with its infrastructure and resources; the faith-based sector, with its wide influence on the families who are among its congregants; and the academic sector, which has the skills and knowledge to support the generation of scientific evidence are important resources that governments should harness strategically and intentionally.
- **3.** As key starting points, it is recommended that states prioritize the creation of databases and studies on children and adolescents in the national child protection system to provide the first-hand information required to make appropriate decisions.

- **4.** Government initiatives should include opportunities for authentic participation from children and adolescents, families, and communities with some degree of lived experience in the care system, thus facilitating the process of ownership of these initiatives or interventions.
- 5. There is an urgent need to strengthen efforts to prevent separation and to strengthen families, since it is at this stage that it is possible to protect children and adolescents before their rights are violated or the violations worsen. In the context of the pandemic, this need becomes even more critical.

Recommendations for the Development of a Regional Strategy

- The experts interviewed in the study advise that *CTWWC* should integrate its efforts with those stakeholders in the region who have expressed a desire to work collaboratively and be part of a coalition that promotes the right of children and adolescents to live in a family, but with a more ambitious scope than in the past.
- A regional advocacy strategy should include the application of an Evidence + Testimonies formula²¹ for each of its core objectives. Engagement with the academic sector should be pursued for its potential contributions to the scientific base and for program monitoring and evaluation efforts. There are already initiatives basing their methodology on these practices, which can be useful as test cases and thus contribute to the messaging of a regional advocacy strategy.
- Documenting experiences from and maximizing the potential of the faith-based sector, such as the case of Casa Viva Solutions in Costa Rica which has transformed residential centers into community service providers, is also an important element for a regional strategy. A faith-based approach can a) help to influence other faith-based residential care facilities, b) use the influence of faith leaders to educate the population about the importance of protecting a child's right to live in the family, and c) promote the redirection of funds or donor contributions to support the conversion of residential facilities.
- There are substantial differences in the messages and concepts used at the regional level among key stakeholders to promote the need for child care reform. Messages, even while respecting their differences, need to have a

²¹ The stakeholders interviewed concurred that having both evidence from our programs and testimonies from the children and families involved, is what ultimately influences decision makers and will lead to action around care reform.

common thread and must be contextualized to ensure that they are effective in influencing their target population. Advocacy efforts must be respectful of diversity and promote unity. Messaging which is developed from participatory processes at the local level and promoted by local leaders, will reflect a greater sense of ownership.

An important opportunity has been created by the COVID-19 pandemic. The conditions of confinement, reduced access to health and education, and severe impacts on employment and local economies have been felt globally. As such, a regional advocacy strategy around care reform may now find more fertile ground for its messaging, given that society at large is likely to be more sensitive to the needs, obstacles, and challenges faced by children and families who have struggled with these adverse living and development conditions since well before the pandemic²².



²² Alianza Cristiana para los Huérfanos (Christian Alliance for Orphans): Religión Pura (Pure Religion) (April 14 2020. Todos somos vulnerables (We Are All Vulnerable). Podcast retrieved from: https://open.spotify.com/episode/0ca2W10eiUkvfw5TBVo3p1?si=ctoHDox7T1GzqTDunotDdQ

I. Background

1. What is Care Reform and Why is It Important?

Worldwide, actions are being encouraged to promote child care reform based on the premise that a child or adolescent should grow up in a protective and nurturing environment, avoiding unnecessary separation from his or her family. If a case arises where a child needs to be separated from his/her family, family-based care options should be favored as a first option rather than placement in residential care.



Figure 1: Child care reform.

Source: Changing the Way We Care (CTWWC) Guatemala

Worldwide actions are being encouraged to promote child care reform based on the premise that a child or adolescent should grow up in a protective and nurturing environment, avoiding unnecessary separation from his or her family. If a case arises where a child needs to be separated from his/her family, family-based care options should be favored as a first option instead rather than placement in residential care.

In 2012, according to UNICEF, there were more than 240,000 institutionalized children and adolescents in Latin America and the Caribbean. This data is only an approximation, despite the fact that governments that adhere to the UN Guidelines for the Alternative Care of Children are required to keep rigorous records of such data,²³ demonstrating that there is a huge weakness in the collection and upkeep of records of children and adolescents under state tutelage in several countries, making it difficult to establish a baseline of accurate information for early and timely decision-making.

While it is true that governments must prioritize the protection of children and adolescents, they must also develop and implement a spectrum of family-based

²³ Palummo, J. (2013). La situación de niños, niñas y adolescentes en las instituciones de protección y cuidado de América Latina y el Caribe (The situation of children and adolescents in institutions of protection and care in Latin America and the Caribbean). Panamá. UNICEF. Retrieved from: https://www.relaf.org/biblioteca/UNICEFLaSituaciondeNNAenInstitucionesenLAC.pdf

alternatives and options to prevent even greater violations of children's rights. This should include restitution, to the extent possible, to those children whose rights have been violated and measures to ensure that the violations are not repeated.

Failure to consider other alternatives is, in and of itself, a violation of the rights of children and adolescents by those who are responsible for their best interests. It also deprives children and adolescents of the right to a family, as mandated by international guidelines such as the Convention on the Rights of the Child²⁴ and the UN Guidelines for the Alternative Care of Children²⁵ (hereafter referred to as "the Guidelines"). These other options focus on the care of children and adolescents in safe families, who receive institutional and community support through a range of services focusing not only on the children and adolescents themselves (as is the case with institutionalization), but also on their environment and their caregiver(s).

Initiatives by various organizations and the government sector in the region, many of which have contributed to this study, have highlighted the need for systemic change in the form and principles by which child protection systems are currently designed throughout Latin America and the Caribbean. Care reform as such consists of, among other factors, coordinated and unified actions which replace fragmented efforts and ensure a strengthened regional approach that serves the best interests of children and adolescents.

2. What Was the Objective of the Study?

The *CTWWC* initiative undertook this study with the aim of compiling promising practices in care reform implemented by multilateral, governmental, non-governmental, and religious stakeholders in the region leading or participating in diverse care reform efforts.

These efforts include policy development, knowledge sharing, programming, partnerships, and advocacy that address system change through family strengthening (prevention), the expansion of family-based alternative care, and deinstitutionalization, including the transformation of services. The theory of change behind this research suggests that by demonstrating what works, documenting lessons, and using these to influence others, child care reform will be scaled at the national, regional, and global levels.

²⁴ Convention on the Rights of the Child. (1989). United Nations.

²⁵ United Nations General Assembly (2010). Guidelines for the Alternative Care of Children. Retrieved from: https://www.refworld.org.es/docid/4c3acd782.html

II. Methodology

1. Process of Information Gathering and Analysis

The study on child care reform in Latin America and the Caribbean, aimed at developing a regional advocacy strategy, was based on two modalities to ensure that the most relevant information was compiled.

First, a comprehensive documentary review of secondary data analyses, regional policies, advocacy documents, peer-reviewed articles, and global documents regarding child care reform initiatives in the region was conducted. This also included the review of regional reports from multilateral organizations and NGOs. Subsequently, a total of 31 online questionnaires and 10 interviews were conducted with key stakeholders involved in care reform efforts in the region (see Annex 2). Each of the above modalities is further described below:

2. Documentary Review

The documentary review required the design of a matrix to guide the search and tabulation of the information collected. This matrix was made up of eight categories and a value from 0 to 3 was assigned to each resource reviewed, in order to weigh the level of detail or depth of information provided by each source on a particular category or topic. The eight categories were defined according to terms of reference provided by *CTWWC* for the study (see Annex 1), and are listed below (see text box). The value assigned to each source consulted was as follows:

- 0 no information available
- 1 little information available
- 2 some information available, but needs further development
- 3 adequate information available

Information was collected using academic search engines such as SciELO and Redalyc. Other information came from the Maestral International library. A detailed search of materials and systematizations developed by international and non-governmental organizations implementing advocacy projects related to care reform in Latin America and the Caribbean was also conducted. As a result, 71 resources with relevant information were selected for each of the eight categories. The full documentary review report can be found in Annex 3.

In the Latin American and Caribbean region, there is a lack of systematization of experiences dedicated to child care reform. However, successful experiences were found, particularly in the areas of prevention of child and family separation, alternative care, deinstitutionalization, reunification of children and adolescents with their families, and reintegration and care by family members or in foster homes (family-based alternative care). An analysis of experiences on other continents, where child care reform has been developed or implemented for a longer period of time, was also conducted.

3. Key Informant Interviews

This second line of research consisted of fieldwork based on interviews with child care reform experts in the Latin American region and other parts of the world where care reform has been implemented for a longer period of time.

Categories

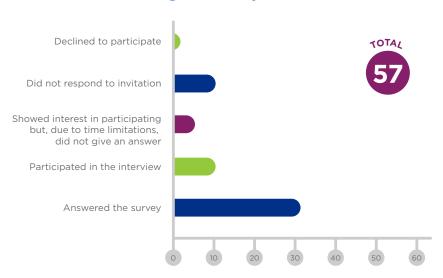
- 1. Context of child protection systems
- 2. Public policies and legislation regarding child care reform or family care
- **3.** Availability of education or training in child care reform
- **4.** Child care reform programming/planning
- 5. Recent child care reform initiatives in LAC
- **6.** Results of child care reform efforts in LAC
- 7. Recent child care reform initiatives outside of LAC
- **8.** Lessons learned

These interviews were conducted either virtually or online, according to the availability and schedule of the interviewees, leaving each to choose his or her preferred modality. A total of 10 virtual interviews were conducted in the period from August 17 to September 16, 2020, and 31 online questionnaires were completed. This led to 41 resources provided by 40 key stakeholders who contributed their experience and knowledge to this study. The stakeholders represented the Inter-American Institute of the Organization of American States, the Guatemalan and Colombian governments, international organizations, NGOs, religious-based organizations, and academic institutions.

For the above, a preliminary list of key stakeholders and their contact information was prepared, and subsequently others were included as additional references emerged from the initial interviewees. An interview guide was proposed, which included open-ended questions divided into the same categories used in the documentary review guide.

RESULTS OF PARTICIPATION IN INTERVIEWS AND SURVEY MONKEY

Regional Study on Care Reform



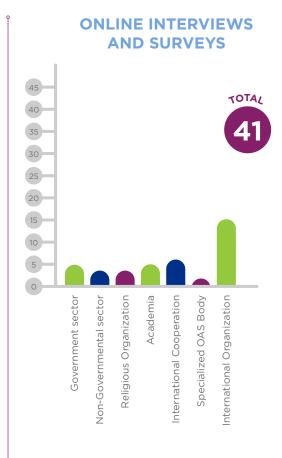
Graph 3: Participants in online interviews and surveys. Source: Study on Child care reform in the Latin America and Caribbean Region -*CTWWC*- August 2020.

The list of experts was grouped according to their profiles and areas of work. Based on this, 10 types of interviews were prepared: three were dedicated to delving further into good child care reform practices, two focused on the experiences of governments, two on the academic sector, two on civil society, and one on the faith-based sector (see Annex 4). The experts were grouped and relevant questions selected based on the following coding in Table 1.

Table 1: Coding of Interview Guides and Online Questionnaire

(AC-GA-SPANISH)	KEY STAKEHOLDERS, GROUP A, SPANISH LANGUAGE
(AC-GA-ENGLISH)	Key stakeholders, Group A, English language
(1A)	Government and Cooperation, Group A
(1B)	Government and Cooperation, Group B
(AC-GA)	Academia and Key Stakeholders, Group A
(AC-GB)	Academia and Key Stakeholders, Group B
(PS-GA)	Prevention of separation, group A
(PS-GB)	Prevention of separation, group B
(1-IRC)	Implementation of care reform
(IG)	Faith-based sector or church group

Each expert was contacted via email with a letter explaining the objectives of the study and inviting him or her to share his or her experience and knowledge regarding child care reform (see Annex 5). The virtual interviews were recorded with the consent of the interviewees, and then transcribed to facilitate their analysis. Similarly, the online surveys were grouped according to each interview model or guide. Finally, in order to have a broad overview of the responses and better appreciate the similarities and contrasts of each country or shared experiences, all the answers were collected into a single document (see Annex 6). A total of 38 questions were asked in the interviews and online surveys. They were distributed in the 10 coding categories for interviews and online surveys of the documentary review (See Annex 7).



Graph 4: Participants in online interviews and surveys. Source: Study on Child Care Reform in the Latin America and Caribbean Region -*CTWWC*- August 2020.

4. Scope and Limitations

The opportunity to communicate virtually played a double role in shaping this study. On one hand, it was a key means to facilitate contact and interaction with all stakeholders who agreed to participate. The initial approach established a minimum of 15 interviews with experts from the region. However, the availability of video calls and online surveys allowed the study team to reach 40 people located in different parts of the region and even in Kenya (See Tables 2 and 3). On the other hand, this virtual approach also presented some technological challenges, such as connection interruptions, electrical current fluctuations, and technical failures.

NO.		
Asociación Acogiendo (Fostering Association)-Perú Asociación El Refugio de la Niñez (Children's Shelter Association) ASOCRIGUA (Association of Christian Orphanages)-Guatemala Bethany Christian Services Buckner Perú CAFO-Guatemala CAFO-USA Casa Viva Solutions-Costa Rica Changing The Way We Care-Guatemala Center for Missing & Exploited Children- Brazil CIPRODENI (Coordinator for the Promotion of the Rights of the Child)-Guatemala Consejo Nacional de Adopciones (National Council for Adoptions) Guatemala DONCEL (Civil Association in Argentina) Escuela de Trabajo Social UNAM (School of Social Work, National Autonomous University of Mexico)-México Facultad de Ciencias Sociales y Humanas de la Universidad Externado de Colombia (Social and Human Sciences Faculty, Externado Colombia University) Faith to Action Glasswing Hope and Homes for Children Instituto Colombiano de Bienestar Familiar (Colombian Institute for Family Welfare) OAS Inter-American Children's Institute Lumos Patronato Nacional de la Infancia- Costa Rica-PANI (National Children's Trust, Costa Rica) Latin-American Care Leavers' Network	NO.	ORGANIZATION OR INSTITUTION
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24 Latin-American Care Leavers' Network	23	Patronato Nacional de la Infancia- Costa Rica-PANI
		(National Children's Trust, Costa Rica)
25 RELAF (Latin American Foster Care Network)	24	Latin-American Care Leavers' Network
	25	RELAF (Latin American Foster Care Network)
26 Secretaría de Bienestar Social de Guatemala	26	Secretaría de Bienestar Social de Guatemala
(Guatemalan Presidential Secretariat for Social Welfare)		(Guatemalan Presidential Secretariat for Social Welfare)
27 UNICEF Bolivia	27	UNICEF Bolivia
28 UNICEF El Salvador	28	UNICEF El Salvador

NO.	ORGANIZATION OR INSTITUTION
29	UNICEF Guatemala
30	UNICEF Mexico
31	University of Costa Rica
32	Colombia National University
33	World Vision Regional Panama

COUNTRIES AND NUMBER OF STAKEHOLDERS Uruguay Peru Panama Nicaragua Mexico Kenya Guatemala **United States** El Salvador Costa Rica Colombia Brasil Bolivia Argentina

Conducting such a study in the midst of a pandemic brought challenges of its own. As expected, key stakeholders were operating in a constant state of emergency which made it difficult for many to find the time to give an interview or respond to the online survey. Fifty-six invitations to participate in the study were sent to key stakeholders from 33 institutions and organizations.

Graph 5: Countries Participating in the Study. Source: Study on Child Care Reform in the Latin America and Caribbean Region-CTWWC-August

Ultimately, information was obtained from the Latin American region, but not from the Caribbean. The physical distance, coupled with the reliance on virtual contact, limited the answers obtained from this geographical area, since none of the stakeholders invited to participate responded affirmatively.

Time was also a key factor that influenced the study's achievements and limitations, as the stipulated timeline was shorter than what was actually needed to obtain more information.

Another factor which affected the team's ability to obtain information was the lack of name recognition of both the *CTWWC* initiative and Catholic Relief Services (CRS) in the Latin American child care sector. This may have diminished the initial enthusiasm of some stakeholders for participating in the study. Despite this, and because of the existing relationships that Maestral International and Lumos enjoy with stakeholders in the region, many were willing to collaborate with the study and were able to learn more about the care reform work of *CTWWC* and CRS in the process.

Table 3. Participating Countries.

No. '	PARTICIPATING COUNTRIES	STAKEHOLDERS PER COUNTRY
1	Argentina	3
2	Bolivia	2
3	Brazil	2
4	Colombia	4
5	Costa Rica	3
6	El Salvador	2
7	United States	4
8	Guatemala	10
9	Kenya	1
10	Mexico	3
11	Nicaragua	1
12	Panama	1
13	Peru	2
14	Uruguay	2
	Total	40

III. Findings

1. Results of the Documentary Review

In most countries in the region, institutionalization is used excessively in the care systems meant to protect children and adolescents, despite the fact that it should only be considered for exceptional cases. On average, 80% of children and adolescents living in institutions in the region have at least one living parent. According to Lumos, ²⁶ that figure represents 80% of the 30,000 institutionalized children and adolescents in Haiti; 54% of the 15,000 in Bolivia, and 90% of the 5,000 institutionalized children in Paraguay. ²⁷

In general, there is a lack of coordination among the institutions which make up the child care and protection systems in the region. There is also a lack of specialized personnel, and there are weaknesses in the development of essential competencies required to carry out child protection work. There continues to be a large gap in integrated and up-to-date data and information necessary to inform strategic planning processes and the development of public policies and legislation for a reformed child care and protection system. According to UNICEF, although most states have developed policies to support families, the main problem identified is incipient coverage, funding, and effectiveness.²⁸ There is a need for robust programs that complement one another and are aligned to the prevention objectives they pursue.

Through the documentary review, we can conclude that most countries in the region have the minimum number of legislation and public policies in place to continue advancing child care reform. An important commonality identified is the existence of norms aimed at strengthening families and the promotion of alternative forms of institutional care, among other measures aimed at reducing the excessive use of institutionalization. The most recent laws recognize that institutionalization should be used as a measure of last resort and provide for temporary limitations on institutionalization as well as age

²⁶ https://www.wearelumos.org/

²⁷ Lumos. (n.d.) 1 Niños en instituciones: La imagen completa (Children in institutions: The complete picture). Retrieved from: https://lumos.contentfiles.net/media/assets/file/Global Numbers - Spanish.pdf

²⁸ Palummo, J. (2013). La situación de niños, niñas y adolescentes en las instituciones de protección y cuidado de América Latina y el Caribe (The situation of children and adolescents in institutions of protection and care in Latin America and the Caribbean). Panamá. UNICEF. Retrieved from: https://www.relaf.org/biblioteca/UNICEFLaSituaciondeNNAenInstitucionesenLAC.pdf. Page 78.

restrictions regarding children under the age of 3.²⁹ The gap is in the application of these laws and the lack of budget allocation for implementation.

One of the important systemic and programmatic shortcomings identified in the region is the lack of opportunity for the participation of children and adolescents in the creation of policies and programs directed at them.³⁰ Countries in the region are making efforts to train their human resources in the various skills required to protect children and adolescents who lack or are at risk of losing parental care, although not in a unified or systematic manner. These training efforts typically originate in the academic sector and are being put into professional practice through the continuing education programs run by care reform organizations. This creates an opportunity for the systematization of good practices in the training, creation, or revision of the curricular guidelines of the different institutions of higher education as well as those used by governmental and non-governmental programs.

Some of the implementation experiences reviewed include important approaches to consider when planning such an intervention. One of these models is the *CTWWC* Case Management Process,³¹ developed to support the reunification and reintegration of children and adolescents, through the planning, organization and definition of a menu of case-specific tools based on the best interests and emotional well-being of the child. Another model is the RELAF Method,³² which seeks to adapt the subsystems for the comprehensive protection of the rights of children deprived of or at risk of losing family care, with an emphasis on processes of deinstitutionalization and guided by the principles of necessity and suitability laid out in the UN Guidelines.

Documented child care reform processes in Colombia, Chile, Panama, Guatemala, and Uruguay were analyzed, as well as reform processes taking place in Rwanda, the

²⁹ Palummo, J. (2013). La situación de niños, niñas y adolescentes en las instituciones de protección y cuidado de América Latina y el Caribe (The situation of children and adolescents in institutions of protection and care in Latin America and the Caribbean). Panamá. UNICEF. Retrieved from: https://www.relaf.org/biblioteca/UNICEFLaSituaciondeNNAenInstitucionesenLAC.pdf. Page 78.

³⁰ Gale, Chrissie & Calero Terán, Patricia Calero. (2017). Cuidado infantil alternativo y desinstitucionalización. Un análisis para el Ecuador basado en entrevistas y evidencia empírica (Alternative Child care and Deinstitutionalization: An Analysis for Ecuador Based on Interviews and Empirical Evidence). Ecuador. Aldeas Infantiles SOS Ecuador. https://www.aldeasinfantiles.org.ec/getmedia/a514a616-579e-47ab-b5bd-46d1e448b231/Cuidado-infantil-alternativo_abogacia.pdf Page 11

³¹ Guillermo, Vanesa y *CTWWC*. (2020). Aplicación de la metodología del proceso de manejo de casos (Application of the Case Management Methodology Process). Guatemala Report. Pending publication.

³² RELAF. (2019). Ending the confinement of children. The RELAF method to guarantee the right to family and community life. Buenos Aires, Argentina; Montevideo, Uruguay; and Mexico City, Mexico. Retrieved from: https://www.relaf.org/biblioteca/Metodo_RELAF-Web_FINAL.pdf

Czech Republic, and Moldova, to better complement these experiences. Although the latter are outside the geographical scope of the study, they share similar goals and challenges with the Latin American and Caribbean region.

The findings presented below by specific category come from both the systematized experiences that were analyzed as well as from sources which, despite not being included in the methodological description, offered a collection of important lessons learned from additional child care reform efforts.

Advocacy for Child Care Reform

- The belief that institutional care is better and safer for children and adolescents than family care, is still quite strong at the state level and has permeated society in general, constituting an important struggle for care reform efforts in the region. For this reason, the advocacy initiatives analyzed in this study have focused their campaigns on the importance of being raised in a family.
- When child care reform is carried out from within the government and society, the key stakeholders have true ownership of the reforms, contribute to greater sustainability of the changes, and achieve better cooperation during decision-making processes. This also leads to greater inclusion of multiple stakeholders in care reform efforts, including governments, the workforce responsible for protecting children and adolescents, people with lived experience, and civil society (NGOs, academia, communities, children and adolescents and families, among others) backed by the support provided by scientific evidence.³³

Government Planning and Programming

The initiatives analyzed from the region demonstrate the importance of building on a legal framework that respects the principle of the best interests of the child, while adhering to the main provisions of the UN Guidelines. The initiatives reviewed had a key government stakeholder who was responsible for coordinating and supervising the implementation of policies, plans, or projects. Resources for implementation were provided by diverse sources including both public financing and civil society.

³³ Bunkers, Kelley & Keshavarzian, Ghazal. (2015). An Analysis of Child-Care Reform in Three African Countries Summary of Key Findings. Better Care Network. Retrieved from: https://bettercarenetwork.org/sites/default/files/An%20Analysis%20of%20Child-Care%20Reforms%20in%20Three%20African%20Countries%20-%20Summary%20">https://bettercarenetwork.org/sites/default/files/An%20Analysis%20of%20Child-Care%20Reforms%20in%20Three%20African%20Countries%20-%20Summary%20">https://bettercarenetwork.org/sites/default/files/An%20Analysis%20of%20Child-Care%20Reforms%20in%20Three%20African%20Countries%20-%20Summary%20">https://bettercarenetwork.org/sites/default/files/An%20Analysis%20of%20Child-Care%20Reforms%20in%20Three%20African%20Countries%20-%20Summary%20">https://bettercarenetwork.org/sites/default/files/An%20Analysis%20of%20Child-Care%20Reforms%20in%20Three%20African%20Countries%20-%20Summary%20">https://bettercarenetwork.org/sites/default/files/An%20Analysis%20-%20Summary%20">https://bettercarenetwork.org/sites/default/files/An%20Analysis%20-%20Summary%20

- The time frames for the implementation of diverse child care reform initiatives have had to be flexible and were subject to extension as planning progressed. Documented efforts demonstrated that child care reform is a profound and holistic change that requires long-term planning.³⁴
- In the implementation of child care reform programs, the formula of international cooperation (technical) + government + civil society was common and proved to be an effective approach to achieving program objectives. In some cases, these initiatives were able to incorporate these collaborative work groups into the institutional framework of the child protection system to ensure better coordination between all the entities involved in child care reform. Some of this integration occurred at the local and/or community level and some at the central government level.
- The network of community resources was often insufficient both in terms of geographical coverage and the number of human resources available for care. It is common for preventive family separation programs to be left out of public and private funding, which is an important component for the sustainability of child care reform.

Human Resources Planning

- The interventions studied highlighted the need for a sufficient number of suitably trained social service and child protection professionals, recruited on the basis of established references and expertise. The appointment of a professional as a technical field adviser to support multidisciplinary teams was also documented as a good practice.
- The modalities of human resources training vary according to the contexts. Some experiences were carried out at the national level, others were carried out at the sectoral level or resulted from partnerships with higher education institutions. Some focused on the totality of human resources through a training of trainers approach and/or the establishment of a mentor or advisor role at the field level. The range of subjects covered in the trainings included: child protection, application of new laws and regulations, prevention of family separation, promotion of family care, family tracing and family reintegration, and behavior change.³⁵ It was noted that the human resources involved in children's

³⁴ Ibid.

care require a focus on support for families, harnessing the potential of families by focusing on reinforcing assertive behaviors, and not concentrating on what they do "wrong" or inadequately.

Programs Working with Children, Adolescents, Families and Communities

- by child care reform from institutions, children and adolescents, and families. The most effective strategies for overcoming this obstacle have involved implementers opening the doors to the community to involve them in follow-on steps. Among the good practices in community-based interventions, the training of key stakeholders and community leaders in child and adolescent rights was identified. The creation of open training spaces, with the aim of promoting an understanding of care, as well as of the concept of child rearing as a task that is not exclusive to the family, but is also a community responsibility, was also highlighted.
- The assistance provided to families prior to reunification made it possible for families to learn more about the protection process and the commitment expected from them toward the children and adolescents in their care. The post-reunification follow-up and support made it possible to demonstrate significant progress in the emotional and social adjustment of children and adolescents to the family environment while at the same time establishing a bond between the family and the human resources, which is a minimum condition for the success of this stage. Implementers also experienced obstacles during this stage arising from legal issues, which, in some cases, made it impossible for children and adolescents to have access to families once they had left the care system.
- Using a partial residential care scheme, where children and adolescents return home to their families during the weekends was shown not to be successful as the conditions of poverty, exclusion, and lack of access to services had not changed (and there were no interventions to change them) and this therefore affected the nutrition and emotional and health status of children and adolescents

2. Key Informant Interviews and Online Surveys with Civil Society, Academia, Government, Church, and International Cooperation Representatives

The experience and knowledge of the key stakeholders who participated in the study come from very diverse contexts and therein lies the richness of their contributions.

3. Context of the Child Care System or Protection System

Child care reform is seen by the stakeholders in the region as a necessary transformation to fulfill the right of children and adolescents to live in a family. Among the positive contributions that encompass the diversity of responses is the following perspective:

"The reform of the child care system will prevent children from being separated from their families and placed in state care and, for those in need, it will offer high-quality alternatives based on family care. This scenario is characterized by a system where few children are institutionalized and where these measures are increasingly brief; a system with sufficient financial resources and trained, talented, and committed professionals... Reform is a systemic change in public policies, service delivery, budget systems, and operational structures to generate broader and deeper impact. The aim of the reforms is much broader than the closure of the institutions themselves. The aim is to achieve a comprehensive transformation of the care system, which changes the very nature of the provision of services in a country [and] implies that the authorities must resolve the following: understanding how and why children end up in alternative care, identifying where these vulnerable children come from, researching the benefits of preventing unnecessary separation from families, and determining how the money could best be spent to prioritize the interests of at-risk and vulnerable children and their families." (Victoria Olarte -Hope and Homes for Children-)

While the child care system is often seen as responding to specific cases where caregivers have violated children and adolescents' rights and then providing restitution to the child with an alternative family-based care approach, or an intervention approach, others interpret the care system the other way around. In countries such as Mexico and Costa Rica, the term used to refer to the child protection system is

Integral Protection System; and in Argentina, the child care system is known as the Special Protection System.

In terms of how residential or alternative care are applied in the child care systems of different countries in the region, key informants shared the following assessments:

- Efforts to promote child care reform come mostly from the civil society sector and international organizations. This means that interventions are geographically targeted and often not monitored by the government, rather than being generalized throughout the entire country through government-sponsored programs. A lack of coordination and inconsistency between the norms and their application in the government care sector are prevalent throughout the region.
- Informants from Uruguay, Colombia, Guatemala, Mexico, Peru, and Bolivia report that poverty or its consequences continue to cause separation or loss of parental care. Working with families is not considered a cross-cutting area of work; there is often little desire to work with them. Physical violence, sexual violence, human trafficking, substance abuse, and the placement of parents in detention centers are also identified as causes of separation throughout the region.
- Residential care is typically perceived as a good thing by government officials and society. Thus, institutionalization is the predominant alternative care measure in practice. In Mexico, it is reported that a child or adolescent in residential care spends an average of eight or nine years of his or her life in an institutional setting. In Peru, it is reported that since 2015, the number of children and adolescents who are adopted has decreased, while the number of institutionalized children and adolescents has increased.
- In Colombia, it was noted that macro-institutions still persist. However, as an example of progress in deinstitutionalization, a key stakeholder reports that by July 2020, 62,166 children and adolescents were in the administrative process of restoration of their rights. Of those, only 13,000 were under an institutional care measure and the vast majority had been placed with inmediate or extended family. In Bolivia, children are being placed under family guardianship and in foster care; though the latter currently is only operating on a formal basis in one municipality of the country.

Within each country, there are organizations that serve as a reference for specific areas of care reform interventions. Such is the case of FUNDADES³⁶ in Peru, through the Nuevo Futuro orphanages.³⁷ In terms of larger organizations working on care reform in Peru, one key stakeholder referred to Acción por los Niños (Action for Children),³⁸ World Vision³⁹, Save de the Children,⁴⁰ and UNICEF⁴¹ as important care reform actors. In the case of UNICEF, one of its main contributions described by stakeholders was a census carried out on institutionalized children and adolescents. However, the study has not been published by order of the Peruvian Women's Ministry.

The opposite is true in Bolivia,⁴² where the presence of UNICEF is stronger because UNICEF was responsible for forming technical working groups (referred to as sub-mesas de trabajo, in Spanish) within the child protection system in the municipalities of La Paz, Cochabamba, and Santa Cruz to work on protection, family care, and foster homes. These working groups have made important contributions consisting of materials, operational guides, critical pathways, studies, and intervention strategies. As in Peru, a similar census was also carried out in Bolivia, which will be made public soon.

In Colombia, the CRAN Center,⁴³ located in Bogotá and Cali (under the name Chiquitines,⁴⁴ or Little Ones in English), was mentioned as a leading actor in care reform interventions. In Chile, Fundación Mi Casa,⁴⁵ which focuses on creative support experiences, prevention of child abandonment, and family foster care was also highlighted. Although the online questionnaire asked the respondent to explain what type of care reform interventions the organizations in each country were implementing, the majority only provided a list with the names of the organizations and did not provide any other description that would provide more information about the nature of the work they were implementing.

36 http://www.fundades.org/

37 https://www.nuevofuturo.org/areas-de-trabajo/peru/

38 https://www.accionporlosninos.org.pe/

39 https://worldvision.pe/

40 https://www.savethechildren.org.pe/

41 https://www.unicef.org/peru/

42 https://www.unicef.org/bolivia/

43 https://cran.org.co/en/

44 https://chiquitinescali.wordpress.com/

45 http://fundacionmicasa.cl/wordpress/

Among the civil associations or international cooperation organizations mentioned by the key respondents -in addition to those mentioned above- are international entities such as SOS Children's Villages,⁴⁶ Better Care Network,⁴⁷ Catholic Relief Services⁴⁸ (CRS), Cooperazione Internazionale⁴⁹(COOPI), DONCEL,⁵⁰ EDUCO,⁵¹ Hope and Homes for Children,⁵² Lumos,⁵³ Latin American Foster Care Network (Red Latinoamericana de Acogimiento Familiar, RELAF; in Spanish),⁵⁴ and USAID,⁵⁵ among others.

In Guatemala, the following institutions were mentioned at the local level: the coalition between the Association of Christian Orphanages in Guatemala (Asociación de Hogares Cristianos de Guatemala, ASOCRIGUA, in Spanish),⁵⁶ and the Christian Alliance for Orphans (Alianza Cristiana para los Huérfanos, ACH, in Spanish),⁵⁷ the Children's Shelter (Refugio de la Niñez, in Spanish),⁵⁸ Institutional Coordinator for the Promotion of the Rights of the Child (Coordinadora Institucional de Promoción por los Derechos de la Niñez, CIPRODENI, in Spanish)⁵⁹ and the National Association Against Child Abuse (Asociación Nacional Contra el Maltrato Infantil, CONACMI, in Spanish)⁶⁰. Among the responses, the emergence of academia as a reference for field research -particularly as a generator of evidence- stands out. Specifically, key stakeholders in Mexico and Colombia recommend that universities and civil society organizations form a partnership to promote the scientific study of care reform

⁴⁶ https://www.aldeasinfantiles.org/

^{47 &}lt;a href="https://bettercarenetwork.org/">https://bettercarenetwork.org/

⁴⁸ https://www.crsespanol.org/?_ga=2.168613538.201850577.1600121720-2082356481.1590805057

⁴⁹ https://www.coopi.org/en

 $^{50 \ \}underline{https://doncel.org.ar/?gclid=Cj0KCQjwqfz6BRD8ARIsAIXQCf0XO1sXvRbVYPKmQvJEh0-HGWvFlyweMeQGp695geJ1Xch5uM3N \ LcaAthkEALw \ wcB}$

⁵¹ https://www.educo.org/Inicio

⁵² https://www.hopeandhomes.org/

⁵³ https://www.wearelumos.org/

⁵⁴ https://www.relaf.org/

⁵⁵ https://www.usaid.gov/

⁵⁶ http://www.asocrigua.org/

⁵⁷ https://ach.gt/

⁵⁸ http://www.refugiodelaninez.org.gt/

⁵⁹ https://site.ciprodeni.org/

⁶⁰ https://conacmi.org/

interventions to contextualize and replicate what works, and learn from what does not, based on evidence. With this focus, the academic sector could become an advisor to governments, providing agile and real-time information, giving technical orientation, and promoting the monitoring and evaluation of public policies, plans, and projects.

"From the academic sector, there are many studies that account for the poor results of the residential system but little about alternatives. Experiences should be analyzed, lessons learned, and recommendations made regarding the main obstacles to transformation." (Victor Giorgi, IINN/OAS)

With regard to the role of churches or of faith-based institutions, the majority of key stakeholders in this sector of society believe that there is great potential for promoting alternative family-based care, support for families at risk, recruitment of foster families, formation of support groups at the community level and, in general, support for family care through the transformation of services currently operated by churches. The faith sector is recognized as an influential member in child care reform, and could put said influence towards mobilizing society to support the shift. However, some experts recognize that parts of the faith-based sector have perpetuated residential care, which contributes to widespread acceptance by society of institutionalization as a good thing. Even so, the stakeholders recognize churches as a necessary ally whose support must be sought continuously.

One of the weaknesses of child protection systems identified by the experts interviewed is a lack of access to real-time data and information to enable timely and evidence-based decision-making on the situation of children, adolescents, their families, and communities. While in some contexts there is a lack of data, in others there are multiple individual databases created by government offices and the private sector which do not coincide. It is interesting to mention that, in Guatemala, one of the key stakeholders interviewed reported that the absence of an integrated data information system is due in part to a misinterpretation of the rules protecting the confidentiality of children's and adolescents' information.

Much theory can be provided, but the testimonies are far more convincing." (Hazel Cedeño, Casa Viva)

As mentioned at the beginning of this section, child care reform is a transformation that focuses on the care of children and adolescents in a family environment, be it in a biological, extended, foster or adoptive family. This systemic change cannot take place on its own, since it implies a profound change in ideas, attitudes and practices regarding the care of children and adolescents. As for the national and regional strategies to promote this cultural shift, most experts agree on what should be changed, but not on how these changes in the social fabric can be achieved. The strategies proposed in some of the responses to these questions are summarized as follows:

"A testimony alone does not make public policy, but a testimony that represents evidence can indeed make public policy." (Mariana Incarnato, Doncel)

- The starting point should be from the existing evidence and government policies based on models of care grounded in the context, evidence, and effective participation of children and adolescents, families, and citizens.
- Sustained campaigns in national and local media are needed and should carry common messages for each target group, and should promote the value of family care and the right of all children to live in a family. Country-level coalitions should implement campaigns with a common goal, slogan, and timely messages.⁶¹
- Efforts should start and be focused on the local level. They should work with local influencers, such as media celebrities, religious leaders, and university educators who have important contacts and influence with large numbers of people. The appropriation of messages by society is fundamental.
- Violence prevention services that are accessible to a larger population should be established. Direct family strengthening programs should be developed that can serve as demonstration models for implementation with community participation.

⁶¹ Eda Aguilar, Fostering Association (Asociación Acogiendo).

4. Public Policies and Legislation for Child Care Reform

The regulations around child care reform are a point of conflicting opinions from the experts interviewed. According to their specific contexts, some believe it necessary to continue the development of specific laws, such as the law that prohibits corporal punishment (currently under discussion in Colombia), the law that creates the Institute for Children and Adolescents in Guatemala, laws that ensure a budget aimed at children, and laws that reinforce family separation as a last resort and favor alternative care over institutionalization, to mention a few examples. Other experts lean towards the application of laws that already exist, considering that most of them already provide the necessary legal basis for care reform. These experts posit that the problem lies in the execution of existing legislation and that what is really needed is a purging of the contradictions that arise from over-legislating.

"Over-legislating leads to the authority applying one or another legal framework when enacting, depending on how they understand [the legislation]. In the end, these normative cobwebs prevent proper application of the law." (Eda Aguilar, Fostering Association)

On the other hand, it is important to consider that the rules must continue to evolve and, although a starting point exists, it is necessary to continue developing the regulations around service standards, among others, to ensure the availability of funds so that programs can function properly. This is a critical point, considering that funding for the child care systems in the Latin American and Caribbean region tends to be of mixed origin, with a high percentage coming from private funds or funds external to state budgets.

Legislation supporting child care reform is inevitably linked to the country's level of adherence to the United Nations Guidelines on Alternative Care. As mentioned in previous paragraphs, this will be seen differently within each country and context. The experts share, as an example, how in Peru great steps have been taken within the child protection system to ensure that children and adolescents should not be placed in residential care centers. However, this has led to some poorly planned deinstitutionalization projects in which the reunification of children with their families was done without studying the original reasons the children were placed in care and without following a process to ensure a safe reunification process. Sharing these

experiences is important not only for the particular country involved, but also for other countries that are starting to take initial steps in this area, as in the case of Guatemala where deinstitutionalization plans are in the process of being implemented.⁶²

In terms of public policy, child care reform requires consideration of the following elements at the time of planning:

Elements

- Participation of children and adolescents, families, and communities as main stakeholders.
- Reliable real-time information; whether planning is led by the government or at the community level, it is important to have details of the situation as it unfolds, as well as evidence about what works, what doesn't, why change is needed, and how to bring it about.
- Phasing out the implementation of individualized strategies focused on girls, boys, and adolescents that do not include their families and communities.
- Not starting from zero: conducting a budget review to start, knowing what state and non-state resources are available, and knowing what resources can be re-invested or reallocated.
- Identification of stakeholders that can serve as allies at different geographical levels: national, regional, departmental, municipal and local.
- Bringing organizations that provide institutional care on board to encourage the transformation of their programs into family service and support centers as they phase out their residential care. Many of them can begin providing family support with their current technical resources and infrastructure.

5. Child Care Reform Initiatives and their Outcomes

The implementation of child care reform, according to regional experts, should result in an increase in child and adolescent welfare indicators that reflect a shift from protection services to prevention services.⁶³ The result of this will be that children and adolescents can grow up in a family environment, where they can build emotional bonds and secure attachments, which is the foundation for effective development

⁶² Erick Cárdenas, National Adoptions Council.

⁶³ Sara de Ruano and David McCormick, ACH.

throughout the different stages of life, the strengthening of ontological security, and cultivating a sense of belonging.⁶⁴

Several countries were identified as playing a leading role in care reform in the region and the information provided by key stakeholders from those countries includes the following:

- Colombia has approved important legislative amendments.⁶⁵ The guidelines for family care modalities are being reviewed and improved, and have taken precedence over residential care measures. Colombia has initiated Surrogate Mothers⁶⁶ and Community Mothers⁶⁷ programs. Colombia also has a student program that supports young people in care up to the age of 20 or 21, and from which they graduate with a bachelor's degree.
- Brazil has prohibited residential care centers with more than 20 children and adolescents. In order to comply with this provision, the government has increased the number of child care professionals needed to meet these standards. The law was amended so that the co-responsibility and budget for complying with these new standards come from the ministries of Social Assistance, Health, and Education, among others.
- Panama has formalized the National Committee for Support and Follow-up to Deinstitutionalization, which will also formulate the Biennial Deinstitutionalization Action Plan, through which commitments from different public sectors and civil society will be established. Currently, progress is being made toward creating the conditions for government entities to begin taking steps toward transforming the care system.
- Argentina has passed a law that provides assistance when leaving care up to the age of 25.68

⁶⁴ Adriana Espinoza Giraldo, Lumos.

⁶⁵ Those that can be mentioned include the modification so that the administrative protection process cannot exceed 18 months. An achievement was that the new government plan will prioritize the progressive deinstitutionalization of children and adolescents and the prohibition of the institutionalization of children younger than 3.

⁶⁶ Substitute Mothers: foster families for children who have lost parental care of their biological families while reintegrating or adopting.

⁶⁷ Community Mothers: The ICBF Early Childhood unit serves girls and boys between the ages of 0 to 5 years, 24 hours a day 7 days a week, and also operates as an educational agent.

⁶⁸ Said legislation recognizes the right to accompaniment while transitioning out of the Child Protection System with an economic component (80% of a minimum wage) and professional accompaniment so that the young person does not cease to exist once they leave the system.

- In Costa Rica, the national foster care program is implemented by Casa Viva Solutions. ⁶⁹ So far it is the only country that outsources such services and provides a grant from the national child welfare agency to a civil society organization. Casa Viva's principal source of support and recruitment is the faith sector, with which they have also established support alliances and services for families.
- Paraguay has made progress in public policy by uniting the political forces of the court, the presidency, and the Ministry of Children to sign a National Agreement for Change. Paraguay Protege Familias (Paraguay Protects Families)⁷⁰ is a movement in connection with the church that is working to create new laws and a justice system for families.
- Uruguay has a unique experience with a program called Protección 24hrs (24-hr Protection).⁷¹ Organizations such as La Barca⁷² establish a working agreement with the government, which, in turn provides funding so that young people do not enter residential care and can receive support and accompaniment from these organizations at a community level. This helps prevent isolation and a loss of social networks and ties, and encourages young people to remain in their community. Uruguay has shown that it is successfully investing its resources in models that work according to its own analysis, as it is conducting research on its own interventions.
- Honduras, with Orphan Outreach, has recently created a new department at the DINAF focused on foster care through private NGOs. Viva Network Honduras organized training events and partner orphanages are actively implementing new programs. With all of the above, Honduras is taking advantage of the political moment to push for government reforms in the care sector.
- Chile was recognized as a country that is making efforts to reform the child care system, including the Model to Evaluate Conditions for Parenthood (Modelo de Evaluación de Condiciones para la Parentalidad).⁷³ Some interviewees believe that, despite these efforts, they have not yet achieved real care reform. Those

⁶⁹ The interviewees agree that they have developed a successful and sustainable methodology, considering that it has been implemented in the country for 15 years. They have also created different foster family profiles, which have emerged through the experience and good practices they have developed.

⁷⁰ https://paraguayprotegefamilias.goentrepid.com/

⁷¹ It consists of providing adolescents with housing in a transitional residential accommodation in a space shared with others.

^{72 &}lt;a href="http://www.labarca.org.uy/">http://www.labarca.org.uy/ Organization of Care Leavers Network (Organización de la Red de Egresados del Sistema de Protección)

⁷³ An initiative that seeks the implementation of complex models based on the accompaniment of caregivers.

who consider Chile to be leading reform efforts in the region did not provide evidence to support their claims. The same is true of Mexico. The majority of those interviewed commented that Mexico lags behind other countries in the region, however, there are some organizations with important initiatives in different parts of Mexico.

- In Africa, experts indicate that Kenya, for example, is leading child care reform in terms of structure, law, and policy. In the same region, Rwanda has developed good structures for child care reform. They have experience particularly with inclusion of children with disabilities. Uganda is also mentioned as a country with good child care reform structures.
- Continents such as Asia, Africa, and Europe were also cited as regions with more established child care reform initiatives.
- Respondents also cited Canada, where the importance of evidence-based interventions to nurture its public policies has been comprehensive, and where care reform work is closely coordinated with the academic sector. Interventions at the province level —aimed at preventing separation— are based on information from the academic sector's research and have proven to be effective. This has led to one-third of the children and adolescents who were removed from their families for abuse, now having been reunited with their families. Currently, this same model is being followed and contextualized by Lumos in Colombia.
 - Hope and Homes for Children contributed to the interview by offering the following as necessary ingredients for generating care reform in the region:

 A high-level commitment to investing in children and social workers.
 A clearly established vision for reform.
 Cooperation between governmental entities and an inter-ministerial working group.
 Support from, and collaboration with, civil society.
 A common language: a clear and shared understanding of key terminology, which has been adapted and agreed upon for use in the national context.
 Data: a national mapping identifying children in institutional care and funding sources.
 A national inventory of family strengthening and alternative care services.
 A national strategy for deinstitutionalization and reform.
 A pilot project in deinstitutionalization.

□ Social services personnel with adequate remuneration and sufficient training.

The efforts to implement child care reform in the region are full of lessons learned. This study highlights the following:

- A care reform pathway at the country level should be based on a good diagnosis or situational analysis. There is willingness on the part of the larger society to provide alternative family care, but it must be properly promoted. In addition, proper language and message delivery is key to ensuring buy-in for care reform from the society at large.
- A country's political context defines its government's priorities and will determine which aspects of child care reform will be most likely to move forward and which will have to wait for a different political moment. Experts in the region note that starting with the foster care approach has been a successful way to begin positioning the issue of child care reform.⁷⁴ In addition, the implementation of pilot projects by governments to support advocacy and promote the multiplier effect has worked.⁷⁵
- The participatory design of programs, policies, norms and protocols generates a more conscious pathway for program design and facilitates buy-in for new approaches. International cooperation agencies and other social organizations with expertise in the field can become major partners in these efforts.

It is important to identify sustainability factors that have proven to contribute to positive implementation outcomes as well. These include the following:

In the area of foster care, key stakeholders in the region have identified determining factors that have contributed to the growth of these programs and their sustainability over time. These include close support and training for families as well as for social service staff on key issues regarding child protection and care; working hand-in-hand with governments; providing financial subsidies to organizations implementing care reform programs, who in turn manage these resources transferring some to families; and designing campaigns to recruit alternative family care through the faith-based sector.

⁷⁴ A similar approach is found in the guide "Beyond Institutional Care" (Hope and Homes for Children & UNICEF, soon-to-be published). In it, countries in Latin America and the Caribbean are invited to promote or continue with reform based on deinstitutionalization as its central axis, contextualizing, each to their own reality, the successful and failed experiences of the region that are shared there.

⁷⁵ This happened in Costa Rica with Casa Viva. After working to advocate for foster care, they obtained PANI's approval to carry out a pilot with a single child. The results of this pilot allowed them to add more children and adolescents to the project, and today they have 400 foster families and a goal of 250 children and adolescents placed in foster families per year.

Furthermore, there is a debate among stakeholders in the region on whether sustainability is better ensured when the government directly implements a range of programs that promote child care reform, or whether this is best achieved by civil society organizations. Initially, it is believed that government should retain primary responsibility for carrying out public policies and that the outsourcing of its responsibilities leads to irregularities in the quality of services rendered. However, some of the stakeholders also agree that the reforms are best supported by civil society organizations because they are often the ones with the most developed infrastructure, resources, and technical equipment. They also tend to have higher retention of human resources than government-operated programs.

In light of the above, one of the key stakeholders in the region concludes:

"The state is the political governing body and that is irreplaceable... Then come the implementors, and whether they be the state itself or third parties is a secondary issue, because if good practices are applied and properly audited, there should be no problem... The important thing is for the state to understand its role as an auditor and a guarantor." (Mariana Incarnato, Doncel)

Based on the lessons learned and the obstacles experienced in care reform efforts, key stakeholders in the region believe that preventing child-family separation is one of the best ways to preserve the right of children and adolescents to live in a family.

"Prevention as a response must be our greatest emphasis. Everything involved with alternative care is important, but it will never end unless the prevention of separation is addressed." (Gabriela Schreiner, Social Conscience).

In terms of when the prevention work should begin, one regional expert shares having learned about the importance of providing support and follow-up to families from pregnancy onwards, with particular attention to cases of children ages 0 to 5 years. Complementary interventions may include providing a bonus to pregnant women as a financial incentive for attending prenatal, natal, and post-natal check-ups at health care centers. Experts highlight the tendency in the region to criminalize families with vulnerabilities including poverty, addictions, or psycho-emotional needs. Biases and arbitrariness have often been involved in the separation of children from their

families, which is why it is important to learn about what constitutes "good enough" care, and thus avoid judging families using standards or expectations of care that are unrealistic.

There is also a lack of coordination between services and insufficient human resources focused on preventing separation. Those human resources that do exist have little experience and training in case management and home visits. A skilled social service workforce is essential to prevention interventions.

With respect to the learning outlined in this study, it is important to highlight the experience in Colombia, in which Lumos, four prestigious universities, and the Colombian Institute for Family Welfare (Instituto Colombiano de Bienestar Familiar, ICBF, in Spanish) are partnering to implement the Attachment-Based Relational Intervention (Intervención Relacional Basa en el Apego, IRBA, in Spanish). This is the only evidence-based intervention, contextualized to the Colombian protection system, that has been piloted in the country over the past three years. It seeks to change the culture of abuse, based on Attachment Theory. Abuse is the highest indicator in institutionalization and the biggest cause of loss of parental care. One of the experts uses an interesting paradox to sensitize families and generate reflections on abuse and violence.

"Abuse is like a poison, which day after day causes irreparable damage and can even lead to death. So that there is a better understanding of how harmful abuse is in the lives of children and adolescents, when I have the opportunity I ask the parents, 'Would you add a drop of poison to your son or daughter's milk? Even just a little?" (Natalia Varela Pulido, Colombia)

This is based on a psychosocial approach led by social work and psychology professionals working together. Assistance is provided to children and adolescents who are already institutionalized with the goal of accompanying them so that when the time comes for their reintegration or adoption, they will be better prepared emotionally and mentally. A second phase of reintegration or adoption occurs when the Attachment-Based Relational Intervention is conducted to prevent unsuccessful adoptions or the re-entry of children into the system. In Colombia, 50% of children in the child care system are in residential institutions. Children have often experienced one or two failed adoptions, which has serious impacts on their mental health. This methodology does not focus on what the caregiver is doing wrong, but instead reinforces positive behaviors, seeking to empower caregivers so they are likely to repeat these behaviors.

The objective is to convert this approach into public policy, to create a model of care within the Colombian protection system, thus rendering it a valuable resource for family defenders. This is expected to improve the high turnover of the government work force by reducing the need for improvisation as well as the changes resulting from high turnover by providing well-defined, proven interventions. It is hoped that the results of the study will be shared soon, as well as the publication of a forthcoming book on this intervention. Examples of this approach include Brazil with the Unified Social Welfare System (Sistema Único de Asistencia Social)⁷⁶ and Colombia, with the Directorate of Families and Communities⁷⁷ attached to the ICBF. Another interesting initiative in the area of prevention of family separation is the Permanence Program (Programa Permanencia), led by Buckner Peru.

"Families cannot be prevented from going through stressful situations but, with strong protective factors, they are more likely to succeed." (Claudia León, Buckner Peru).⁷⁸

In 2007, Buckner Peru implemented the Foster Program in collaboration with the Peruvian government. Today, the program has been absorbed by the Women's Ministry and has had a high success rate in locating biological families and in reintegrating children and adolescents.

Similarly, since 2011, Buckner has opened Family Hope Centers (Centros de Esperanza Familiar), which are programs to prevent separation and reduce violence through a human development approach. The model focuses on promoting a virtuous circle, building families that are able to love their children, ask for help in a timely manner, and be referred to support services. Currently, Buckner has three family support

⁷⁶ Which has the Social Assistance Referral Centers (Centros de Referencia de Asistencia Social, CRAS, in Spanish) which work with highly vulnerable families for the prevention of separation and strengthening of families. They also have social organizations that offer Services for Family Strengthening and Community Links that serve children and adolescents ages 6 to 17 years. That creates a basis of support for the family. These reference centers are state-owned, so they must include career professionals and they were signed into law in 2011, so they cannot be dismantled so easily. Specialized Social Assistance Centers, which deal with cases of violence, abandonment, street situations and conflict with the law, were also created. They also have technical teams with psychologists, social workers and legal professionals. Their mission is to preserve the family bond. In addition, if there is a need for it to be broken, it should be for the shortest possible time while working at the same time to promote the reintegration of the child into the family. Once the reintegration has been carried out, the CRASs provide follow-up to help prevent the family from separating

⁷⁷ Through which care is provided to vulnerable families. According to the ICBF guidelines, post-reunification follow-up must be provided for 6 months, which forces defenders to give their best attention to children and adolescents who are waiting for reunification.

offices in Peru: in Pamplona, Santa María del Triunfo, and Choco. The results with families are impressive: there is no family separation and, over time, an 85% reduction in violence has been documented.

The financial analysis of this model reveals that the investment in one community center has been slightly less than an investment in a residential care center, shelter, or detention center and that the benefits have been far greater. The model is demonstrating that investing time in working with families leads to effective and important changes in child rearing patterns and parenting skills.

"It is about recognizing the family as capable and identifying as indispensable the abilities of empathy and attachment. A family able to empathize with the needs of its children and respond to them can, if properly supported, develop the skills that its life experience or cultural norms have not allowed it to learn thus far." (Gabriela Schreiner, Social Conscience)

Together with the lessons learned in preventing separation, the experts have identified the following elements as essential to implementing this type of intervention:

- Including five indispensable approaches: legal, gender, development, systemic, and ecological.⁷⁹
- Incorporating a mapping tool to identify sources of risk in children and adolescents and families. This should be followed by support to the families for early detection of risk factors so that they do not become concrete risks. For example, when exceptional care measures are not defined within accompanying measures, there are temporary separations that include an intervention plan with other members of the family.
- Evidence-based family strengthening interventions together with a set of public policies that make it possible for families to develop, to have access to goods and services and, at the same time, to balance their productive activities with care activities, interaction with the family, and community activities.
- Community-driven, evidence-based resource centers focused on children, parents, and communities. Ideally, residential centers would be supported to transform their services into community and family support centers.

⁷⁹ Benito Rivas, SOS Children's Villages, Nicaragua.

- Programs that include socio-economic support services for the most vulnerable families (cash transfers, in-kind support, and employability activities).
- A platform for collaboration between community stakeholders, authorities, and other agencies and NGOs; for example, multi-sectoral commissions, judicial mechanisms, local councils, community mechanisms, and decision panels.
- Professionalization and reorganization of existing human resources.
- Securing commitments from the government to prevent the establishment of new orphanages and to establish limited entry for existing orphanages.⁸⁰

"Successful interventions require sustainable implementation, which requires the intervention of state programs and the promotion of family care support programs." (Paola Vasquez, UNICEF)

6. Education and Training of Human Resources in Child Care Reform

At different times throughout the documentation of the findings, the experts have pointed out the challenges faced by human resources working in the protection of children and adolescents to support and implement child care reform. The contributions that resonated most among the opinions are summarized as follows:

- Human resources must be strengthened and diversified to represent the range of professions needed to care properly for children and adolescents, their families, and communities from an ecological perspective. A technical team that would meet minimum requirements should consist of psychology, social work, and legal professionals. An ideal team should also include education, social anthropology, and sociology professionals to know how to best support a child based on the understanding of his or her origin and that of the family. When focusing on community management and services, the following professional profiles should be included: medicine (pediatrics, neurology, psychiatry, nutrition, and other specialties), pedagogy, research, finance, monitoring and evaluation, community managers, local health promoters, and other community replicators.
- Human resources must have the minimum qualifications required, should have clear job descriptions, and their employers must be aware of the need for

⁸⁰ Kristi Gleason, Bethany Christian Services Global.

ongoing continuing education. Considering that the work is highly demanding, it is important to evaluate these professionals, conduct interviews, and use strong selection processes. There is also a need to make better use of existing human resources, as they are the source of existing knowledge, and for efforts to strengthen the recognition of children as social, cultural, and political stakeholders. This implies actions of awareness raising, professionalization, and systematization of experiences.⁸¹

As end-users, who better than children and adolescents to provide input into the skills required for child care reform professionals? Interviewees who have spoken directly with children and adolescents about the treatment and care received from the child protection system's human resources indicate that the most basic human skills are often lacking: empathy, sensitivity, listening, and vocation. The competencies needed to understand the complexity of family relationships are multidisciplinary and transdisciplinary. Professionals who are in direct contact with families should study child development and Attachment Theory, should have a respect for culture, and should tailor their interventions to what families need, not the other way around. All of the factors mentioned above must be continuously assessed and strengthened through monitoring and follow-up.

As part of the contextual study for child care reform efforts in the region, it is important to analyze how the opportunities and gaps described throughout this report are impacted by the global COVID-19 pandemic. The full scope and impact of the pandemic are still difficult to determine, however, the experts interviewed shared information about the effects they are already experiencing, and projections about what the crisis could mean for the child protection systems in the future.

The following threats arising from the COVID-19 pandemic could affect child care reform:

- The issue of child care reform may take a back seat in governments' priorities, meaning that program designs, plans, public policies, and protocols may be suspended. In Guatemala, for example, reform-supporting entities have suspended work and planning at all levels has been reduced.
- The slowing or stopping of protection processes. For example, in Colombia, an expert indicates that a recent law which made the maximum administrative

⁸¹ Carmen Gabriela Ruiz Serrano, National Autonomous University of Mexico (UNAM)

⁸² Jimena del Castillo, Red Lantam (Lantam Network)

term 18 months to finalize protection processes in the ICBF has been suspended, leaving children and adolescents trapped in the child protection system for an indefinite period of time. In Guatemala, a key stakeholder says that the increase in judicial arrears and the decrease in hearings within the protection system is already tangible.⁸³ Other areas where child protection processes have been adversely affected are:

Irregular admission of children and adolescents into residential centers.
Opening of new residential centers.
Implementation of deinstitutionalization processes without planning and/or monitoring.
Challenges in locating, training, and selecting families for foster care programs.
Difficulty conducting fieldwork, which has led to the suspension of visits to families already engaged in various child protection and care processes.
Budget and staff cuts occurring at a time when there is an increase in vulnerable populations coupled with the risk of decrease in donations for care reform programs.
Impact of separation on the emotional relationships between children and adolescents and their families, either as a result of institutionalization or foster care.

- Decrease of protective factors and increase in the vulnerability factors of families (worsening of economic situations, unemployment, and school dropouts; reduced access to services such as health care; increase in family conflicts resulting from the pressure on families; increase in the situation of abandonment and orphanhood) coupled with difficulty in detecting new cases.
- Resistance to change because of the need to change traditional work patterns.⁸⁴
- Most communities lack the connectivity infrastructure needed to participate in virtual approaches now favored by the paradigm shift.
- The consequences for the mental health of children and adolescents lead to a conflict of choice in relation to their physical health.

⁸³ María José Ortíz, CTWWC.

⁸⁴ Erick Cárdenas, National Adoptions Council.

"From our perspective, in the current global scenario, our countries should take from the social imaginary the idea of returning to a "new normality," because the old normality is where the rights of children and adolescents are violated and transgressed. If COVID-19 leaves us one lesson, however hard this may be, it is that we must change the paradigm and move towards a "New Humanity" which places children and adolescents at the center of its actions, guaranteeing their Higher Interest." (Otto Rivera, CIPRODENI)

	mong the opportunities derived from the pandemic, experts shared the llowing:
	The current context is opportune for resuming the dialogue around child care reform based on the need of government agencies and institutions to adapt to new conditions and their inability to continue with traditional care practices. ⁸⁵
	Several interviewees agree that this may be an opportunity to carry out deinstitutionalization processes with adequate supervision and accompaniment, while directing efforts towards the prevention of family separation.
	There is more awareness about the need to conduct a review of child care parameters as failures or gaps in care have been made more visible by the pandemic.86
	This health emergency can also be seen as an opportunity to promote connectivity and reach across borders, as well as to empower online communities. ⁸⁷
	There is more opportunity to seek different solutions for protecting and restoring the right of children and adolescents to live in a family. For example in Colombia, ICBF opened emergency foster homes with virtual family selection processes. It is recognized that this process has its limitations, so to

mitigate some of the risks, measures were taken to verify the background of

⁸⁵ Roberto Rodríguez, UNICEF.

⁸⁶ Otto Rivera, CIPRODENI.

⁸⁷ Philip L Aspegren, Casa Viva.

families. A database of families in the process of adoption or foster families was used and, with the support of a multidisciplinary team, efforts were made to complete the selection process initiated prior to the pandemic.⁸⁸

"Governments must use this crisis to accelerate reform and build more resilient families and communities by integrating child care protection and reform into long-term national emergency and recovery plans." (Victoria Olarte, Hope and Homes for Children)



⁸⁸ Nathalia Romero, ICBF.

Conclusions

The findings of the documentary review and interviews with key informants are highly correlated with one another. The changes or actions that are needed to promote child care reform begin with the conviction that a new approach is needed in the way that countries in the region have cared for children and adolescents deprived of or at risk of losing parental care. The transition from knowledge to practice is a complex process that is possible only if the stakeholders involved are on the same page regarding the need to prioritize support for families as a way to prevent separation, decrease reliance on residential facilities, and provide more and better family-based alternative care options. The study's main conclusions include the following:

- 1. Protection systems in the region are characterized by structural shortcomings and a lack of capacity for implementing international commitments and the rights of children and adolescents, which are recognized in domestic legislation and in practice. Civil society and international cooperation are behind most of the child care reform efforts in the region. This implies a high level of delegation of the functions of comprehensive protection and enforcement of children's rights to civil society and non-profit organizations without adequate control and supervision by the state. This reinforces the urgency of implementing further child care reforms in the region.
- 2. Poverty in its various manifestations remains a primary cause of family separation in the region. The first alternative care option is institutionalization in residential centers, which is not surprising because states tend towards reactive practices rather than preventive practices with respect to the care of children and adolescents. Efforts are focused on reactive services, rendering invisible the results of prevention efforts, which are often isolated and incipient.
- There have been some legislative reforms for improving child protection systems in the region, and although they are insufficient and do not exist uniformly in the region, it is a start. It is clear that public policies are out of date and that very few real spaces for the participation of children and adolescents, families, or communities in policy development and implementation have been established. Rather than budget increases, it is important to ensure that funds or resources are redirected to interventions that have been proven to work. A country's political context sets the priorities of its government and will determine which aspects of child care reform will be most likely to move forward and which will have to wait for a different political moment.

- 4. Throughout the region, the supply of organizations or entities that are contributing in one way or another to child care reform is as numerous as it is diverse. It includes civil society organizations, the faith-based sector, and a variety of international organizations with presence on several continents, not only in Latin America and the Caribbean. Due to this diversity, and the lack of a single national coalition, it is common that these organizations sometimes find themselves duplicating efforts without knowing it. They often promote messages without a common thread which would strengthen their message and increase their capacity to reach their target audiences.
- 5. Child care reform does not have enough reliable studies or information to adequately portray the current situation of children and adolescents, which is constantly changing. Nor is there enough documentation of evidence-based approaches or interventions which would enable governments to make more efficient and sound decisions. In the initiatives documented in this study, academia played a fundamental role. Without this, efforts and initiatives to promote child care reform risk entering a vicious circle of investment and reinvestment, often through isolated interventions and without key sustainability factors, and in effect getting farther away from child care reform.
- 6. Strategies to promote a cultural change towards a better understanding and support for child care reform should be initiated and built from the local level, with active participation of children and adolescents, their families, their communities, and community leaders. Methodologies may certainly vary, however, the formula should always include both evidence and testimonies.
- 7. Strengthening families and the prevention of family separation are considered the greatest priorities for care reform in Latin American and the Caribbean to complement the efforts of deinstitutionalization and family reintegration that are already underway. Evidence-based interventions, which are still very scarce, can be the answer to the question of, "How?" and can contribute to the design and expansion of interventions with a higher probability of effectiveness.
- 8. The health crisis caused by COVID-19, despite its difficulties, has created new circumstances for stakeholders, organizations, and governments to find creative and effective solutions to continue improving care for children and adolescents. It has allowed stakeholders to take advantage of virtual approaches in terms of expanding knowledge beyond their borders and furthering deinstitutionalization processes by trying to reach families remotely. However, negative trends such as institutional weakening are evident through budget cuts and a decrease in active human resources, including a slowing down of administrative and judicial processes which are critical to defining the situations of children and families.

Recommendations

General Recommendations

- 1. Countries need to take stock of the resources available to them for implementation of care reform efforts. Ideal conditions will not generate themselves and it is necessary to start somewhere. Whether it is the beginning or the continuation of reform efforts, the process must follow a plan. It must also ensure that its budget includes funds for monitoring and evaluation in order to report results. In addition, it is important to consider the formula of technical international cooperation + government + civil society, which in many cases can be an effective way to carry out interventions with an evidence-based approach and can encourage the participation of the academic sector. This may be an opportunity to review and update curricular guides of various higher education institutions and of government and non-governmental programs, which could ensure that the abilities and competencies that are needed in human resources are included in a way that further drives child care reform from the beginning of their professional formation.
- 2. Civil society, with its infrastructure and resources; the faith-based sector, with its wide influence on the families who are among its congregants; and the academic sector, which has the skills and knowledge to support the generation of scientific evidence (to cite a few examples), are important resources that governments need to harness strategically and intentionally. It is important to bear in mind that the delegation of responsibilities by governments to civil society should be managed in a way that strengthens the capacity and commitment of the state to care reform policy and practice, rather than replaces them, "lets them off the hook," or inadvertently leads to a decrease in their capacity.
- 3. As key starting points, it is recommended that states prioritize the creation of databases and studies on children and adolescents in the national child protection system to provide the credible, first-hand information needed to make appropriate decisions. Another recommendation is that government initiatives include opportunities for authentic participation from children and adolescents, families, and communities with some degree of lived experience in the care system, thus facilitating the process of ownership of these initiatives or interventions.
- 4. There is an urgent need to strengthen efforts to prevent separation and to strengthen families, since it is at this stage that it is possible to protect children and adolescents before their rights are violated or the violations worsen. Specifically, in the context of the pandemic, this need becomes even more critical, and it is necessary to design plans to mitigate the effects of COVID-19 on children and adolescents, families, as well as social service providers and the workforce.

5. As Lumos and Hope and Homes for Children begin to withdraw from Latin America and the Caribbean, there will be a gap in the care reform efforts to which CRS and the CTWWC initiative, through the connections that Maestral has built in the region, may be able to contribute. This could help ensure that the important work of Lumos and Hope and Homes for Children in support of child care reform in the region continues.

Recommendations for a CTWWC Regional Strategy

- 1. Child care reform is a journey that no one should make alone. The participation of everyone involved is needed, but it should occur through coalitions that are promoting common messages at the country and regional levels. In the case of organizations and civil society in the region, there are multiple efforts, but they are scattered and many of them lack tools to verify their effectiveness or document their learning. If *CTWWC* is to commit to care reform efforts in the region, it should join forces with those stakeholders who have expressed a desire to work collectively and form a coalition with broad reach and participation.
- 2. CTWWC should apply the Evidence + Testimonies formula for each of the objectives and messages of its advocacy strategy. Some ways to apply this influence approach are found in the following recommendations.
- **3.** Engagement with the academic sector should be pursued for its potential contributions to the scientific base, and program monitoring and evaluation. There are already initiatives that are basing their methodology on these practices, which can be useful as test cases and thus contribute to key messaging in a regional advocacy strategy. An example of this is the Attachment-Based Relational Intervention in Colombia and the Buckner Peru programs that are currently being systematized.
- 4. Documenting experiences and harnessing the potential of the faith-based sector, such as the case of Casa Viva Solutions in Costa Rica and its conversion of residential centers into community service providers, are also important to include in the strategy. This strategy has three primary objectives: a) to convince other faith-based residential care facilities that child care reform does not mean the closure of its centers, but rather the transformation of its services; b) to use the influence of faith leaders to educate the population about the importance of protecting a child's right to live in the family and to counter the belief that residential centers are more appropriate than growing up in a family; and c) to promote the redirection of funds or donor contributions to support the conversion of residential facilities.

- There are substantial differences in the messages and concepts used at the 5. regional level among key stakeholders to promote the need for child care reform. Messages, even while respecting their differences, need to have a common thread and must be contextualized to ensure that they are effective in influencing their target population. An example of this is the term "child care reform," which generated some confusion among the stakeholders involved in the study given that countries in the region are more familiar with the term "child protection system," while still others refer to the "special protection system." As such, the phrase "child care" is mostly related to early childhood and not necessarily to protection. Therefore, as a first step, a regional advocacy strategy must identify and employ a common language together with its colleagues and partners in the care reform movement. Advocacy efforts must be respectful of diversity and promote unity. Messaging developed from participatory processes at the local level and promoted by local leaders will reflect a greater sense of ownership.
- 6. The soon-to-be-published guide, "Beyond Institutional Care" by Hope and Homes for Children and UNICEF, should also be considered in a regional advocacy strategy. This guide invites Latin American and Caribbean countries to draw on learning from the case studies presented in the guide, adapt it to each country's specific context, and continue promoting care reform efforts grounded in deinstitutionalization as a core principle.
- 7. Finally, it is important to consider the opportunities created by the COVID-19 pandemic. The conditions of confinement, the contraction of fundamental rights such as health and education, and the severe impacts on employment and economies have been felt around the globe. Even those enjoying more optimal living and development conditions can now identify with these social and economic constraints like never before. In this context, a regional advocacy strategy around care reform may find more fertile ground for its messaging, as society at large is likely to be more sensitive to the needs, obstacles, and challenges faced by children and families who for generations have struggled with adverse living and development conditions.⁸⁹

⁸⁹ Alianza Cristiana para los Huérfanos (Christian Alliance for Orphans): Religión Pura (Pure Religion) (April 14 2020. Todos somos vulnerables (We Are All Vulnerable). Podcast retrieved from: https://open.spotify.com/episode/0ca2W10eiUkvfw5TBVo3p1?si=ctoHDox7T1GzqTDunotDdQ

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Annexes

Annex 1: Terms of Reference for the Regional Study Terms of reference

Annex 2: List of all institutions and organizations that collaborated, as well as key informants List of participants. Online survey and interviews

Annex 3: Documentary Study Report Desk review-Study on Child care Reform

Annex 4: Key Informant Interview Guides

Interview guides Stakeholders-1-A

Interview guides Stakeholders-1-B

Interview guides Stakeholders-1-IRC

Interview guides Stakeholders-AC-GA.pdf

Interview guides Stakeholders-AC-GB.pdf

Interview guides Stakeholders-IG-.pdf

Interview guides Stakeholders-PS-GA.pdf

Interview guides Stakeholders-PS-GB.pdf

Interview guides Stakeholders English.pdf

Annex 5: Letters of invitation in Spanish and English

<u>Invitations in English</u>

Invitations in Spanish

Annex 6: Systematization of interviews and online survey

Systematization of interviews and online survey

Annex 7: Question categorization

Question categorization for online surveys and interviews

If you want to have access to these documents, request them to info@ctwwc.org



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