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for every child

# CARE REFORM IN UGANDA

A VIRTUAL STUDY TOUR

Changing  
THE WAY WE  
care



Ministry of Gender, Labour  
and Social Development

# HOW TO TAKE PART IN THE VIRTUAL STUDY TOUR

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This virtual study tour aims to provide you with a strong understanding of care reform in Uganda from the comfort of your own home. To take part, you will need to:

1.

Read the snapshot and timeline of care reform and follow the link to watch a short presentation which will give you an overview of care reform in Uganda.

2.

Take a look at the promising practice examples, reading the case studies provided or following the links to watch short videos. You can explore all of the examples or just take a look at those that interest you the most.

3.

Watch a webinar in which a panel of experts were asked questions about care reform in Uganda which is available [here](#). This webinar may be repeated. To receive further details, complete this short [form](#).

4.

Let us know what you think of this virtual study tour by completing this [short form](#).

# HOW TO TAKE PART IN THE VIRTUAL STUDY TOUR

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## Still want to know more?

There is a list of resources at the end of this document, including useful legislation and guidance from the Government of Uganda.

## Confused by all the jargon?

There is glossary of key terms at the end of the document.

## Too much information?

You will see some colour coding in the document to help you quickly find the information of most interest to you.

<b>Bold black</b>	is for information on the systems and mechanisms that support care reform and on cross-cutting issues such care for children with disabilities.
<b>Orange</b>	is for information on family strengthening and reintegration.
<b>Purple</b>	is for information on kinship care.
<b>Red</b>	is for information on residential care.
<b>Blue</b>	is for information on foster care.
<b>Green</b>	is for information on adoption.
<b>Brown</b>	is for information on supervised independent living.

# SNAPSHOT OF CARE IN UGANDA

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## Population of country

44.2 million<sup>1</sup>

## Child population

56 per cent of the total population – 25 million children.<sup>2</sup>

## Children in kinship care

19 per cent of children are in kinship care – around 4.8 million children. Of these children, 15 per cent have both parents alive.<sup>3</sup>

## Children in residential care

At least 40,000-50,000 children.<sup>4</sup>

## Children in foster care

Small numbers fostered annually through civil society organisation (CSO) managed foster care programmes.<sup>5</sup>

## The care of refugee children

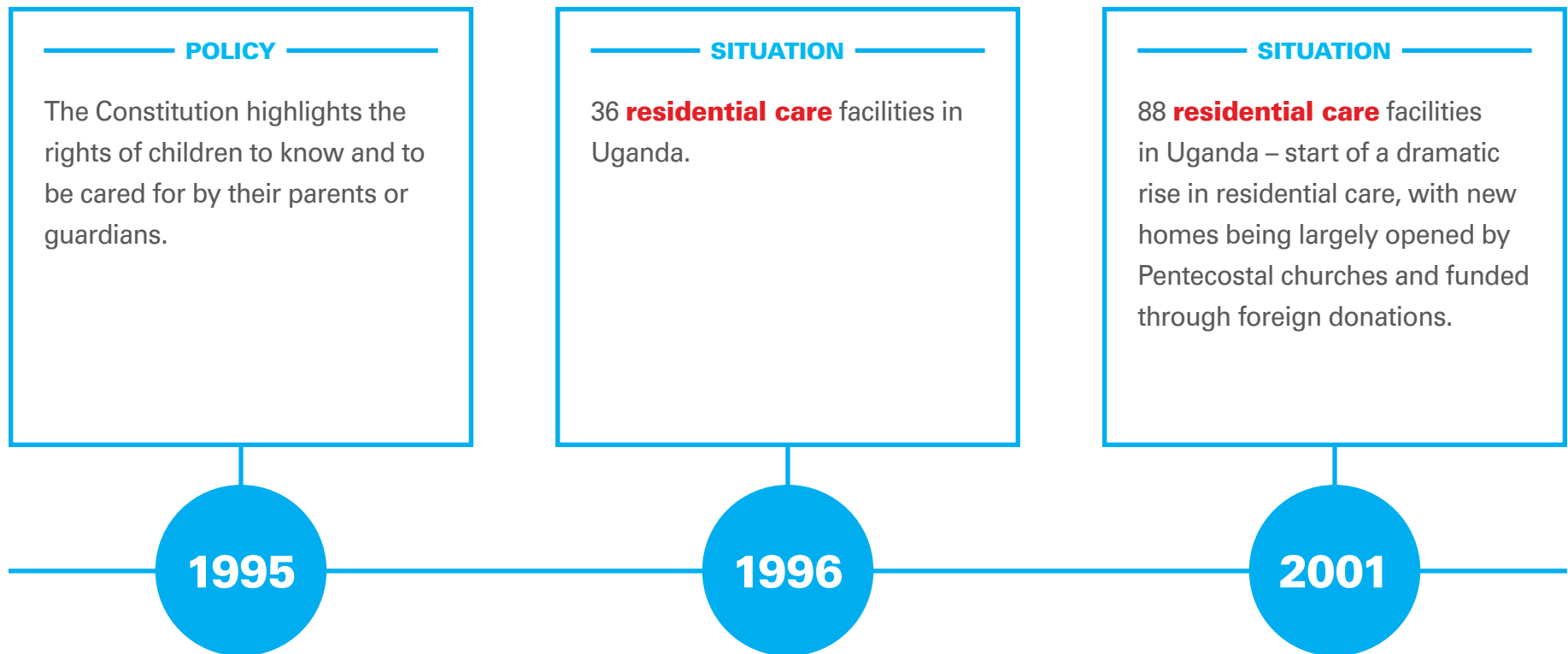
As of December 2020, there were 40,996 registered unaccompanied and separated refugee children. These children generally live with extended family or with foster families in refugee settlements.<sup>6</sup>

# AN INTRODUCTION TO CARE REFORM IN UGANDA

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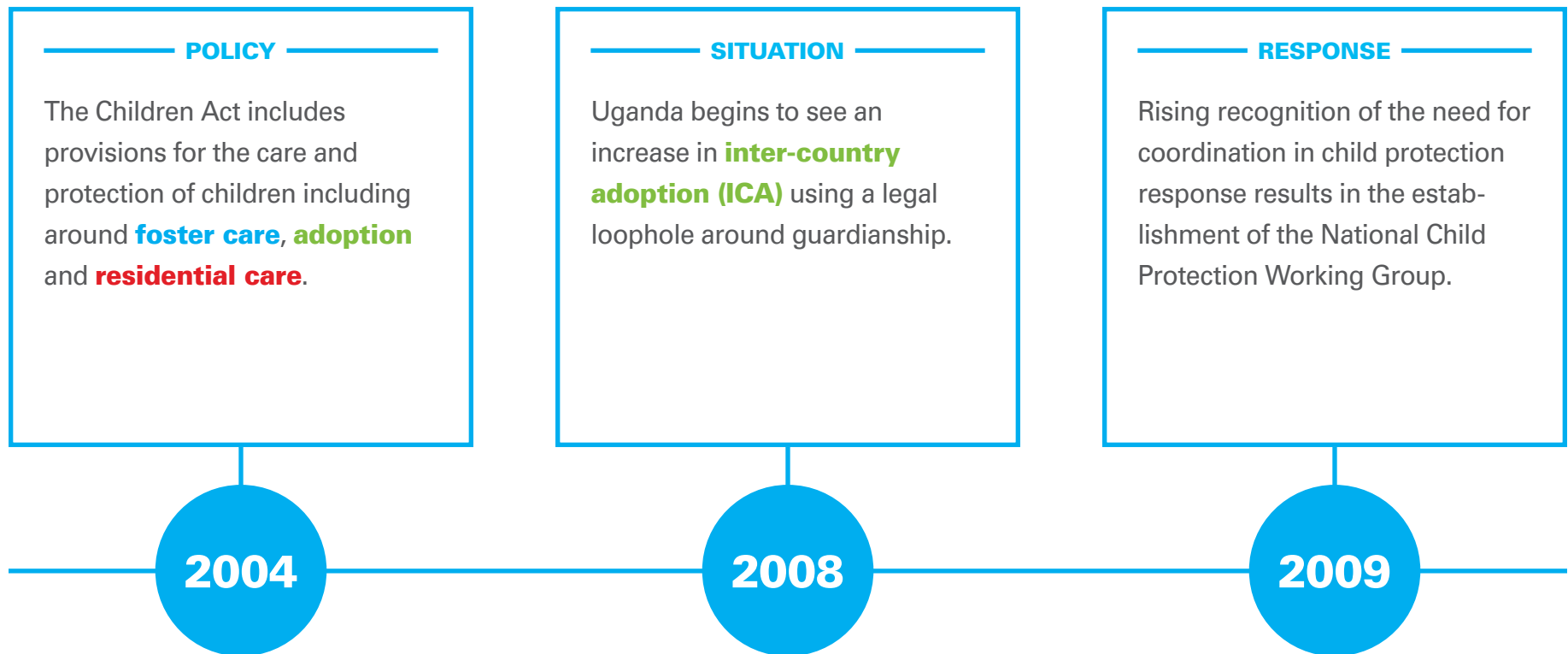
Follow this [link](#) for a presentation that provides a short overview of the care reform process in Uganda.

# A TIMELINE OF CARE REFORM IN UGANDA<sup>7</sup>



# A TIMELINE OF CARE REFORM IN UGANDA

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# A TIMELINE OF CARE REFORM IN UGANDA

## RESPONSE

Start of sustained government response leading to more programming on **family strengthening** and alternative care.

Government establish the Alternative Care Taskforce to develop the Alternative Care Framework.

2011

## SITUATION

Baseline study endorsed by government shows over 400 **residential care facilities** known to government and estimates at least a further 200 that are not known. New homes are being set up weekly without government permission.

240 children from Uganda **adopted** by US citizens in 2012, compared to 311 children over the previous 12 years.

2012

## POLICY

Draft National Framework for Alternative Care developed to guide **care reform, prevent unnecessary family separation**, support alternative care and ensure that **ICA** is used only as a last resort. The framework leads to the establishment of Alternative Care Panels to act as **gatekeeping mechanisms** and authorise **foster care** and **adoption**.



# A TIMELINE OF CARE REFORM IN UGANDA

## POLICY

Children (Approved Homes) Rules outline minimum standards for **residential care**. The accompanying assessment toolkit supports the inspection and monitoring of children's homes.

## RESPONSE

Use of the assessment toolkit shows that much **residential care** does not meet the standards. Between 2013 and 2017, over 500 facilities were assessed and 21 closed down.

2013

## SITUATION

Study published showing malpractice in relation to **ICA**.

## RESPONSE

Ugandan's Adopt campaign is launched by the government with the support of NGOs. It leads to the adoption of 60 children by Ugandans over three years.

Start of several USAID- funded programmes to **prevent family separation and support reintegration** (see below section on promising practice for details).<sup>8</sup>

The Strong Beginnings project is launched by Terre des Hommes Netherlands to work with **residential care** providers and pilot **foster care** in three districts.<sup>9</sup>

Government develop alternative care training curriculum.

2014

# A TIMELINE OF CARE REFORM IN UGANDA

## SITUATION

Study provides a snapshot of NGO run foster care, showing that in 2015 142 children were placed in **foster care** by five NGOs.

## POLICY

National strategy on social protection provides **support to vulnerable families**.

2015

## POLICY

National Plan for Child Wellbeing 2016–2021 is finalised with one of the three goals relating to **care reform**.

Amendments to the Children Act outline the continuum of care, and highlight the importance of **family preservation**, requiring ministries to develop prevention and early intervention programmes. Legal loopholes around **ICA** are also closed.

2016

# A TIMELINE OF CARE REFORM IN UGANDA

## SITUATION

There are nearly 50,000 **unaccompanied and separated refugee children** from the Democratic Republic of Congo (DRC) and South Sudan in Uganda. Most children in refugee settlements in need of alternative care are temporarily placed in **transit centres** and then into **foster care**.

Various projects have led to nearly 2,000 separated children being **reintegrated**, mostly from children's homes.

## POLICY

The Uganda National Parenting Guidelines outline the roles and responsibilities of parents and government commitment to improve parenting.

## RESPONSE

A national network of child care institutions is established.

## POLICY

Ministry of Gender, Labour and Social Development publishes national **case management** guidelines for OVC programming, though multiple forms of case management continue to be used.

2018

2019

# A TIMELINE OF CARE REFORM IN UGANDA

## SITUATION

COVID-19 sees an increase in factors that cause family separation such as poverty and violence in the home, movement restrictions and quarantine measures, and less resources going to NGO funded residential care, diminishing the quality of care further.

## POLICY

The Uganda National Child Policy and accompanying implementation plan is approved to coordinate efforts of different sectors with a child rights mandate. It recognises that children need to grow up in families and includes objectives on **family strengthening**, permanency planning and quality alternative care.

Ongoing work towards the ratification of the Hague Convention on **ICA**.

## RESPONSE

The CSO Child's i Foundation have trained 190 **foster carers**, of which 92 have been approved by government. Other CSOs also train foster carers, though no national level records exist on the number of foster carers.

2020

# PROMISING PRACTICE EXAMPLES AND LESSONS LEARNT

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## FAMILY STRENGTHENING

Work to prevent separation and support reintegration has increased dramatically in Uganda over the last five years and there are numerous examples of recent interventions that aim to support families (see examples 1-5 below).

# PROMISING PRACTICE EXAMPLES AND LESSONS LEARNT

## EXAMPLE 1

### **An integrated package of services to reintegrate children with families<sup>10</sup>**

The Deinstitutionalisation of Orphans and Vulnerable Children in Uganda (DOVCU) project was funded by USAID and implemented by a consortium of CSOs led by ChildFund International, in coordination with the Ministry of Gender, Labour and Social Development (MGLSD). The project focused on both preventing separation and supporting reintegration through a combination of economic and social supports. An evaluation of the project found that it had succeeded in reducing household and child vulnerability, and supported the reintegration of 1,743 children, mostly from residential care.

The project reduced the number of children's homes, inspired a new gatekeeping structure, improved the services offered by these homes, and shifted community attitudes on care. Some lessons from the project include the following.

# PROMISING PRACTICE EXAMPLES AND LESSONS LEARNT

➔ Families need sustained support to escape from the poverty that pushes many children into care. Although the project reduced economic vulnerability, the three years of the project were not enough time to elevate families into a fully secure situation.

➔ Return to families is not the same as 'reintegration' and it is important to measure children's subjective wellbeing to see if they have fully integrated into families and communities.

➔ Children experience different challenges depending on their situation prior to their return to families. For example, children from residential care reported diminished access to food and services in the community, whilst those from remand homes and the street had improved food security at home.

➔ An integrated model including child protection, economic strengthening and a range of support services is highly relevant to a context such as Uganda. Families benefitted from peer supports, and this support was found to be particularly sustainable.

➔ Oversight of reintegration processes through gatekeeping structures improves the quality of the support offered to children and families.

More details can be found [here](#), and [here](#). A report on the component of the programme that worked with children in remand homes can be found [here](#).

# PROMISING PRACTICE EXAMPLES AND LESSONS LEARNT

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## EXAMPLE 2

### **A CSO programme to prevent family separation**

The CSO Abide Family Center works with families at high risk of placing children in residential care. This [video](#) shows how this separation is prevented through economic strengthening, a parenting support programme and emergency housing.<sup>11</sup>



# PROMISING PRACTICE EXAMPLES AND LESSONS LEARNT

## EXAMPLE 3

### **Economic Strengthening to Keep and Reintegrate Children into Families (ESFAM)<sup>12</sup>**

In Uganda, as elsewhere in the world, poverty is a key driver for entry into residential care. The ESFAM project piloted economic strengthening activities with 611 families at high risk of separation and with the families of 89 children already in residential care. The programme was funded by USAID and implemented by ChildFund International. Vulnerable families were selected using a participatory process involving community members. Households were given basic financial literacy training and encouraged to open bank accounts to save for the financial shocks that leave children vulnerable to institutionalisation. ChildFund then matched these savings, adding the additional resources to the bank accounts.

Households were also supported through case management, a parenting programme and psychosocial supports. The programme helped to reduce the risk of separation and encouraged families to invest in education. Although the programme was largely successful, encouraging rural households to open and use bank accounts proved challenging. Further details of this programme can be found [here](#).

# PROMISING PRACTICE EXAMPLES AND LESSONS LEARNT

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## EXAMPLE 4

### **An example of a parenting programme**

The USAID-funded Keeping Children in Healthy and Protective Families programme has adapted the South African Esanyu Mu Maka parenting programme to work with the families of reintegrating children in Uganda.

This [two-page summary](#) of the programme outlines key lessons learnt.

# PROMISING PRACTICE EXAMPLES AND LESSONS LEARNT

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## EXAMPLE 5

### **Supporting children with disabilities to live in communities**

In this [video](#), a social worker from the CSO Ekisa Ministries describes support to children with disabilities to prevent separation and promote reintegration. The short film also highlights the importance of gatekeeping mechanisms.<sup>13</sup>

# PROMISING PRACTICE EXAMPLES AND LESSONS LEARNT

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## KINSHIP CARE

Research in Uganda suggests that the almost five million children in kinship care receive limited support,<sup>14</sup> making it hard to identify promising practice examples or lessons learnt.

Much of the family strengthening work in Uganda listed in the previous section is likely to have involved work with grandparents or other family members caring for children. However, the specific support needs of these groups and effective mechanisms for support are not always documented.

Evidence suggests that whilst the proportion of children in kinship care has remained consistent,<sup>15</sup> these children have become increasingly vulnerable as households struggle to meet their needs.<sup>16</sup> Research in Uganda highlights the unique needs of elderly caregivers that need to be taken into consideration in programme design (see example 6).

# PROMISING PRACTICE EXAMPLES AND LESSONS LEARNT

## EXAMPLE 6

### Research on the support needs of kinship caregivers<sup>17</sup>

Research with 32 grandparents caring for children affected by HIV in Uganda found that most received no support. Grandparents spoke of high levels of emotional distress caused by the recent death of their adult children, the HIV positive status of their grandchildren, and extreme poverty. Many had experienced multiple bereavements and had had to care for sick and dying relatives. Grandparents commonly reported depressive symptoms such as feelings of hopelessness, being overwhelmed and frequent crying. Grandparents also highlighted physical health problems, such as heart pain, loss of appetite and insomnia. It is likely that these problems were caused or exacerbated by stress and mental health problems.

*"[T]here was a year I got a lot of sadness ... My heart started getting weak and I wanted to kill myself and get out of this world. I didn't have anyone to assist me. There was no food at home, no money; I wanted the children to go to school ... so many things. We all looked terrible in the home. I went to one of the ladies in the village crying and she got up and gave me a bar of soap and said, "You need to go home and clean up because you look so bad." I was tired of everything and all the heart was telling me was to die. I asked myself what I did in this world not to have anyone to help me out." (Grandmother)*

# PROMISING PRACTICE EXAMPLES AND LESSONS LEARNT

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## FOSTER CARE

Foster care is supported in legal frameworks in Uganda and has been successfully piloted on a small scale by a number of CSOs. Foster care exists on a larger scale in refugee settlements (see Example 7).

Foster care has also been developed successfully for abandoned babies and street connected children (see Examples 8 and 9).

# PROMISING PRACTICE EXAMPLES AND LESSONS LEARNT

## EXAMPLE 7

### **Foster care for refugee children<sup>18</sup>**

There are nearly 50,000 unaccompanied and separated refugee children from South Sudan and DRC in Uganda. Those children who have been separated from all family members are usually placed with volunteer foster carers from the refugee settlements, with foster care managed largely by CSOs. Although there is a strong sense of community responsibility to care for children, foster care placements are not always successful. Children are sometimes not treated in the same way as the biological children of foster carers. Caregivers can be motivated by the small stipend that CSOs provide and may abandon children as they return home. Levels of violence against fostered children are reportedly on the increase.

Families who have fostered multiple times become fatigued, especially if they are struggling financially. Several lessons have been learnt from these efforts to deliver foster care in an emergency setting, including the following.

# PROMISING PRACTICE EXAMPLES AND LESSONS LEARNT

➔ It is important to fully involve government in the development and oversight of foster care (rather than creating a parallel system of support).

➔ National gatekeeping mechanisms are key for ensuring the right care choices for children.

➔ Communities and existing foster carers should be involved in raising awareness about foster care and the recruitment of new caregivers.

➔ It is important to carefully assess potential foster carers and to make sure that existing foster carers have the capacity to care for children well. Limits (such as only two children per household) may need to be placed on the number of children fostered at any one time to avoid fatigue.

➔ Regular follow-up visits to monitor children in foster care and their caregivers by case workers are essential. Potential foster carers should be warned that they will be monitored.

➔ Material supports should consider the needs of all children in the household to avoid resentment. Rather than providing material supports, it can sometimes be better to link foster families to community projects, including livelihoods initiatives.

➔ Foster care should not be the only option open to children; supervised independent living may offer a better choice for some older children.



# PROMISING PRACTICE EXAMPLES AND LESSONS LEARNT

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## EXAMPLE 8

### **Foster care for street connected children**

This [video](#) describes the establishment of foster care for street connected children supported by the CSO Retrak. It shows how community members can be encouraged to foster street connected children despite the stigma experienced by these children. It also outlines the recruitment, selection and training process, and the ongoing support and monitoring that families receive. The film is accompanied by another [video](#) on preparing street connected children for foster care.<sup>19</sup>

# PROMISING PRACTICE EXAMPLES AND LESSONS LEARNT

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## EXAMPLE 9

### **Foster care for abandoned babies**

In this [video](#), staff from the CSO Child's i Foundation describe the decision to move from residential to foster care for abandoned babies, and the process of developing and supporting foster care.<sup>20</sup>

# PROMISING PRACTICE EXAMPLES AND LESSONS LEARNT

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## ADOPTION

Over the past five or six years, efforts have been made to encourage Ugandans to adopt and to reduce rising rates of inter-country adoption. (see Example 10)

# PROMISING PRACTICE EXAMPLES AND LESSONS LEARNT

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## EXAMPLE 10

### Supporting national adoption

In this [film](#),<sup>21</sup> a social worker from the CSO Child's i Foundation describes the process of family tracing for abandoned children, and of adoption when this tracing is not successful. The video shows how it is possible to find families for children with special needs, including those who are HIV positive.

The video makes reference to Alternative Care Panels, **gatekeeping mechanisms** which make decisions about foster care and adoption. Further details of these panels can be found [here](#).

# THE VOICE OF CARE LEAVERS

Research with 264 Ugandan care leavers found the following.<sup>22</sup>

68 per cent of care leavers were not consulted in decisions about their placement and 50 per cent were not involved in decisions about leaving care.

➔ 71 per cent of care leavers reported physical or emotional abuse in care, and 21 per cent reported sexual violence.

*“Our director forced us to call him daddy and in his room many awful things went on, like sexual abuse.”*

➔ Departure from children’s homes was often abrupt and many care leavers felt totally unprepared for life outside.

*“They made false promises and they don’t prepare you for the future. Suddenly a meeting was called and we were told that we have to leave the orphanage because other children had to come in.”*

*“I was never prepared for life after the orphanage. There was no system in place for leaving when you reach the age of 18. I struggled to take care of myself and continue with school.”*

➔ Around a third of care leavers did not receive any support from the care home or from family after leaving care.

➔ Care leavers commonly faced problems accessing education or finding work. They had often made strong friendships inside care homes and missed these friends.

➔ Care leavers want...

- education support
- help earning a living
- mental health services
- peer support groups.

# QUESTIONS?

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Watch a webinar in which a panel of experts were asked questions about care reform in Uganda which is available [here](#).

This webinar may be repeated. To receive further details, complete this short [form](#).

# FEEDBACK

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Let us know what you think of this virtual study tour by completing this [short form](#).

# RESOURCES

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## Overviews of care reform

Milligan, I. (2016) [Alternative care and deinstitutionalisation. A case study of Uganda](#)

Ddumba-Nyanzi, I., Li, M. and Uganda country core team (2018) [Assessing alternative care for children in Uganda](#)

## Legislation, policies and guidance

The Republic of Uganda (2013) [Children \(Approved Home\) Rules](#) and [Children \(Approved Home\) assessment toolkit](#)

The Republic of Uganda (2016) [National Action Plan for Child Well-being](#)

Retrak (2013) [Standard operating procedures – family reintegration](#)

National Council for Children (2016) [The Child Act Amendment 2016 – Key objectives, the journey, key amendments and next steps](#)

Ministry of Gender, Labour and Social Development (2018) [The Uganda National Parenting Guidelines](#)

Ministry of Gender, Labour and Social Development (2019) [Case management standard operating procedures for child programming in Uganda](#)

Ministry of Gender, Labour and Social Development (2020) [Ugandan National Child Policy](#)

## Evaluations and descriptions of promising practice

Maestral International (2018) [End-line performance evaluation: Deinstitutionalization of Orphans and Vulnerable Children in Uganda \(DOVCU\)](#). See also ChildFund International (2018) [DOVCU final report](#) and Mutenyo, et al (2020) [Multistage processes of identifying children at risk or out of family care: A case of DOVCU project methods in Uganda](#)

Walakira, E., Ddumba-Nyanzi, I., Luwangula, R. (2016) [Strong beginnings – A family for all children: End of project evaluation report](#)

# RESOURCES

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Jolly, A. (2019) [Family reintegration and prevention of separation – end of project evaluation](#)

Uganda Child Protection Sub Working Group (2018) [Brief on alternative care for unaccompanied and separation children in humanitarian contexts in Uganda – Challenges and opportunities](#)

## Care during COVID-19

ChildFund, Plan, Save the Children, SOS Children's Villages, Terre des Hommes and World Vision (2020) [Keeping children safe in Uganda's COVID-19 response](#)

## News reports

Nianias, H. (2017) [No hugs, no one to talk to: how Ugandan orphanages are harming a generation. The Guardian, 23 November](#)

West, K. (2019) [UK groups fund illegal orphanages in Africa. BBC News, 17 January](#)

McCool, A. (2020) [Uganda to US adoption scam: judges and lawyers sanctioned. The Guardian, 18 August](#)



# GLOSSARY OF KEY TERMS

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## Alternative Care

The formal and informal care of children outside of parental care. Children outside of parental care are children not in the overnight care of at least one of their parents, as parents are unwilling or unable to care for children.<sup>23</sup> The Guidelines for the Alternative Care of Children outline several different forms of formal and informal alternative care including kinship care, residential care and foster care.<sup>24</sup>

## Residential care

Care provided in any non-family-based group setting.<sup>25</sup> A distinction is often made between different forms of residential care. For example:

- Institutional care. Large-scale facilities where children are cared for in large groups, usually involving shift-systems, a common set of rules, children sleeping in dormitories, and isolation from wider communities.
- Small group homes. Children cared for in small groups, usually with one or two carers, in specially designed and designated facilities.<sup>26</sup>

## Family-based care

Care in a family environment. Family-based care includes kinship and foster care (see below for definitions) and care by the child's biological or adoptive parents.

## Kinship care

Family-based care within the child's own extended family or with close friends of the family known to the child.<sup>27</sup>

# GLOSSARY OF KEY TERMS

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## **Foster care**

Foster care is a formal arrangement whereby a competent authority places children in the domestic environment of a family other than the child's own that has been selected, qualified and approved for providing such care.<sup>28</sup>

Although global guidance only acknowledges formal foster care, in many countries the term informal or spontaneous foster care is used to describe families taking in unrelated children that are previously unknown to them.

## **Supervised independent living**

Children and young people living alone or in groups in the community but supervised by social workers, caregivers and/or community volunteers.

## **Gatekeeping**

"A recognised and systematic procedure to ensure that alternative care for children is used only when necessary and that the child receives the most suitable support to meet their individual needs."<sup>29</sup>

## **Case management**

Case management is a key means of ensuring that vulnerable children and families get the services they need. Case management uses standardised guidance to support social workers in identifying needs, making referrals to appropriate services, monitoring children and families, and keeping effective records.<sup>30</sup>

# ENDNOTES

1. <https://data.worldbank.org/indicator/SP.POP.TOTL?locations=UG>
2. Government of Uganda and UNICEF Uganda (2015) 2015 Situation analysis of children in Uganda. Uganda: UNICEF, p.22.
3. Government of Uganda (2016) Ugandan Demographic and Health Survey 2016. Uganda: Government of Uganda. Ogwang, J. (2017) Care reform in Uganda: Achievements and challenges. Presentation given at Improving Care for Vulnerable Children. UK: Measure Evaluation. This figure refers to the percentage of children living in a household without either parent – the majority of whom are in kinship care.
4. Figure provided by the Ministry of Gender, Labour and Social Development, Government of Uganda.
5. A survey in 2015 found that 142 children had been placed in foster care by five agencies. Cited in Milligan, I. (2016) Alternative care and deinstitutionalisation. A case study of Uganda. UK: CELSIS, SOS Children's Villages and the EU, p.44.
6. Figure provided by the Ministry of Gender, Labour and Social Development, Government of Uganda.
7. The information in this section is taken from: Among, H. (2014) Study on legal guardianship and adoption practices in Uganda. Uganda: ChildFund; Cheney, K. and Rotabi, K. (2014) Addicted to orphans: How the global orphan industrial complex jeopardizes local child protection systems. In C. Harker, K. Hörschelmann and T. Skelton (eds.) Conflict, violence and peace: Geographies of children and young people. London: Springer; FHI 360 and ChildFund (2018) Economic Strengthening to Keep and Reintegrate Children into Families: Child and youth savings groups. A learning brief. USA: FHI 360 and ChildFund; Maestral International (2018) End-line performance evaluation: Deinstitutionalization of orphans and vulnerable children in Uganda (DOVCU). USA: Maestral; Measure Evaluation and USAID (2017) Care reform in Uganda: Timeline of system achievements. USA: Measure Evaluation; Ministry of Gender, Labour and Social Development (MGLSD) (2018) The Uganda National Parenting Guidelines. Uganda: MGLSD; MGLSD (2020) National Child Policy. Uganda: MGLSD; MGLSD (2012) Baseline study on the state of institutional care. Kampala: MGLSD; Milligan 2016; Mutenyo, F., Machingaidze, S., Okello, W., Otai, M. and Asekenye, M. (2020) Multistage processes of identifying children at risk or out of family care: A case of DOVCU project methods in Uganda. Global Social Welfare, 7, p.201-213; Ogwang, J. 201; ChildFund, Plan, Save the Children, SOS Children's Villages, Terre des Hommes and World Vision (2020) Keeping children safe in Uganda's COVID-19 response. ChildFund: Uganda; USAID and 4Children (2015) Keeping children in healthy and protective families. Operational research project in Cambodia, Rwanda and Uganda. USA: USAID and 4Children; Walakira, E., Ddumba-Nyanzi, I., Luwangula, R. (2016) Strong beginnings – a family for all children: End of project evaluation report. Uganda: TdH Netherlands and Makerere University.
8. These programmes included: Deinstitutionalisation of Orphans and Vulnerable Children in Uganda project; Economic Strengthening to Keep and Reintegrate Children in Families; The Family Resilience project; The Sustainable/Better Outcomes for Children and Youth and the Keeping Children in Healthy and Protective Families project.

# ENDNOTES

9. In collaboration with Child's i Foundation, ANPPCAN, Alternative Care Initiatives, Makerere University and SOS Children's Villages, with government oversight. This work is later continued through the The Alternative Care Consortium on Systems Strengthening Project (2016-18).

10. Maestral International 2018; ChildFund International (2018) The effect of DOVCU's integrated package of services on reintegrating children and families. Uganda: ChildFund International. See also: <https://bettercarenetwork.org/sites/default/files/2020-10/Protective%2BSystems%2BCase%2BStudy%2B-%2BUganda%2B%28Print%29.pdf>

11. The video was created with the support of the Better Care Network.

12. USAID, FHI 360, ASPIRES and ChildFund International (2018) Economic Strengthening to Keep and Reintegrate Children into Families. Matched savings accounts. A learning brief. Uganda: USAID, FHI 360, ASPIRES and ChildFund International.

13. The video was made with support of the Better Care Network.

14. Cheney and Rotabi 2014; Matovu, S., Dawson-Rose, C., Weiss, S. and Wallhagen, M. (2019) 'Thoughts can kill you': Characterisation of mental health symptoms by Ugandan grandparent-caregivers in the HIV/AIDS era. *Issues in Mental Health Nursing*, 40 (5), p.391-398; Ddumba-Nyanzi, I., Li, M. and Uganda country core team (2018) Assessing alternative care for children in Uganda. Uganda: Measure Evaluation.

15. Government of Uganda (1995) Ugandan Demographic and Health Survey 1995. Uganda: Government of Uganda; Government of Uganda (2001) Ugandan Demographic and Health Survey 2001-2. Uganda: Government of Uganda; Government of Uganda (2006) Ugandan Demographic and Health Survey 2006. Uganda: Government of Uganda; Government of

Uganda (2011) Ugandan Demographic and Health Survey 2011. Uganda: Government of Uganda; Government of Uganda (2016) Ugandan Demographic and Health Survey 2016. Uganda: Government of Uganda.

16. Mann, G. (2016) An investigation of the circumstances of children living in residential care in Uganda, with a focus on those who are HIV +. New York and Kampala: Ministry of Gender, Labour and Social Development, Government of Uganda and UNICEF; see also Ogwang 2017.

17. Matovu et al. 2019.

18. Uganda Child Protection Sub Working Group (2018) Brief on alternative care for unaccompanied and separated children in humanitarian contexts in Uganda – Challenges and opportunities. Uganda: Uganda Child Protection Sub Working Group.

19. These short films were made with the support of the Better Care Network.

20. The video was created with the support of the Better Care Network.

21. The video was created with the support of the Better Care Network.

22. Ugandan Care Leavers (2019) The care leaver experience. A report on children and young people's experiences in and after leaving residential care in Uganda. Uganda: Uganda Care Leavers.

23. United Nations General Assembly (2010) Guidelines for the alternative care of children, GA Res 142, UNGAOR, 64th session, supplement number 49, Vol.1 (A/64/49 2010). New York: United Nations.

24. Ibid.

25. Ibid.

# ENDNOTES

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26. Family for Every Child (2012) Towards a family for every child. Conceptual framework. London: Family for Every Child.

27. United Nations General Assembly 2010.

28. Ibid.

30. Better Care Network (2015) Making decisions for the better care of children. The role of gatekeeping in strengthening family based care and reforming alternative care systems. New York: UNICEF and the Better Care Network.

30. UNICEF and the Global Social Service Workforce Alliance (2019) Guidelines to strengthen the social service workforce for child protection. New York: UNICEF.

# ACKNOWLEDGMENTS

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