

FEDERAL MINISTRY OF WOMEN AFFAIRS

IMPLEMENTATION STRATEGY FOR THE NATIONAL GUIDELINES FOR THE ALTERNATIVE CARE OF CHILDREN IN NIGERIA



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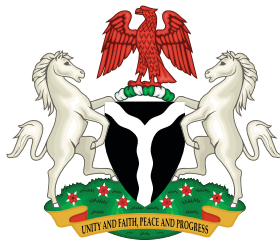


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VILLAGES
NIGERIA



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Implementation Strategy for the National Guidelines for the Alternative Care of Children in Nigeria

© Federal Ministry of Women Affairs

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was developed by the Government of Nigeria's Federal Ministry of Women Affairs with support from
United Nations Children's Fund Nigeria and SOS Children's Villages Nigeria.



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the development and printing of the *Implementation Strategy for the National Guidelines on
Alternative Care of Children in Nigeria*.

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Foreword

The development and validation of the National Guidelines for the Alternative Care of Children in Nigeria, spearheaded by the Federal Ministry of Women Affairs and inspired by the United Nations Global Guidelines for the Care of Children in Alternative Care, marks a commendable achievement. These guidelines establish a framework to regulate the standards of care provided by government and other institutions involved in caring for children. They aim to safeguard children in alternative care from various forms of violence, abuse, neglect and exploitation.

Effective implementation of these guidelines requires a clear roadmap outlining tasks, responsibilities, methods and timeframes. Recognizing this need, an Implementation Strategy for the National Guidelines on Alternative Care of Children has been developed. This strategy mandates the auditing of existing residential facilities, facilitates data collection and record-keeping to track facilities and children, mandates periodic inspection and monitoring of facilities, and calls for the sensitization and training of relevant personnel as per the guidelines.

The United Nations Children's Fund (UNICEF) firmly advocates for children to grow and develop within familial environments, emphasizing the importance of being with parents, caregivers and relatives. When alternative care is deemed necessary in the child's overall best interests, it is crucial to ensure that stringent safeguards are in place to maintain high standards of care.

I commend the leadership of the Federal Ministry of Women Affairs and the National Sub-committee on Alternative Care in Nigeria for their dedication in developing and validating the Implementation Strategy for the National Guidelines for the Alternative Care of Children in Nigeria.



Cristian Munduate
Country Representative, UNICEF Nigeria

Preface

The legal and policy framework for the care and protection of children in Nigeria has evolved over the years. This has manifested in Nigeria's ratification of the United Nations Convention on the Rights of the Child, the passing of the Child's Rights Act 2003 and the enactment of the various child rights and child protection laws in various states of the country.

The development of National Guidelines for the Alternative Care of Children in Nigeria was undertaken to provide for standards of care for alternative care facilities and service providers across the country. The need to ensure the prompt and effective implementation of the Guidelines for the Alternative Care of Children in Nigeria informed the development of this implementation strategy. It aims to guide and inform policies, procedures and practices to ensure that the objectives of the guidelines are achieved. This implementation strategy recognizes the division of power and responsibilities between the different levels of government and is based on the twin principles of federal, state and interagency cooperation on the one hand, and communication with and sensitization of key stakeholders involved in the continuum of care at all levels of government on the other hand.

Furthermore, the implementation strategy recognizes that significant steps need to be taken before a robust enumeration and registration system of alternative and formal foster care facilities – which are preferable to institutional care facilities – is developed and managed. Because the goals of the national guidelines will not be achieved overnight, a phased approach with suggested timeframes for the first three years is proposed in this strategy to ensure a sequenced and purposive implementation of the guidelines.

The Implementation Strategy for the National Guidelines for the Alternative Care of Children in Nigeria has been developed through a consultative process involving the National Sub-Committee on Alternative Care with membership drawn from relevant line ministries, departments and agencies, development partners and civil society organizations.



Barrister Uju Kennedy Ohanenye
Minister of Women Affairs

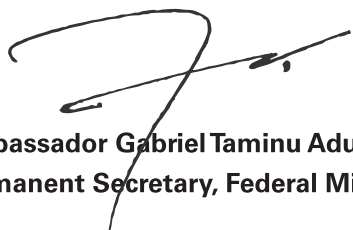
Acknowledgements

The Federal Ministry of Women Affairs acknowledges the contributions of various stakeholders to the development of the Implementation Strategy for the National Guidelines for the Alternative Care of Children in Nigeria.

The objective of developing the Implementation Strategy for the National Guidelines for the Alternative Care of Children in Nigeria would not have been achieved without the support of organizations and individuals who contributed in several ways towards its realization. Special thanks go to the SOS Children's Villages under the leadership of Mr Eghosa Erhumwunse, the National Director, supported by Chuba Ezeigwe, and Valentine Achum and Mark Nwakaudu for facilitating and supporting meetings of the National Sub-Committee on Alternative Care.

We are indebted to the United Nations Children's Fund Nigeria Country Office and the Chief of Child Protection, Ibrahim Sesay, and Child Protection Specialists, Dr Godwin Odo, and Nkiru Maduechesi, for their invaluable contributions and support in coordinating the processes leading to the development of the implementation strategy for these guidelines. UNICEF Nigeria also engaged the services of Prof Julia Sloth-Nielsen as an international consultant, to bring her wealth of experience at the global and regional levels into the development of the implementation strategy for the National Guidelines for the Alternative Care of Children in Nigeria. We also appreciate Nigel Cantwell for reviewing this implementation strategy and providing insightful comments.

The members of the National Sub-Committee on Alternative Care also deserve commendation for their dedication and industry in reviewing the implementation strategy. Their diverse experience contributed immensely to improving the quality of the strategy. I cannot conclude this without appreciating the invaluable contribution of the Child Development Department of the Federal Ministry of Women Affairs ably led by Andrew Ali Madugu, Director; Musa Aliyu Musa, Deputy Director; Dr Samuel Ebifa; Alimi Ahmed Shina and Olutimi Jacobs as well as other staff members of the Ministry whose contribution in one way or another yielded this implementation strategy.



Ambassador Gabriel Taminu Aduda
Permanent Secretary, Federal Ministry of Women Affairs

Acronyms and abbreviations

ACERWC	African Committee of Experts on the Rights and Welfare of the Child
FMWA	Federal Ministry of Women Affairs
LGACC	Local Government Alternative Care Committee
NACC	National Alternative Care Committee
NACIU	National Alternative Care Implementation Unit
SACC	State Alternative Care Committee

Introduction

The National Guidelines for the Alternative Care of Children in Nigeria was developed to provide harmonized standards and guidance for the care and protection of children by social workers, and child welfare and protection practitioners in the public and non-governmental sectors to improve the quality of alternative care services across the country. These guidelines clearly designate roles and responsibilities for the various stakeholders within the alternative care system and provide a framework for the development and implementation of alternative care arrangements, as well as a monitoring and evaluation mechanism to ensure compliance with extant laws, policies and regulations.

The operationalization of these guidelines requires the development of an implementation strategy to guide and inform policies, procedures and practices with a view to ensuring that the objectives of the guidelines are achieved. This is the purpose of this implementation strategy.

This implementation strategy must be read alongside the recently adopted National Guidelines for the Alternative Care of Children in Nigeria. The guidelines were developed through a consultative process led by the Federal Ministry of Justice, in collaboration with the National Sub-Committee on Alternative Care and the National Child Rights Implementation Committee, with the support of UNICEF Nigeria and SOS Children's Villages Nigeria. A national workshop was convened in April 2023 to review the draft guidelines and make appropriate recommendations to improve their overall quality.

This strategy recognizes the division of power and responsibilities between the different levels of government and is based on the twin principles of federal, state and interagency cooperation on the one hand, and communication with and sensitization of key stakeholders involved in the continuum of care at all levels of government on the other hand. Furthermore, the implementation strategy recognizes that significant steps need to be taken before a robust registration system of alternative and formal foster care facilities – which are preferable to institutional care facilities – is developed and managed. The system is still in its infancy, and many aspects, such as monitoring structures to oversee gatekeeping processes, need to be established. Thus, the goals of the national guidelines will not be achieved overnight, so a phased approach with a potential timeline for the first three years is proposed in this strategy to ensure a sequenced but purposive implementation of the guidelines.

PART 1: Communication and dissemination of the guidelines

Implementation of the guidelines for the alternative care of children at the state and local government levels presupposes that policymakers and practitioners are not only aware of the existence of the guidelines, but that they are also conversant with their provisions.

The first task towards achieving the implementation of the guidelines is for the Federal Ministry of Women Affairs (FMWA) to disseminate the contents and communicate the importance of the guidelines to the equivalent authorities responsible for children's services at the state and local levels. This is a necessary requirement because the responsibility for child issues at the state level lies with the relevant state ministries. There is no blueprint for carrying this out, and it may differ from state to state. For example, a large workshop could be held at the federal level with representatives of the state authorities and, thereafter, workshops would be convened at the state level. Alternatively, states could be grouped together within the geopolitical zones with key state officials in attendance. Another option would be to organize workshops in each of the states, where the guidelines, their intent and contents could be explained by federal delegates. Participation in these workshops would be directed at relevant offices and role players in alternative care of children in the country's states. These convenings should include government officials, representatives of civil society organizations, religious and traditional leaders, homeowners or operators of alternative care facilities, heads of social welfare institutions and other individuals with responsibilities in the alternative care system.

The overall objective of the communication is to ensure nationwide buy-in for the principles of the guidelines. Of particular importance is the emphasis on suitability of the type of alternative care, on the principle of necessity and the need for deinstitutionalization, on gatekeeping to ensure individualized decision-making before any child is admitted to any form of alternative care and the appropriateness to end accommodation in residential facilities for children younger than three years of age.

Added to these points is the need for formal structures to be established at state and local levels to oversee gatekeeping and other processes, and the need to develop alternative forms of care other than residential care, such as formal foster care.

Because of the desired goal of ensuring unanimity of vision for an improved system of alternative care as envisaged by the United Nations Guidelines for the Alternative Care of Children (2010), communicating to the state level by mailing the national guidelines is not preferred, as it leaves open the possibility that the guidelines will not be read or fully understood. Direct engagement with key stakeholders at the state level is important as it will also provide an opportunity for feedback on the provisions of the guidelines and any other contextual circumstances that may inhibit the full implementation of the guidelines as envisaged.

Timeline: Communication with state authorities should take place as soon as possible, but within three months of the adoption of the national guidelines.

PART 2: Establishment of functional committees at all levels

The National Guidelines for the Alternative Care of Children in Nigeria envisages the establishment of committees at all levels of government – federal, state and local levels. These committees created under the guidelines have the responsibility of overseeing the implementation of the guidelines within their area of operation. The committees have the responsibility of implementing the guidelines on a day-to-day basis, giving practical effect to the provisions of the guidelines, in addition to carrying out monitoring and evaluation responsibilities to ensure compliance with the provisions and delivery of quality, standard care to children in alternative care.

As a first step, the federal committee identified in the national guidelines – the National Alternative Care Implementation Unit (NACIU)¹ – should be instituted and its composition established with responsibilities clearly set out in its terms of reference. This operational unit should be adequately staffed to enable it to carry out its functions efficiently and effectively.

Thereafter, the National Alternative Care Committee (NACC) should be formed, as a subcommittee of the National Child Rights Implementation Committee. This committee is to be multidisciplinary, and should include representatives of the judiciary, the police, the Nigeria Security and Civil Defence Corps, the Ministry of Education, the Ministry of Health and relevant civil society organization networks, and other service providers relevant to child protection. It will be important to include at least one religious leader to represent the interests of children in the religious system applicable in the area, like the Almajiri system in the northern parts of Nigeria.

This committee (NACC) must be replicated at the state and local government levels (with states providing guidance to local authorities within their area of jurisdiction to assist in the establishment of the committee at the local authority level). At the state level, the committee shall be referred to as the State Alternative Care Committee (SACC) and, at the local government level, as the Local Government Alternative Care Committee (LGACC).²

The Director of Child Development shall be the Chair of the Committee at the federal level (NACIU), with her/his functional equivalent chairing at state (SACC) and local government (LGACC) levels. The frequency of meetings is already provided for in the national guidelines, namely, at least quarterly to ensure that there is adequate review of and follow-up on cases, but more often if the case load demands this.³ It is likely that, meetings at the federal level would need to be scheduled monthly to accommodate the many oversight functions envisaged at this level.⁴

1 See the National Guidelines for the Alternative Care of Children in Nigeria (Federal Ministry of Women Affairs, 2024), section 7.1.1.

2 Ibid., section 7.1.3.

3 Ibid., section 7.1.4.

4 Ibid., sections 7.2.1–7.2.5.

Timeline: The federal committee (NACIU) should be constituted within three months of the adoption of the guidelines for the alternative care of children, if not already in place, and the state committees (SACCs) within three months of the communication and dissemination of the guidelines to state authorities. The local government committees (LGACCs) should be constituted within three months of the communication of the guidelines to the local authorities.

PART 3: Training and sensitization of key stakeholders

The primary purpose of the guidelines is to ensure that quality alternative care – in line with international standards and regional and national legislation and policies – is provided for children in need of care. It is therefore important that those responsible for implementing the guidelines are familiar with the contents of the guidelines and can operationalize them. To this end, a training programme should be organized at federal and state levels by the respective agencies responsible for the alternative care of children to sensitize childcare practitioners on the provisions of the guidelines and the standards of care contained in them, and to clarify the respective roles and responsibilities of agencies and practitioners.

The training programme will involve relevant stakeholders, policy makers, and implementers at all levels, including, but not limited to, social workers and other staff working in social welfare and child development departments. Knowledge obtained from the training and sensitization programme will equip them with the requisite knowledge and skills to undertake monitoring activities to ensure that alternative care facilities comply with the standards of care and quality assurance required.

Timeline: The training and sensitization of key stakeholder should be ongoing, following the adoption of the guidelines.

PART 4: Recruitment and training of foster carers

As reiterated in the National Guidelines for the Alternative Care of Children in Nigeria, and in line with global best practices, the home is the best place for a child to grow and develop. The need to expand foster care as an alternative to residential care requires that willing foster carers be recruited and trained in each state and local authority area. The development of formal foster care in societies unfamiliar with this form of alternative care can be a major challenge. It is therefore important to carry out extensive community sensitization programmes on the issue – taking the local context into consideration – to promote understanding and acceptance among the residents of the community.

The number of foster carers required in each instance will depend on the number of identified cases that are likely to benefit from placement in foster care; it is likely that a pool of suitable persons will be built up incrementally over time. For the purposes of group training, however, it is proposed that

groups of 10–15 foster carers be sought. The individuals could be identified by communities (through word of mouth) or by advertising. Existing children’s residential facilities might also be well placed to suggest persons suitable to be included on the registers of alternative carers.⁵ Community-based child protection groups can play a significant role in this regard.

Once recruited, state authorities are to establish a caregivers’ association in each state to provide caregivers with mutual support.

Training for prospective foster carers is required by the guidelines. It is proposed that the NACC commissions a standardized training toolkit, so that similar training is provided across the country. Training tools might need to be translated into local languages.

Training should take place over three days, and might include sessions on:

- Therapeutic parenting
- Understanding children’s behaviour
- Caring for children who have been abused
- Teenage development and mental health
- Safeguarding to protect children
- Paediatric first aid
- Practices for safer caring
- Working with other foster carers and agencies
- Safe use of medication
- Safeguarding against female genital mutilation
- Record-keeping for foster carers
- Online safety and cyberbullying
- Addressing conflict
- Telling children difficult and/or sensitive information
- Positive discipline
- Preparation for adult life⁶
- Positive parenting.

Trainers can be recruited in-house from among government-employed social workers. A standard ‘train-the-trainers’ session should be conducted prior to the roll out of training at state level. This should take place after the establishment of the SACCs, and ideally within three months of such

⁵ The Federal Ministry of Women Affairs and state counterparts are to maintain a list of individuals who have been found unfit to provide alternative carers. See the guidelines (Federal Ministry of Women Affairs, 2024), section 7.2.3(c).

⁶ See The Fostering Network (n.d.) and National Fostering Group (n.d.) websites.

committees being established. Follow-up training can be organized as and when the need arises, but children should not be referred to or placed in foster care with untrained persons, or with persons found unsuitable to work with children.

A register of approved and trained foster carers, current and prospective, must be kept. The database shall include each carer's name, sex, age, locality and contact details. The database should be accessible to other local child protection actors for their use in identifying potential foster parents for a child in that locality. However, administration of the database shall be restricted to the social protection officer or child protection officer of the LGACC for the purposes of maintaining confidentiality.⁷ State alternative care authorities must therefore ensure that LGACCs begin the task of creating such registers using an approved template. Data collected (such as the number of foster carers entered) is to be shared with state and federal authorities on an annual basis.

The register will inform the process of matching children in residential care with foster parents in line with the provisions of the guidelines relating to matching of children with foster parents.

The guidelines also encourage and facilitate voluntary notification of informal kinship care of children. Information shall be kept on children in kinship care;⁸ a kinship care registry is to be maintained at the LGACC in each location and shared with the area social welfare officer, child protection officer or child development officer who is expected to visit every quarter. The volunteer case workers of non-governmental and faith-based organizations shall support the registration and monitoring of kinship care placements. It is expected that because of the informal nature of kinship care arrangements within families and in communities, augmenting this registry would be achieved in an incremental fashion.

Timeline: The recruitment and training of foster carers should be completed within the first year.

PART 5: Consultation with Muslim leaders and Islamic councils

The commencement of developmental quality assurance processes is aimed at bringing these institutions in line with international principles around child rights and domestic law and policy.

The new guidelines on the alternative care of children makes provision for Almajiri children in Quranic schools which function as boarding schools; these guidelines need to be communicated specifically to religious leaders.⁹ More specifically, the rights of children in these schools (as provided for) must

⁷ See the guidelines (Federal Ministry of Women Affairs, 2024), section 5.2.2 (step 4).

⁸ Ibid., section 5.1.4.

⁹ Ibid., section 3.3, specifically 3.5.3.

be well understood, as well as the obligations placed upon the mallams. This information should thereafter be cascaded to local Islamic councils. According to 3.5.3 of the guidelines (FMWA 2024), the Islamic council and social welfare authority are required to ensure that Quranic schools register with both the Islamic council and the social welfare authority, and that they are inspected by an independent and multidisciplinary team no less than once every quarter to ensure that the provisions of the guidelines are being adhered to.

One objective of the consultation with Muslim leaders and the Islamic councils is to develop a modus operandi to expedite the registration process, and the subsequent inspections. Based on existing studies (UNICEF, 2022, for example, and sources cited within), it is likely that a significant proportion of these Quranic schools will not meet the minimum criteria specified in the guidelines. As far as is possible, schools must be provided with assistance to enable them to meet those minimum standards within a time specified period (say 6–12 months).

Regardless, social welfare authorities are mandated by the guidelines to implement reintegration and reunification programmes for children who are separated from their families and living in Quranic schools. To this end, an audit of children living in such schools must be commenced by LGACCs. Their families must be traced and efforts made to secure the children's reintegration into their families. This will also be a gradual process, to be implemented over a one-year period from the time of the consultation with Muslim leaders and Islamic councils. These children can then be enrolled in Quranic schools within and around their communities so that they can attend school from their respective homes and still enjoy the advantages of family-based care.

The consultation with the above religious authorities is also relevant to another dimension of the guidelines, namely strengthening the *Kafalah* system of alternative care.¹⁰ Islamic authorities have a role to play insofar as the guidelines specify that, "The prospective *kafii* will inform the religious authorities in the district and the LGACC of his/her intentions. If the religious authorities agree that the person will bring up the child within Islamic teachings, the authorities will sign and stamp the form recommending the *kafii*." Before the consultation, therefore, a form to record the *Kafalah* agreement needs to be developed to be discussed with the religious groupings.

The Director of Child Development is also required to establish and maintain a register of all children under *Kafalah*.¹¹ This should be done within 12 months of the consultation with religious leaders.

Timeline: Communications with religious leaders should begin within the first three months (federal level) and be completed by the end of the first year (state level). Audits of children living in Quranic schools and a register of all children under *Kafalah* should be complete within the first year.

¹⁰ See the guidelines (Federal Ministry of Women Affairs, 2024), section 5.3, and Republic of Kenya (2022).

¹¹ See the guidelines (Federal Ministry of Women Affairs, 2024), section 5.4.1(g).

PART 6: Audit of existing residential facilities

The guidelines for the alternative care of children require vastly improved data collection and record-keeping systems. At the outset, it is important to record that the actual numbers of children accommodated in residential care in Nigeria is not known. However, a good start has been made at the federal level, with a study having been commissioned into children in residential care facilities in several states. This needs now to be rolled out nationally, so that there is an overall picture of: how many children are so accommodated; whether they have any biological parents or families with whom they could potentially be reintegrated; and other relevant information, such as special needs, age and gender. The envisaged audit needs to capture both registered facilities and, as far as possible, those that are not registered.

The goals would be threefold to:

- Monitor progress in fulfilling the overarching aim of deinstitutionalization;
- Identify unregistered facilities and ensure that they become registered on the basis of compliance with relevant criteria or, failing that, closure of the facility; and
- Begin the process of inspecting facilities provided for in legislation and policy, and to institute quality improvement processes.¹²

This process will not be rapid if it is done thoroughly. Implementation of the audit should be at state level, with the federal government providing advice and assistance. The manner of conduct of the audit and the information to be collected should form the basis of the communication with states as outlined in Part 1 of this implementation strategy. Although registration and inspection should be an ongoing process, it is hoped that the initial groundwork of a national audit can be completed within two years of the communication with states.¹³

Timeline: The audit of all children's residential facilities should be captured within the first two years of adopting the guidelines.

PART 7: Verify and standardize registration channels, mechanisms and forms used to register residential facilities

It is not evident whether consistent practice at the state level is being followed regarding information that must be provided by those seeking to register children's residential facilities or the extent to which

¹² Ibid., section 8.1.

¹³ See, for one example of such a mapping process, Petrowski et al. (2022).

the regulations specified in Part IX of the Child Rights Act, 2003, have been put in place. The forms used to apply for registration of voluntary children's homes also need to be reviewed to ensure they are still fit for purpose, consistent and up to date.

If need be, the registration process and documentation required should be communicated to state authorities as part of the communication process outlined in Part 1 of this implementation strategy.

Timeline: The registration channels and mechanisms, and the forms to be used to register residential facilities for children at the state level should be complete within the first three months of adopting the guidelines.

PART 8: Verify gatekeeping mechanisms and forms to be used

Since gatekeeping is one of the most important elements in ensuring that implementation is based on the principles of suitability and necessity with the overarching aim of deinstitutionalization, the establishment of robust gatekeeping systems is crucial. The guidelines for the alternative care of children specify that gatekeeping should usually be carried out by social welfare professionals or trained staff but would often be aided by community and local service providers, on a case-by-case basis and in multidisciplinary teams.

"For gatekeeping to be effective, the following are necessary:

- a) Strong oversight from the regulatory authority of alternative care services;
- b) Gatekeeping should be situated within the continuum of service provision and be subject to quarterly review, especially in terms of monitoring and oversight to ensure procedures are followed correctly; [and]
- c) All pre-assessment screening and assessment procedures described in the standard operating procedures should be followed[.]”¹⁴

Stakeholders must be made aware of the Federal Ministry of Women Affairs' standard operating procedures (FMWA, 2023) developed as part of the case management tools for child protection in Nigeria. This includes government social workers and private-sector role players who work with children's residential facilities and foster carers and offer preventive services to children and families.

Timeline: Gatekeeping teams should be established at the state and/or local government authority levels, with all structures to be in place within one year of the adoption of the guidelines.

¹⁴ See the guidelines (Federal Ministry of Women Affairs, 2024), section 6.1.

PART 9: Inspection of Quranic schools and establishment of developmental quality assurance processes

Once the audit of Quranic schools has been completed, the establishment of a robust system of inspections of existing and any new establishments needs to be set up. This will probably require the involvement of representatives from religious communities; i.e., the teams will be differently constituted from those inspecting other facilities providing alternative care to children.

Timeline: The inspections panels at the local government authority level should be established within three months of the conclusion of the audit described in Part 5 of this implementation strategy.

PART 10: Inspection of childcare facilities for children in conflict with the law

To some extent this has been dealt with under Part 6 above. However, a standard format for inspections of residential facilities must be formulated and used (e.g., carried out over one day), as well as a standardized format for recording findings and feeding these back to the facility's staff for them to address, where needed. Records and notes should be digitized wherever possible. The purpose of these inspections is to inform a development quality assurance process to bring childcare facilities for children in conflict with the law in line with international child rights principles and domestic law and policy.

Particular attention should be given to facilities caring for children who are in conflict with the law, whether children are awaiting trial or serving a sentence. These children have the right to: adequate living facilities suitable for their well-being and development; adequate nutrition and safe drinking water; health care; hygienic toilet facilities; adequate space and ventilation; education, if below the age for compulsory education; access a safe storage facility for personal items; access appropriate recreational and sporting facilities; access rehabilitative programmes to ensure their preparation for reintegration into the community; and to vocational, adult literacy and skills development programmes, if above the age of compulsory education.¹⁵

Boys shall be separated from girls and older children from younger children in residential facilities for children in conflict with the law. Sentenced children shall be separated from children awaiting trial, except that they may attend educational, vocational and skills training together during the day

¹⁵ Ibid., section 3.6.

under appropriate supervision. All reasonable measures should be taken to ensure that children are protected from the risk of fire or other hazards, as well as harm or violence from other children in the residential facility. Each residential facility should have an emergency response plan. All residential facilities for children in conflict with the law must have access to a social worker(s) in a ratio suitable to the number of children accommodated at the facility. Furthermore, these facilities must have access to an educationalist(s) in a ratio suitable to the number of children accommodated at the facility.

Again, an audit is required to determine how many children in conflict with the law are in detention, and where they are being accommodated (secure care facility, prison, etc.) and whether their conditions of detention comply with international standards and policy.

It is recommended that the assistance of the National Human Rights Commission be sought in monitoring the situation of children deprived of their liberty – conventionally national human rights commissions have particular expertise and a role to play in monitoring the situation of detainees. The monitoring exercise should cover all correctional institutions, including those being operated by the Nigerian Correctional Service and remand homes being operated at the state level. Ideally, the Nigerian Correctional Service should be on the inspection team, as well as a health worker. (The inspection of facilities accommodating children in conflict with the law can be regarded as a separate issue from the inspection of children in residential care facilities, with different stakeholders involved.) At all times, compliance with international standards should be the goal,¹⁶ and the focus must turn to catalysing the adoption of policies aimed at developing diversion (channelling cases away from the criminal justice system towards community-based programmes) and alternative sentencing for children in conflict with the law with a view to using non-custodial sentencing.

Timeline: The audit to determine the numbers of children in conflict with the law who are in detention, where they are accommodated and the conditions there should be completed within the first year following adoption of the guidelines.

PART 11: Record-keeping and process flow charts

The proper implementation of an alternative care system for children that is individualized and accountable depends on solid record-keeping and adherence to process flow charts to ensure that each decision-making and review step is done within the agreed period.

Ideally, record-keeping should be digitalized wherever feasible and functional, without compromising children's rights to privacy (i.e., digitalization must at the same time ensure confidentiality and limited access to records in line with the Data Protection and Information Sharing Protocols contained in the validated Harmonized Case Management Tools of 2023).

¹⁶ See Nowak (2019).

Timeline: Record-keeping and adherence to process flow charts should be ongoing, following the adoption of the guidelines.

PART 12: Translations

Insofar as it is feasible and cost permitting, the guidelines for the alternative care of children need to be translated into some of Nigeria's main local languages. So too should the relevant forms and standard operating procedures be translated. This is of particular importance in areas where English is not spoken and will also make the guidelines more accessible to communities and other stakeholders. The FMWA could possibly enter partnerships with donors to help fund the costs of translation.

Timeline: Translations of the guidelines, forms and standard operating procedures should be completed within the first three years of implementation.

PART 13: Create linkages between formal and informal structures to promote community participation and ownership

It is important to ensure that linkages are created between the formal structures at the federal, state and local levels with the informal structures at the ward or community levels. This is necessary in view of the important roles that community-based child protection groups play in the protection of children, including those in alternative care.

This will ensure that the community plays a key role in the implementation of alternative care, which includes but is not limited to screening foster parents and ensuring that the required standards of care are provided to children in alternative care. Community ownership and participation is crucial in promoting deinstitutionalization and ensuring the sustainability of alternative care arrangements for children.

Timeline: Community awareness programmes should be presented on a range of issues within the first year following adoption of the guidelines.

PART 14: Awareness-raising

Different types of awareness-raising are envisaged in the guidelines for the alternative care of children – for example, awareness-raising on children’s rights and alternatives to residential care and foster care, and on educating communities about the potential challenges faced by children in the Almajiri system in the current way it is practiced in some areas. Moreover, the guidelines envisage this to be a joint responsibility of government agencies and civil society. Ideally, a dedicated implementation strategy for community awareness-raising would assist in mapping out a plan to reach communities in the identified domains and ensure a reasonable geographic reach of awareness programmes. Where appropriate, materials might need to be developed (posters, pamphlets). Community awareness should be seen as an essential component of systems strengthening for child protection,¹⁷ and for the furtherance of a strong community-based model for the alternative care of children.

Timeline: Awareness-raising should be ongoing, following the adoption of the guidelines.

PART 15: Checklist

A checklist of activities for the implementation of the guidelines for the alternative care of children should be designed for the various implementers and used to monitor the implementation of the guidelines. A simplified example is given below.

Activity		Done
Required register is in place		
	Foster carers	
	Kinship care	
	Residential facilities	
	Almajiri	
	Other	
Committee is established		
	National Alternative Care Committee (NACC)	
	State alternative care committees (SACCs)	
	Local government authority care committees (LGACCs)	

¹⁷ See the African Committee of Experts on the Rights and Welfare of the Child’s (ACERWC’s) general comment on systems strengthening for child protection, in particular paragraph 6.5 (ACERWC, 2018).

Activity		Done
Sensitization and awareness-raising		
	State authorities	
	Local government authorities	
	Agencies	
	Practitioners	
	Community	
Gatekeeping teams are established		
	Local government authority team	
	State team, if necessary	
All required audits have been undertaken		
	Residential care facilities	
	Facilities for children in conflict with the law	
	Quranic schools	
	Other ...	
Ongoing communication channels have been successfully developed		
	Between federal and states	
	Between state and local government authorities	
Foster carers have been recruited		
Foster care support groups set up		
Training		
	Materials for foster carers have been developed	
	Training given	
The guidelines have been translated		
	Local language 1	
	Local language 2	
	Local language 3	
	Pidgin English	
Digital record-keeping has been initiated		
Inspection systems		
	Implemented	
	Inspections are taking place on a regular basis	

PART 16: Indicative timeline

Period for completion					
Within 1 month	Within 3 months	Within 1 year	Within 2 years	Within 3 years	Ongoing
Part 1: Communicate the contents and importance (general scope) of the guidelines to the equivalent authorities responsible for children's services at the state level	Part 1: Communicate the contents and importance (general scope) of the guidelines to the equivalent authorities responsible for children's services at the local government level				Part 3: Training and sensitization of key stakeholders
	Part 2: The National Alternative Care Committee (NACC) should be formed	Part 2: State and local government alternative care committees (SACC and LGACC) should be formed			Part 11: Record-keeping and adherence to process flowcharts
		Part 4: Recruitment of groups of 10–15 foster carers in each state			Part 14: Awareness-raising
		Part 4: Training materials for prospective foster carers commissioned and train-the-trainers session held			
		Part 4: Kinship care registry is to be established and maintained by the LGACC			
		Part 4: A register of approved and trained foster carers, current and prospective, must be established			

Period for completion					
Within 1 month	Within 3 months	Within 1 year	Within 2 years	Within 3 years	Ongoing
	Part 5: Communication of the new guidelines on Almajiri children in Quranic schools (that function as boarding schools) to religious leaders at the federal level	Part 5: Communication of the new guidelines on Almajiri children in Quranic schools (that function as boarding schools) to religious leaders at state level			
		Parts 5 and 9: Completion of audit of children living in Quranic schools by LGACCs, with a view to reunification with families			
		Part 5: Development of a form to record <i>Kafalah</i> agreements			
		Part 5: Establish and maintain a register of all children under <i>Kafalah</i> (by the Director of Child Development)			
	Part 7: Verify registration channels, mechanisms and forms to be used to register residential facilities for children at the state level	Parts 13 and 14: Community awareness programmes are presented on a range of issues related to child rights, alternative childcare, and prevention of abuse and neglect	Part 6: Audit of children's residential facilities to capture both registered facilities and, as far as possible, those that are not registered; to be undertaken at state level		

Period for completion					
Within 1 month	Within 3 months	Within 1 year	Within 2 years	Within 3 years	Ongoing
		Part 8: Gatekeeping teams should be established at state and/or local government authority level, with all structures to be in place within the first year of adopting the guidelines, working with the 2023 federal standard operating procedures for case management of vulnerable children in Nigeria			
		Part 10: Conduct an audit to determine how many children in conflict with the law are in detention, where they are being accommodated (secure care facility, prison, etc.) and what their conditions of detention are, to ensure compliance with international standards			
				Part 12: The guidelines, standard operating procedures and forms are translated into some of the main local languages	

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