

CASE STUDY



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Supervised Independent Living in Uganda

Introduction

Supervised independent living involves a child or young person living without an adult but receiving regular supervision, guidance, mentoring and monitoring from an assigned adult mentor.¹ It is a form of alternative care for children aged under 18 recognised in the Guidelines for the alternative care of children, welcomed by the United Nations (UN) in 2009.² In Uganda, as in many other contexts, supervised independent living is also used to support young people aged 18 and over who are transitioning from residential or foster care to live independently for the first time.

In this case study, we explore lessons learned from three non-governmental organisation (NGO) programmes in Uganda:

- The Child's i Foundation provide supervised independent living for adolescents and young adults who have grown up in residential care. Established in 2018, this programme targets those aged over 15 years and has supported 25 adolescents and young adults.

The Child's i Foundation do not run residential care facilities themselves and instead support children's homes to close or transition.

- Hope for Justice (formerly known as RETRAK) ran a supervised independent living programme from 2004 for several years. This programme supported approximately 100 adolescents and young adults living in street situations. Some of these adolescents and young adults were placed into the independent living programme directly from the streets. Others spent time in residential or foster care before being supported to live independently. All of them had no families to go to.
- SOS Children's Villages offer supervised independent living for young adults aged 18 to 23 years who have grown up in their residential care facilities. Established in 2019, this programme currently supports around 100 young adults transitioning to university or work.

This case study draws on interviews with 15 policymakers, practitioners, adolescents, and young people. The case study also draws on the UN High Commissioner for Refugees (UNHCR) guidelines on supervised independent living.³

The evidence collected for this case study demonstrates that well managed supervised independent living can provide an appropriate form of care for some adolescents, and allow young people to flourish and reach their full potential. However, systems of child protection and care must support these programmes for them to be effective.

Why support supervised independent living programme?

For adolescents

As highlighted in both the Guidelines for the alternative care of children and the Convention on the Rights of the Child,⁴ efforts should always be made to enable children to live in families.⁵

Children should live in a supportive, protective and caring environment that promotes their full potential.⁶ Supervised independent living provides an alternative when family-based care is not a safe or viable option which can offer this protective and caring environment. This may be needed due to, for example, abuse or the inability to trace family members. Some adolescents may also reject foster care due to independence gained from living in street situations or past traumatic experiences in a family.

Evidence from Uganda suggests that supervised independent living can effectively meet the needs of adolescents who cannot live in families. Such programmes can provide the following.

- Stability for adolescents who have moved from families to street situations, or between a range of different care settings.
- Safe environments, where adolescents are monitored closely and have trusted adults they can report any abuse or violence to. For some adolescents, this is a safer option than returning to abusive or neglectful families, and allows them the space to heal from past trauma.
- Bonds with a trusted adult mentor, who can guide adolescents in their life choices and help them to achieve their dreams. This is especially valuable for adolescents who have lost all contact with their families.

- A replacement for harmful institutional care, which, as articulated by the Guidelines for the alternative care of children, can be highly damaging to children's wellbeing and development.⁷

“They would become better youths compared to when you force them to live with the adults that consistently abuse them... When I continue looking at my aunt or my uncle who abused me, I don't heal fast. But when I'm living independently, it is very easy for me to heal.”

Programme manager,
Hope for Justice.

The practitioners interviewed for this case study state that supervised independent living should primarily be considered for adolescents, typically aged 15 to 17 years, though decisions on placement should always be made on a case by case basis considering the best interests of the child. The UNHCR guidance also suggests that only those aged over 15 should be eligible for supervised independent living programmes.⁸ In line with the Guidelines for the alternative care of children,⁹ supervised independent living should be one of several care options so that the best choice can be made for each child.

For young adults

All young adults leaving residential or foster care to live independently for the first time need support.¹⁰ Interviews carried out for this case study showed how these young people often struggle to adjust to living in a new environment and to manage their finances, housing, education and employment.

Supervised independent living provides regular monitoring and mentoring, which the young people interviewed for this case study valued.

Support for young adults can shift leaving care from a fearful experience to a time of freedom, excitement for the future and personal growth. It can ensure that young care leavers contribute more fully to their communities (see Innocent's story below).

“What I enjoy the most about living independently is that self-awareness. I get the freedom to make my own decisions as an adult and even to learn how to overcome challenges.”

Lucy,
23-year-old care leaver.

“When I was still in the home care, we were not allowed to work because everything was provided, but right now, I can hold my money, I can go work for it.”

Stephen,
24-year-old care leaver.

Innocent's story

Innocent is 31 years old and was placed into residential care by his family at the age of seven. He spent 20 years in residential care and was supported to leave by the Child's i Foundation after he graduated from university. He chose to make this transition himself as:

“I thought it's time now to start making decisions of my own, to grow myself.”

Innocent had mixed feelings about leaving residential care:

“I was nervous. The other side I was excited because I was getting the freedom I had always dreamed of.”

Initially, Innocent felt quite lonely and missed his friends and caregivers from the place he had called home for 20 years.

“In the first phase of living independently, it was a bit of a lonely moment. It was a fresh new community. I had never interacted with the community on my own, so it was a strange experience.”

Now, he feels like a full member of the community.

“Now I am a happy, jolly young adult, progressing very well in this community. I have participated in various community activities in the area where I reside. I'm a well-known resident of this area. I'm a friend to the chairperson of the area. I'm a friend of the local defence unit of the area. So I'm a good citizen and I engage myself in the community activities, like local community meetings, and youth activities.”

He is also enjoying the freedom of being able to make his own choices in life:

“What I enjoy most in living independently is the joy and freedom of making my own decisions. Okay? Like, for instance, while we were still living in the care home centre, there was a systemised programme to follow. Like now, I choose what I have to do, depending on my abilities. So I feel I have the freedom and the room to grow myself based on my ideas.”

He has managed to find work with the Ugandan Bureau of Statistics, supporting the next census, and also runs a small stationery business which does branding and graphics.

Child's i have followed Innocent's progress closely, initially through weekly calls and monthly visits which gradually tapered as he grew in confidence. While Innocent was finding work, Child's i paid his rent and brought him the food and household items needed to set up home. They also gave him capital and guidance to set up his business. Innocent has learned a lot from his experiences, and now feels ready to offer support to other young people transitioning to independent living.

“The advice that I would give to young people who are living independently is be disciplined, that's number one. Two, cooperate with the person that has been assigned to you to guide you along. You cannot make it on your own, my friend... focus on one thing. Try it for some time and try and really see that, okay, this is not working... please, don't stop applying for jobs. I applied for jobs for the last two years. It's the first time I got a government job. So don't give up.”

In Uganda, there is also a legal imperative to provide supervised independent living. The Children Act requires¹¹ that:

“Where a child is unable to return to his or her parents or go to foster parents or has no parent, nor a foster parent, he or she shall be encouraged and assisted by the approved home and the probation and social welfare officer to become independent and self-reliant.”

Building on this, the government is in the process of developing guidelines for supervised independent living.

Creating a system of care and protection supportive of supervised independent living

A care system is the legal and policy framework, structures, services and resources that prevent family separation, support families to care for children well, and determine and deliver alternative care.¹² Each element of this system needs to be improved to ensure that adolescents and young adults can be adequately supported to live independently. This includes improvements to the social service workforce and the case management procedure they use, services for adolescents and young people in these arrangements, policies and guidance on supervised independent living, and effective coordination mechanisms. Each of these components of the care system is now explored in turn.

Case management and the provision of services for supervised independent living

The supervised independent living programmes explored for this case study all use case management processes which cover the steps listed below. Social workers play a vital role in implementing case management¹³ processes and, as outlined in further detail below, must be trained to support adolescents and young adults in supervised independent living arrangements. Similar case management steps are articulated in the independent living programme standard operating procedures developed by Hope for Justice and the aforementioned UNHCR guidance.¹⁴

1. Identifying adolescents and young adults who may benefit from supervised independent living.

SOS Children’s Villages in Uganda offer supervised independent living to all young people leaving their residential care facility. The Child’s i Foundation relies on referrals from government social workers who identify adolescents or young people who may benefit from their programme. They also work with children and young people from children’s homes that they are supporting to transition. Hope for Justice has an extensive outreach programme to identify street-connected children who are then reintegrated into their families, placed into foster care, or supported through the supervised independent living programme.

2. Initial assessment and decision about whether supervised independent living is appropriate.

An initial assessment is carried out to determine if supervised independent living is appropriate for the adolescent or young adult at this point in their life. Decisions about placement into supervised independent living must have the best interests of the adolescent or young adult as the primary consideration. The interviews with practitioners and UNHCR guidance suggest that assessments should cover the following.

- Whether all options for family-based care have been exhausted. This is essential for adolescents, but it is also important to consider if young adults can return to their families rather than living alone.
- The views, wishes, and maturity of the adolescent or young adult.
- Their capacity to earn a living or continue with higher education, to manage their time and resources, abide by the law, and access services.
- Their emotional wellbeing and any mental health problems or addiction issues.
- Whether a safe living environment and mentor can be identified for this adolescent or young adult.
- The support networks around the adolescent or young adult – which may include siblings, friends, family members, NGOs, faith groups or community leaders/other adults.

“When children have trauma, it's very hard for them to cope. Especially when they are going to be on their own. The society can swallow them because nobody would understand them. So it's wiser to keep them at home for some time until you're ready to say this person can be on their own.”

Caregiver/mentor,
SOS Children's Villages.

As UNHCR point out in their guidance, in some cases adolescents establish independent living arrangements themselves. This is especially common in emergencies. Adolescents may become separated from their families and set up home with siblings or peers in refugee camps.

These self-determined arrangements need to be assessed to ensure that they are in the best interests of the child and that appropriate supervision and support can be offered.

3. Fuller assessment and developing a care plan to support the adolescent or young adult. Once a decision has been reached that the adolescent or young adult should be placed into supervised independent living, it is important to carry out a fuller assessment to determine the support they will need to live independently. A plan is then developed with the adolescent or young adult to outline how this support will be provided. This plan should be regularly reviewed and adjusted as needs change.

“It takes a lot of planning, and how are they going to sustain themselves, you need to look at a plan which is sustainable and after a certain period, the young person is able to take care of themselves.”

Programme manager

4. Preparation for supervised independent living.

The practitioners, adolescents and young adults interviewed for this case study emphasised that the transition to independent living should ideally be planned and gradual. Preparation should include the following.

- Counselling to deal with the emotions of transition.
- Counselling to deal with the emotions of transition.
- Extensive life-skills training in areas such as managing finances and accessing services.
- An understanding of the shocks and crises they may face in life and the development of strategies to deal with these.
- Finding a suitable area to live in that balances the need for affordable accommodation with the need to be in a safe environment away from negative influences, such as crime and drugs.

Adolescents and young adults who have grown up in residential care may also need exposure to the outside world. For example, through visiting the workplaces of other young people living in the community. Preparation for independent living should ideally begin as soon as the child enters residential or foster care, though it will intensify in the years and months before they reach 18 years.

In SOS Children's Villages, for example, Youth Development Plans are developed with children from 15 years old which outline their plans after transitioning from residential care and how they will reach these goals. As they approach 18, adolescents are encouraged to make firm commitments in their Youth Development Plans that they agree to stick to once they leave care.

“After my form six, we had a conference, with lots of meetings to prepare me to join the independent life, so I was always made to sit, and they would ask me questions about what I need, how I am going to make it when I join the independent life.”

Stephen,

24-year-old care leaver.

“ We sat down with my mum [the caregiver in residential care] before transitioning to live independently. We talked things through, and she counselled me, she told me about some of the things that I would maybe find there, some of the challenges, and I was willing to face these. ”

Lucy,

23-year-old care leaver.

5. Managing the transition to supervised independent living. The point at which a young person leaves residential or foster care to live independently is a key moment in their lives and should be marked. This should be a celebratory time which generates excitement about the future. Such celebrations are important for the adolescent or young adult who is transitioning, but also for the other children in foster and residential care to give them hope for their futures. In SOS Children’s Villages, the last night a young person spends in residential care is always marked with a special meal.

6. Referrals to/provision of services and support for adolescents and young adults living independently. The interviews carried out for this case study and the UNHCR guidance suggest that adolescents and young adults living independently need a range of services and support including the following.

- Initial material support to set up home and have enough to eat while getting established.
- Finding suitable, safe housing.
- Further education or training.
- Finding work or establishing a business.
- Managing finances and accessing health services.
- Dealing with relationships with peers and intimate partners, including marriage.
- Overcoming past traumas and mental health or addiction issues.

“ We should be told every time that you are going to go to the community, this is what you are supposed to do, this is how you are supposed to behave, these are the people you are supposed to communicate with instead of just dumping someone into the community. ”

Stephen ,

24-year-old care leaver.

Practitioners, adolescents and young adults report that peer-to-peer support is often vital. This can be in the form of friendship or having older more established graduates of supervised independent living programmes mentor less experienced peers. Hope for Justice often sent adolescents living independently for the first time to live with a young person who had already made a success of community living.

7. On-going monitoring and guidance. Adolescents and young adults in supervised independent living programmes need to be regularly monitored. The practitioners interviewed for this case study argued that this monitoring should be frequent when the adolescent or young adult starts to live independently and gradually reduce. Monitoring should always include some face-to-face visits, which can be supplemented by phone calls. The frequency of phone calls and visits varies with the circumstances and needs of each adolescent and young adult.

Practitioners note that living independently for the first time is often the moment when young people who have grown up in care start to reflect more fully on the loss of their family. Surrounded by other families in the community, they often feel this loss keenly and need counselling and support. Adolescents and young adults, especially those who have formerly been street-connected, may have had past lives involving crime and addiction. They need help to stop them reconnecting with old friends and repeating harmful behaviours.

“They realise they are now alone in the world. We have many calling while they are still in their room alone and they have no one to talk to, to laugh with, or to share with; at that point when their mind is now idle they start thinking of doing wrong things with their lives. They make wrong decisions, they are faced with challenges that they have no one to share with.”

Programme manager,
SOS Children's Villages.

“You cannot leave these children out there and think because they are 18 and above, that is it. They need more supervision than the ones we live with here [in the SOS Children's Village], because they have challenges with relationships and a whole lot of things.”

Caregiver/mentor,
SOS Children's Villages.

“I was feeling very happy, because they used to come and visit me and they used to bring me some food, and they used to come and talk to me and give me some advice about how I can live independently, and they have been able to help me with some money.”

Henry,
30-year-old care leaver.

8. Case closure. Adolescents living independently need the support and supervision of independent living programmes at least until they reach the age of 18.¹⁵ The length of time that young adults remain in these programmes in Uganda varies greatly from a few months to several years. Practitioners report that a gradual tapering off of support is advisable. For example, adolescents and young adults receive extensive material support initially which is closely monitored. As they learn to manage their finances, the amount they receive diminishes and the freedom to spend these funds increases.

“At some point, this support came to a halt ... at some point, it had to stop, and they consider other people that are involved in the chain of transitioning.”

Innocent,
31-year-old care leaver.

The role of social workers and mentors in supervised independent living programmes

The UNHCR guidance¹⁶ and interviews carried out for this case study suggest that social workers and mentors both play vital roles. Social workers carry out case management as outlined above, and recruit, supervise, monitor and support mentors. In Uganda, NGO social workers work alongside government probation and social welfare officers and community development officers. The practitioners and adolescents and young adults interviewed for this case study highlighted that these social workers need the following skills and knowledge to support supervised independent living.

- Case management procedures.
- How to identify and respond to violence, abuse, neglect and safeguarding concerns.¹⁷
- An understanding of the impacts of trauma and how to provide emotional support.
- Patience and strong communication skills, and the ability to build relationships of trust with adolescents and young adults.
- Basic knowledge of livelihoods and life skills, to be able to deliver training and support and monitor progress in these areas or make referrals to other agencies.

“I have learned that establishing a good relationship with them while you are helping them to transition into independent living is very, very important because they will always be free with you, and they will always tell you their problems.”

Social worker,
Hope for Justice.

Mentors provide advice and guidance to adolescents and young adults in various aspects of their lives, including finding work or running a business, continuing with studies, and dealing with emotions and relationships. They can also augment the supervision provided by social workers as they live close to the adolescents and young adults and are able to visit more regularly. Mentors are usually recruited from the community and carefully screened to ensure that there are no safeguarding concerns and that they have the time availability and appropriate attitudes and skills to support adolescents and young adults.

SOS Children's Villages use mentors who are already in the young person's life before they leave care, such as a teacher, coach or caregiver. Hope for Justice focuses on mentors with a combination of business acumen and strong social skills so that adolescents can be supported financially and emotionally. Child's i Foundation reach out to community-based organisations and leaders to find mentors who can provide both emotional and practical support. This is usually a voluntary role, though costs may be covered.

Policies and guidance for supervised independent living

The practitioners interviewed highlighted the need for standardised guidelines in Uganda to regulate supervised independent living effectively. Current practices vary among NGOs due to the absence of clear government guidelines, inhibiting proper oversight.

“What I would appeal to all other organisations that are working with young people to support them with independent living, to come together, share lessons, learn from others, draw up a framework that is standard, that everyone can be able to use so that we have a standard of practice.”

Programme manager,

Child's i Foundation.

As well as guidance related directly to supervised independent living, practitioners also spoke of the need for changes in the law to make it easier for those without known parents to get official identification documents, such as birth certificates.

Some also suggested that those aged over 18 should be allowed to remain in residential or foster care if they

needed a little longer to adjust to independent living. This was seen to be especially important for young people with developmental delays. It should be noted that residential care, particularly care that is institutional in nature, carries multiple risks,¹⁸ and the harm associated with remaining in this care also needs to be considered in determining when adolescents and young adults leave this form of care.

Coordination and investments in supervised independent living

Effective supervised independent living requires collaboration across a range of sectors and with multiple governmental and NGO actors. Comprehensive referral mechanisms need to be put in place to ensure young people access the necessary services and support. The complex needs of adolescents and young adults living independently for the first time mean that supervised independent living is costly and requires a long-term investment. The practitioners interviewed for this case study have found that they often have to supply everything needed for a young person to set up a home, and provide many months or even years of intensive follow-up support.

This suggests that proper investments need to be made in supervised independent living programmes for these to successfully protect and meet the needs of adolescents and young adults.

Lessons learned in running effective supervised independent living programmes

- 1. The anticipation of leaving care and the early stages of living independently are the hardest; extra support is needed to help adolescents and young adults adjust.**

“I was feeling worried because I have never lived independently and I didn't have any friends out there; I didn't have a job.”

Henry,

30-year-old care leaver

“There were feelings that I was leaving the place [residential care] where I had spent many years. It had been like my home. So those feelings of being comfortable, feeling like you belong somewhere, they were coming out and you could feel that loneliness was coming.”

Innocent,

31-year-old care leaver.

“There is a lot of freedom on the streets and trying to get them into a controlled environment where they have to move by the book is not easy, but with training, with mentorship, and follow-up support they become a different person.”

Programme manager,

Hope for Justice.

2. Adolescents and young adults often struggle with relationships and mental health; assistance is needed here as well as more practical and material support.

“Then also, another thing about that was that getting new friends became very hard for me because I was associated with my colleagues, my friends, and my brothers that I have grown up with, so getting new guys from the new community becomes very challenging.”

Stephen,

24-year-old care leaver.

“For the case of the younger female adults, one of their key challenges is to elope, try to get away and elope with the men. ... We have cases where they have been deceived and they have even sold their businesses that we have set up for them. They go, they get married and things don't work out. ... Boys start to pursue intimate relationships because they feel that since they are working and also renting a house they should get a partner. But without proper planning and guidance, they are likely to encounter problems. After marrying her, the money he's getting can only afford to cater for one person.”

Social worker,

Hope for Justice,

3. Each adolescent's or young adult's journey into supervised independent living is unique; support must be tailored to meet individual needs.

“They all have unique needs. The same needs for a girl child will be different for a boy child. ... And also, for children with disabilities or young people with disabilities, you might find that they are discriminated against, they are not given opportunities or given a platform to air out their views because most people think that they can't do anything.”

Social worker,

Child's i Foundation

- 4. There are protection risks associated with supervised independent living, especially for adolescents. These risks must be considered in decisions about whether to place adolescents or young adults in supervised independent living and in the preparation and follow-up support they receive.**

“You have to think about who is very near to protect them, what kind of risk are you putting them into, are you putting them into a situation that is actually going to provide more risk.”

Programme manager,

Child's i Foundation

“They have moved and they have that freedom; the peer influence will come. And when the peer influence comes, a relapse will come in, and they can easily fall back into their [bad/drug taking] behaviour.”

Social worker,

Hope for Justice.

- 5. Avoid stigmatising or labelling adolescents and young adults in supervised independent living through the way services are provided.**

“As they are transitioning, SOS is being left behind, and we don't want them to be tagged as “those SOS men or women”, because at that point they are adults. ... [When we visit] we don't go announced. We do not even want to go with our car, with the SOS car. So we make it as easy as can be for this person to integrate well.”

Caregiver,

SOS Children's Villages.

- 6. Balance providing adolescents and young adults with supervision and guidance while reducing dependency and giving them giving them the freedom to make their own decisions.**

“We allow them their space to also go through what the community has to offer and to find their own networks, to avoid a level of dependency, because if they face a challenge and each time come back to the organisations it creates too much dependency.”

Programme manager,

SOS Children's Villages.

- 7. Ensure that adolescents and young adults can participate in all decisions that affect them and in the design and delivery of supervised independent living programmes. Recognise that peers can offer support and inspiration.**

“We allow for young people to be part and parcel of the programmes that we want to run because trends are changing; the way we have been doing things in the past is not the same as today. So we allow these young people to take the lead in designing how these programmes are run because they will invest in the things that give them the best in life.”

Programme manager,

SOS Children's Villages.

“During the process of independent living placement, the first consideration is the involvement of the person who is going to be moved into independent living: this is a very key consideration. When you don't involve this person, then there will be no sustainability. Let the decision come from this person. Let him or her be willing.”

Social worker,

Hope for Justice.

“One of the successful programmes we have is a youth platform. This allows young people to come together to air out their problems, their challenges, to report any issues that affect them. ”

Social worker,
SOS Children's Villages.

8. It is important to be honest and manage expectations.

“If I meet someone who is way off [ahead of me], I ask them, ‘My brother, how did you do it to get to where you are, because you were also at SOS with me?.’ ”

Stephen,
24-year-old care leaver.

“I've made good friends. Those friends who are willing to tell me, ‘You know what Lucy: today you may not feel like you want to go to school’ but they are always there to push you.. ”

Lucy,
23-year-old care leaver

“Managing expectations is very big for them. And as I said, mindset. You need to really pump sense into their heads to understand that what you see out there is not all going to be for you.. ”

Caregiver,
SOS Children's Villages.

Conclusions

Experiences in Uganda suggest that supervised independent living is a useful care option for adolescents and a key way to provide support for young adults leaving care. Supervised independent living allows children and young adults who cannot live with their families the opportunity to live safely in communities with the support they need to flourish. Despite its benefits, it needs to be used with caution. Supervision and support through these programmes cannot replace the love of a family, and all efforts must first be made to reunite adolescents and young adults with their families. Supervised independent living can place children at risk of harm and is not suitable for younger children. It is expensive and requires long-term investment. Investments in supervised independent living should always be made alongside efforts to prevent family separation and support for reintegration and family-based care.

Successful supervised independent living programmes hinge on a strong child protection and care system. There need to be policies in place, a trained workforce and coordination mechanisms. Case management procedures must be established that outline each step, including assessment, determining if supervised independent living is an appropriate option, preparation, managing transition, and follow-up. Adolescents and young adults in supervised independent living programmes need access to services and support, and assistance with life skills, education and vocational training, livelihoods, housing, mental health, addiction, and relationships. Only through building such child protection and care systems can supervised independent living allow adolescents and young people to reach their full potential.

Endnotes

1. Adapted from UNHCR (2021) Guidelines on supervised independent living for unaccompanied children. Geneva: UNHCR.
2. UN (2010) Guidelines for the alternative care of children. New York: United Nations, Art 29
3. UN 2010 Art 3; UN 1989 Preamble.
4. UN 2010; UN 1989 Convention on the rights of the child. New York: United Nations.
5. UN 2010 Art 3; UN 1989 Preamble.
6. UN 2010, Art. 4.
7. UN 2010.
8. UNHCR 2021.
9. UN 2010.
10. UN 2010.
11. Government of Uganda (2016) Children Act, Cap 59 (amended in 2016), Section 58 (4). <https://ulii.org/akn/ug/act/statute/1996/6/eng%402016-06-02>
12. Better Care Network and the Global Social Service Workforce Alliance (2015) The role of social service workforce development in care reform. New York: BCN.
13. Case management can be defined as: "The process of helping individual children and families through direct social-work type support, and information management." Child Protection Working Group (2014) The inter-agency guidelines for case management and child protection. Geneva: Child Protection Working Group, p.5
14. Hope for Justice (undated) Independent living programme standard operating procedures. Uganda: Hope for Justice; UNHCR 2021.
15. UNHCR 2021.
16. UNHCR 2021.
17. In this context, safeguarding refers to the proactive measures taken to limit direct and indirect collateral risks of harm to children arising from supervised independent living programmes.
18. van IJzendoorn, M.H., Bakermans-Kranenburg, M.J., Duschinsky, R., Fox, N.A., Goldman, P.S., Gunnar, M.R., Johnson, D.E., Nelson, C.A., Reijman, S., Skinner, G.C.M., Zeanah, C.H. and Sonuga-Barke, E.J.S (2020) Institutionalisation and deinstitutionalisation of children 1: a systematic and integrative review of evidence regarding effects on development. The Lancet Psychiatry, 7.8..

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