

Global Charter on Children's Care Reform: Guidance for developing commitments

In 2025, the then Foreign Secretary of the United Kingdom launched a bold and visionary initiative: to transform the lives of children globally so that all children are cared for in families and free of violence, exploitation and other harmful practices. This initiative aims to increase international awareness of the need for care reform and to accelerate action towards family care for all children.

As part of this campaign, the UK alongside other members of a Global Alliance on children's care reform launched a new Global Charter, which seeks to galvanise action to reform and improve the care of children. The Charter calls for signatories across the globe to (i) provide support to strengthen families and prevent unnecessary separation, (ii) ensure safe and nurturing family-based alternative care and (iii) end the use of institutions as alternative care settings.

Governments are invited to sign the Charter, and other organisations are invited to endorse it. Governments that sign the Charter are encouraged to develop commitments, based on the specific context in which they work, which define specific actions towards long-term solutions for the safe and nurturing care of all children. All other actors, including inter-governmental and non-governmental organisations, are encouraged to support governments to develop and implement commitments.

For more information about the Charter and how to sign it, read more at:

- [Global Charter on Children's Care Reform](#)
- [Global Campaign on Children's Care Reform: overview](#)

What are commitments?

Commitments are specific actions that countries agree to implement and monitor, in order to put into action the key principles set out in the Charter, focusing on any of the following:

- Support families to prevent unnecessary family separation, ensuring safe and nurturing family-based alternative care and progressively ending the institutionalisation of all children (paragraph 11a)

- Call out and tackle harmful and unacceptable practices (paragraph 11b)
- Increase financial resources and addressing issues that contribute to the placement of children in institutions (paragraph 11d)
- Invest in key enablers to support improved social services to support a family for every child (paragraphs 11c, e)
- Defend children's rights and learning from those with lived experience (paragraphs 9, 10)

Recognising that countries will be at different stages of their care reform journey, commitments should be context specific and driven by the priorities and resources of the country. Countries are encouraged to reach for the highest standard possible relative to the context in which they operate. See Annex 1 for example commitments.

Who makes commitments?

Governments that sign the Charter are encouraged to make commitments. Organisations are encouraged to support governments to develop and implement their commitments

Commitment criteria

As reflected in paragraph 6 of the Charter, commitments should align with the:

- [UN Convention on the Rights of the Child](#) (UNCRC),
- [UN Convention on the Rights of Persons with Disabilities](#) (UNCRPD),
- [The 2019 UNGA Resolution on the Rights of the Child on the theme of Children without Parental Care](#),
- [The Guidelines for the Alternative Care of Children](#), endorsed by the UN General Assembly, and
- [The CRPD Guidelines on Deinstitutionalisation, including in emergencies](#).

Where applicable, countries are encouraged to make commitments that reinforce the [Kigali Declaration on Child Care and Protection Reform](#), and the pledges

under the [Global Ministerial Conference on Ending Violence Against Children](#) and regional rights-based charts including the [African Charter on the Rights and Welfare of the Child](#).

Strong commitments are those that:

- **Are aligned:** to the specific calls for action and requirements outlined in the Global Charter.
- **Address existing gaps:** target specific needs of the country.
- **Demonstrate value-add:** introduce a new initiative or expand existing efforts with new resources.
- **Are quantifiable:** provide measurable targets, such as the number of people who will benefit, a timeline for implementation, and/or committed funding to achieve the commitment.
- **Are measurable:** have specific metrics to establish baselines, track progress and evaluate success of the commitment.
- **Are resourced:** grounded in what is feasible, by outlining financial, human and material resources for implementation.
- **Align with global good practices:** take into account the decades of progress in care reform around the world and build on lessons learned and promising practices available globally, or within specific regions and/or countries.

Developing commitments

To develop commitments, government signatories are encouraged to facilitate **participatory processes** with a range of actors. Participatory consultations may include workshops, in-person and/or virtual meetings, opening draft commitments for comment or other formats determined to be appropriate. Commitments developed using participatory processes are likely to lead to more buy-in, represent multiple perspectives and interests, and promote accountability. Higher participation is likely to lead to more cohesion, coordination and joint action, which is important for affecting real change.

Participatory processes may include consultations with actors such as:

- **Decision-makers** who have authority to act on and finance the commitment and are accountable to its success.

- **Multi-sector actors**, who have responsibility for children's rights and care, including child protection, health, education, social protection / social services, justice, Ombudsman, treasury/finance, statistics, information and communication technology, and others.
- **Governmental and non-governmental actors at central and decentralised levels**, such as regional or district representatives, or local service providers.
- **People with lived experience**, including safely and responsibly partnering with children, youth and adults who have experienced alternative care, including persons with disabilities and other vulnerable groups who may be over-represented in a care system.
- **Other partners** that support related activities. Such actors may include UNICEF, the World Bank, the European Commission, and other partners.

Some countries may find it helpful to conduct a high-level self-assessment of their care system to identify priority areas of focus for commitments, particularly those who are newer to implementing care reform and/or would benefit from a participatory process to discuss and identify priorities with relevant actors. The **Global Campaign Care System Assessment** sets out a tool and includes corresponding guidance to support such efforts.

Making and publishing a commitment

All commitments should be submitted via this [online commitment form](#). All commitments go through a review process to ensure alignment with the Charter ahead of their publication. Commitments can be submitted at any time. Commitments will be published within one month of the end of each submission window, highlighted below. For example, any commitment made between October to December 2025, will be reviewed and published no later than the end of January 2026.

Commitments submission windows
October – December 2025
January – March 2026
April – June 2026
July - September 2026

Support to develop commitments

Government signatories may apply for technical advice and assistance from international advisors to support the development of commitments. Support could include:

- Supporting the initial steps of and/or facilitating a high-level care system assessment to inform commitments;
- Facilitating participatory processes and consultations to develop commitments;
- Developing guidance on evidence and best practice to inform commitments;
- Reviewing and providing technical feedback on commitments ahead of submission.

Technical advice and assistance can also be requested once commitments have been made to support their implementation. Requesting this support can be done by submitting a request through this [online request form](#).¹ This support is provided by technical advisors coordinated by Maestral International with the support of the UK Foreign, Commonwealth and Development Office (FCDO).

See the [Guidance Note for Requesting Technical Assistance](#) for more details.

Sharing and learning from commitments

The Charter emphasises the goals of building global momentum, developing partnerships and promoting learning, and urges all signatories and endorsees to make efforts to share progress, knowledge and learning with other signatories. To support this, all commitments that align with the Charter will be published online. Actors are encouraged to explore commitments that have been made and consider leveraging one another's expertise and experiences.

Governments are encouraged to monitor progress towards the commitments they have made. When applicable, governments are also encouraged to include their commitments and progress towards achieving them in UNCRC, UNCPRD and UN Universal Periodic Review reporting.

Documenting progress and learning about successes and challenges in achieving the commitment is likely to be helpful for other Charter signatories. Therefore, the Campaign will include efforts to share learning through newsletters, webinars, articles, communities of practice or other convenings. Governments who have made commitments will be encouraged to provide updates on their progress, including any results from monitoring their commitments.

¹ The online technical request form is in English, but input from the person submitting the request can be in their language (i.e., the official language of the State making the request).

Annex: Example commitments

Commitments should include a focus on addressing system changes, such as improving laws and policies, coordination mechanisms, workforce capacity, finances, data systems, service quality assurance mechanisms and addressing social norms and practices. This section provides technical guidance and examples of commitments that align with the Charter.

Supporting and strengthening families to prevent separation

The UN Convention on the Rights of the Child recognises that children 'should grow up in a family environment, in an atmosphere of happiness, love and understanding'. Strong and nurturing families are essential for a child's healthy development. Families around the world are experiencing rapidly escalating stress and trauma due to climate change and humanitarian disasters, poverty, food insecurity, conflict, disease, and insufficient access to quality, inclusive education, health and social services. Quality support and resources can make a big difference for families experiencing stress and hardship in order to decrease their risk of separation. This includes families providing kinship care, foster care and kafaalah who may need extra support to help care and integrate children into their homes and communities. In many contexts, the need is greater when it comes to supporting certain populations, for example supporting people with disabilities to become fully included in their communities and alongside their peers.

The Guidelines for the Alternative Care of Children calls on States to implement effective measures to prevent child abandonment, and unnecessary separation of children from their families. Such policies and services should empower families with attitudes, skills, capacities and tools so that they can provide adequate care and protection for the full development of their children. Examples of family strengthening services that should be widely available include parenting skills programmes, day care, support for employment and income generation, and social assistance. Other services that support families facing specific drivers of separation may include conflict resolution, substance abuse treatment, financial assistance, and services for parents and children with disabilities. Families at the highest level of risk of separation or already separated will need dedicated support guided by individual case management plans to provide a tailor-made set of intensive supports.

Charter commitments should reflect investments in addressing the root causes of separation, reuniting children with their families where possible, and prioritising contextualised, community-led solutions to caring for children. This includes supporting community-based initiatives and/or services that empower and support families of children with disabilities to care for their

children and remove barriers to accessing integrated services, ultimately contributing to preventing the institutionalisation of children with disabilities. Charter commitments should also support recognising preventing discrimination against children and families, including addressing harmful social norms. Many of these efforts should consider the multi-sectoral nature and required coordination across government agencies to strengthen integrated services and supports.

Example commitments

- By 2026, the government of [country] will amend the national social service law and child's act to promote prevention of unnecessary family separation through expanded family strengthening services.
- By 2027, the government of [country] will have functional multi-sector teams with responsibility for coordinating integrated services for children and families in 75% of its districts.
- By 2026, the government of [country] will work with its partner [NGO] to train 100% of its frontline staff using a standardised pre-service training programme that aligns with the national parenting guidelines.
- By 2026, the government of [country] will have standardised outcome indicators for family strengthening programmes that multi-sector government departments are responsible to perform against and report on.
- By 2028, the government of [country] will increase government budgets for mental health and psychosocial support services by 30%, reaching an additional 40,000 people through community support groups.
- By 2026, the government of [country] commits to developing, piloting and approving a national positive parenting curriculum aimed at strengthening families and action plan for implementation.
- By 2027, 80% of children with disabilities will be enrolled in inclusive education in mainstream schools.
- By 2026, the government of [country] will work with its partner [organisation] to conduct a national situational analysis that examines the root causes of family separation across the country, and regional and district variances.
- By 2027, the government of [country] will partner with [inter-governmental organisation] to train 100% of local government gatekeeping bodies in preventing unnecessary separation, the conditions of necessity, and how to coordinate with local service providers to provide family strengthening services.

Ensuring safe and nurturing family-based alternative care

Types of alternative care

To determine the best care option for a child based on their individual needs and circumstances, there must be a range of alternative care options to choose from. The Guidelines for the Alternative Care of Children recommend that countries (i) ensure a range of options exist and (ii) prioritise family settings.² Most commonly, the range of family-based alternative care includes:

- **Kinship care:** care provided by the child's extended family or close family friends.
- **Foster care:** care provided by unrelated, trained and licensed caregivers, often while longer-term plans are made for the child's care. There are often several types of foster care: short-term or emergency foster care, long-term foster care, and specialised foster care for children with disabilities and other particular needs.
- **Kafaalah:** a form of stable and definitive care under Islamic law, where an adult in the community takes full responsibility for a child.
- Furthermore, **supported independent living** a type of care for young people, often provided with some form of supervision and support with accommodation, employment, continuing education, and other areas required for the young person to live independently should be made available for young people where it is determined the best option.

The desired outcome of alternative care placements should be permanent family care whenever possible and in the child's best interest. Policies and procedures should be in place to facilitate reintegration with the child's family, adoption, or supported independent living. In contexts where adoption is not practised, kafaalah or guardianship may be recognised as permanent family care.

Gatekeeping

Countries must have a codified decision-making process that ensures that alternative care for children is used only when necessary, and that the chosen setting is the most suitable for each child. This is known as 'gatekeeping'. The Guidelines for the Alternative Care of Children encourage a rigorous process to determine the most appropriate care setting for the child, with appropriate participation of the child, and to plan for reintegration and/or permanent family care, while the child is in alternative care. Placements should consider each child's ethnic, cultural, linguistic and religious backgrounds, and be subject to regular review to determine the appropriateness of the placement over time.³

Charter commitments should strengthen the range of family-based alternative care options and gatekeeping processes so that children in need of alternative care receive the care that is best for their unique needs and circumstances. Commitments should also consider the provision of supported independent living for older children.

Example commitments

- By 2028 the government of [country] commits to developing a national strategy to recruit, support and ensure quality foster care, towards a goal of increasing approved foster carers by 25%.
- The government of [country] commits to ensuring child participation principles are part of alternative care decision-making in a new caregiving bill which will become legislation by the end of 2025.
- By 2027, the government of [country], in partnership with [NGO] will recruit and train 100 new foster carers in specialised care for children with disabilities.
- By 2026, the government of [country] will oversee an evaluation in eight regions to provide insights on existing gatekeeping processes and practices, including the extent to which children are participating in placement decisions that affect them. The results of the evaluation will inform recommendations to strengthen gatekeeping structures, tools and procedures.
- In 2026, the government of [country] will lead on an awareness raising campaign that addresses barriers to becoming a foster parent and focuses on recruiting an additional 500 prospective foster parents, supported by \$XX from [inter-governmental organisation].
- By 2027, the government of [country] commits to improving the rate in which foster care placements receive the minimum monthly monitoring visit from 60% to 80%.
- By 2027, the government of [country] commits to gathering comprehensive routine data from all eighteen regions on the percentage of alternative placements that are made on a case-by-case basis and informed by individual assessments of each child.
- By 2026, the government of [country] commits to authorising a national financial contribution plan for young people leaving care to help them set up housing, buy essential clothing or household items, and support education or income generation activities.
- By 2027, the government of [country] will partner with [NGO] to open 2 supported independent living units where young people can practise independent living with on-site support.

² CELCIS. Moving Forward: Implementing the Guidelines for Alternative Care of Children. 2012.

³ ibid

Progressively ending the use of institutions

The damaging and long-term impact on children placed in institutions is well documented. The Guidelines for the Alternative Care of Children also place an emphasis on ensuring that young children are not placed in institutions and on ensuring that children with disabilities, or from minority groups that are over-represented in care, are not left behind when institutions are phased out.

Globally such institutions are supported by billions of dollars of often well-intentioned donations every year, and in some contexts also supported via tourism and volunteering. The Guidelines for the Alternative Care of Children call on all countries to develop a strategy to progressively reduce their reliance on institutions. Such strategies should include those covered above:

- Preventing the future need for alternative care
- Developing a range of care options, prioritising those that are family based
- Reintegrating children in institutions to family care (biological or alternative)

One of the main goals of transforming institutions is to reduce both the overall number of children in institutions, and the overall number of institutions in operation. It is imperative to invest in family strengthening services and family-based alternative care options as part of transforming institutions so that as children leave institutions, the support systems are in place to care for and protect them and prevent future separation.

While in some instances an institution may need to close completely, in other cases institutions can transform to non-institutional services for family and community support. Charter commitments should consider creating clear methods for ending the creation of new institutions, stopping the placement of children in institutions, and deciding which institutions need to close and which could transform – ensuring that children with disabilities are not disadvantaged nor left behind.

Commitments should consider assessing and developing a plan for each institution. Such plans may consider necessary outreach and awareness raising, addressing funding streams that incentivise institutions, and training and redeploying staff of institutions. In many cases, it is also helpful for such plans to consider the case management and data systems that assess, guide and monitor both the children remaining in institutions and the placement of those that move out. Commitments in many countries should also consider steps to promote the elimination of orphanage volunteering and tourism.

Example commitments

- By 2026, the government of [country] will pass a law that children are prohibited from being newly enrolled into institutions.
- By 2026, the government of [country] will pass a law that regulates care providers making excessive profit.
- With involvement of multiple sectors, including child protection, health, education, justice and social policy, the government of [country] will establish targets to progressively reduce the number of children in institutions by 2028.
- By 2025, the government of [country] will train all staff of all institutions on the transformation process, including about processes and plans to re-train and re-deploy staff as part of the transformation process.
- By 2027, the government of [country] commits to ensure that 100% of children in institutions have a case file that includes plans to support the child to transition to a more suitable care arrangement, prioritising family care.
- Within 2026, the government of [country] will work with the national governors committee to develop alternative volunteer pathways for prospective international volunteers interested in orphanage volunteering and disseminate these pathways to and orient at least 25 organisations supporting international volunteering.
- By 2026, the government of [country] will collect baseline data about children in all forms of alternative care (public and private), including institutions and facilitate multi-sector meetings to discuss the results and plan for reducing the number of children in institutional settings.
- By 2026 the government of [country] will commission a review of policies and financial expenditures, across sectors, to provide recommendations to align policies and finances with gradually reducing the number of institutions and children in institutions.
- By 2027, the government of [country] will assess 5 institutions and work with the institution and local government to develop plans for their gradual transformation or closure in way that ensures children are safely reintegrated into more suitable care arrangements.
- By 2025, the government of [country] will prohibit public or private funds from being used to create any new institutions.