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A global policy for children and the family

PERMANENCY PLANNING: THE PRINCIPLES TO BE TAKEN INTO ACCOUNT

Apart from preventing the separation of children from their family of origin, one of the main challenges today in many countries entails developing for every child housed in an institution or in a foster family an individual and lifelong plan, preferably in a family.

Permanency planning

The scope of permanency planning could be interpreted in various ways and could prompt a debate among experts. It is not always easy to decide when a placement should be considered permanent.

In any case, a permanent family plan means that reintegration with the family of origin (the immediate and the extended family) should be carried out as a matter of priority. Later, adoption (first and foremost, domestic, but if not, inter-country adoption) or Kafalah in Muslim countries, should, in principle, be preferred in as much as it corresponds to the child's best interests. In point of fact, to be really permanent, the ideal would be for the family life to coincide with a legal parent/child tie (by birth or adoption), which would give the child genuine stability and a sense of belonging to a family.

Placement with a foster family (with which the child has no family ties) or in an institution is generally considered provisional, whereas reintegration in the family of origin and adoption are final solutions. Placement must be subject to regular review and can be cut short in the best interests of the child.

However, under certain circumstances, placement can provide the most appropriate long-term solution for the child. In fact, there will always be children and adolescents for whom reintegration with the family of origin is not possible, and who at the same time feel either too closely attached to their family, too marked by their past, too old to be able to benefit from new (adoptive) family ties or for whom no adoptive family can be found.

Various basic principles to be taken into consideration in elaborating a lifelong plan Each child is unique. His/her life story and the circumstances of his/her life are unique. To identify the most adequate protective measure, his/her personal characteristics (his/her past, age, physical and mental state of health, emotional development, his/her links with family and friends, his/her character, religion, ethnic group) and those of his/her family need to be taken into account, the same way as available specific protective measures. Preparing a lifelong plan should be based on a thorough physical, sociomedical study of the child and his/her family. Respect for the principle of the child's best interests implies that the child has been informed of the plans drawn up that concern him/her: that he/she has been listened to and consulted in measuring his/her capacities; that he/she has been prepared for changes in his/her life; and these changes are being followed up, at least until they become final. Responsibility for raising a child and guaranteeing his/her development is incumbent in the first place upon his/her

parents (article 18.1 of the Convention on the Rights of the Child). The preparation, application and evaluation of a protective measure must, therefore, be carried out, as far as possible, with *the participation of the child's father and mother*, and to the extent possible, with respect for their convictions and particular habits.

Elements of the process of professional development of a lifelong plan

In elaborating a lifelong plan it is important to recognise the value of a multi-disciplinary approach. Such a method makes it possible to combine the activities of the social, psychological, medical and legal services, which provides a complete picture of the situation and of the action possibilities.

The professionals, who participate in protecting children and in the decision making that is incumbent upon them, must *coordinate the steps taken in order to ensure the continuity of the different stages of the child's life* (as well as that of the family of origin). Thus, it becomes a matter of avoiding disruptions and contradictory decisions that could prove to be very destabilising for the child and his/her family.

In any case, the lifelong plan should not be developed too soon after the separation of the child from his/her parents. In fact, beforehand one has to take the time needed to undertake an in-depth evaluation of the situation and to suggest and even set up, if it is in the child's best interests, contacts between the child and his/her family of origin so as to keep open the possibility of reintegration of the child in his/her family. But neither should this period be too long. In point of fact, one has to avoid the child continuing in a state of uncertainty, which could affect his/her upbringing.

The specific difficulty for the professionals seems to reside *in the development of particular lifelong plans for each child*. At the outset, placement of the child presupposes, in principle, concentrating on the family of origin, especially in evaluating its resources and its limitations. After a certain period of time, which depends upon the situation, if the family of origin cannot provide the child with an adequate environment for his/her upbringing, the specialists must, in the best interests of the child, change tactics and resort to a replacement plan.

The obligation to find a lifelong plan implies that the placement of the child, unlike adoption, must be subject to a *"periodic review* of the treatment provided to the child and all other circumstances relevant to his or her placement" (article 25 of the Convention on the Rights of the Child). Such a review covers all aspects of the living conditions of the child, including access to the outside world, disciplinary measures, education and the development of the situation justifying the placement.

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For more information:

ISS, A Global Policy for the Protection of Children Deprived of Parental Care, Geneva, 2005, 11 pp. http://www.iss-ssi.org/Resource_Centre/Tronc_Dl/documents/CRCDiscussionDayAglobalPolicyISS05.pdf.

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