

Quality care as an enabling environment for protecting and empowering children and youth as human rights' defenders

Some examples and lessons learned from SOS Children's Villages experiences in providing quality alternative care as an enabling environment to protect and empower children and youth as human rights defenders.

The child's right to quality care

We believe that **every child has the right to quality care and continuous protection in a nurturing, empowering and positive care environment** whether or not he or she is living in their family of origin or in any form of alternative care.

When children and young people are separated from their parents, and also potentially from their siblings, they lose their primary source of protection, stability and support. Such stable family/care environments and the opportunity to develop positive relationship with, and secure attachments to, a committed caregiver are essential in ensuring a child's healthy development.

To end the negative, and often life-long consequences that poor quality care has on children, SOS Children's Villages calls on all stakeholders for the right of children deprived of parental care to grow-up in a caring environment. **Quality alternative care enables children and youth to develop their full potential, including the potential to be human rights defenders.** As part of their human rights actions, young people can also defend the right of all children to benefit from quality care and protection in a nurturing and empowering environment. Quality care is a precondition to enable children and youth to advocate for their own rights and become human rights defenders both within their immediate communities and outside of them.

When protecting and empowering children and youth that are in alternative care, we advocate for comprehensive child-care strategies as per the Guidelines for the Alternative Care of Children (A/RES/64/142). These guidelines support quality care in families, as well as the need to ensure both the necessity and suitability of alternative care provisions, which requires a range of good quality alternative care options to serve the best interests of every child.

Central to our programme and advocacy experience on guaranteeing the right to quality care has been a clear commitment to empowering young people with backgrounds living in alternative care; to be active partners, capacity-builders, consultants and researchers in the development and delivery of key messages regarding their rights in general, and the right to quality care in particular.

We consider quality of care as a basic foundation for young people to develop and to feel adequately empowered in the defence of their own rights. This paper is firmly grounded in that belief and further presents specific work on various projects in our work with children and young people.

We present below two activities in which SOS Children's Villages was engaged with direct participation of children and youth without parental care and empowered them to advocate for quality care. Through their engaged and active participation, we continue to deliver quality alternative care and reflect on our practice.



Empowering Care-Experienced Children and Youth: Peer Research participatory methodology

The need to ensure the child's right to quality of care in alternative care, from the outset and not only in terms of specific preparations for any transition out of care¹, is clear. This call for quality care is well summarised by one young person at a conference to mark the 7th anniversary of the Guidelines for the Alternative Care of Children in 2016.

"preparation for leaving care should begin from the very day we enter care"2

In empowering young care-experienced children and young people, SOS Children's Villages has - in partnership with a range of NGOs and academic actors - **delivered the Peer Research Methodology to develop key advocacy priorities for, and -more importantly- with, those young people as child rights defenders**.

This peer research methodology engages and develops the capacity of members of the subject group, in this case care experienced youth, in taking on the critical role of researcher. In the implementation phase of the project these "peer researchers", using the questionnaires/interview guides essentially designed by them, conducted one-to-one interviews, with other care-experienced youth.

The Peer Research methodology was implemented specifically **to facilitate and promote the rights of young people to express their views in a safe and educational environment**. It has further proven to be a vital opportunity for young people to directly inform to government and other social work services, who are accountable for ensuring the quality of care on their policy and practice.

In essence this participatory Peer Research can only be truly effective when it guarantees the **full participation of young people**, in strong partnerships with other civil-society and academic partners, at every stage in the project. This includes:

- Developing the aims and objectives of the study
- Designing the methodology e.g. recruiting research team, data collection & processing & analysis
- Creating the research tools, e.g. questionnaires, interview guides
- Ensuring quality training design and delivery of research
- Undertaking the research interviews/data collection
- Writing-up and disseminating the findings/recommendations

Peer research, particularly with a subject group of young people who may have experienced difficult upbringings in relation, inter alia, to neglect, abuse, violence or other trauma/loss, was found to address power relations. This could be explained by the fact that subjects are likely to be more comfortable with a similarly experienced young person rather than an adult when being interviewed. This was noted particularly by one peer researcher;

"When I was to conduct the first piece of research I was quite stressed, I was afraid that interviewees would not want to talk and wouldn't want to share their thoughts with me. But the more research I did, the less restraint I felt and the research itself turned into an

¹ Guidelines for the Alternative Care of Children (A/RES/64/142) – paras 130-135.

² Akmal, care-experienced youth from Uzbekistan, Momentum Conference 2016, CICG Geneva



interesting conversation. Interviewees were eagerly answering the questions I asked, as these questions dealt with their own life and experience"³

These "interesting conversations" demonstrated one key benefit of the peer research methodology in the sense that they were constructed through empathy founded on common experiences allowing greater depth and insight into the lived realities of alternative care-experienced young people.

There are a number of other key considerations, not least of all the guarantee of adequate funding to provide necessary trainings/workshops, travel, accommodation and the remuneration of peer researchers, in the lessons learned from effective Peer Research.

The process must be clear and young people must be fully informed as to what is expected of them as both peer researchers and interviewees. The selection process for peer researchers must ensure those selected have the confidence and ability to deliver the interviews but whom are also adequately informed and understand the commitment involved.

Thorough preparation of young people as peer researchers is vital particularly in the key components of research and interview techniques. During delivery of the interviews a key support person (research lead/social worker/care) also needs to be in place to supervise but also capable of addressing any stress on the peer researcher, or interviewees, in relation to the intensity, and potential emotional strain, of conducting the interviews.

Effective and strong partnerships are essential to assuring the successful delivery of peer research, as working in isolation undermines the research process and can negatively impact the quality of the support and training of young people. In this regard a commitment to genuine partnership with young people is a clear foundation but engagement with other NGOs, with academic partners to support the research but also with relevant government entities are also vital.

Engaging young people in this research methodology has been an exciting learning opportunity for all the stakeholders, the young people, SOS and other NGO staff, and the academic partners. Central to this has been a clear process, effective management of planning and timescales to design and structure interview schedules, piloting and conducting interviews, and for the review, analysis and reporting on outcomes.

In terms of taking the research outcomes forward with young people as defenders of their right to quality care the Peer Research methodology was further complemented through capacity-building with a 50+ strong international youth council representing 20 countries with specific advocacy activities/trainings including but not limited to:

- Team and "confidence" building sessions
- Public Speaking training
- Developing elevator speeches
- Stakeholder analysis
- "Mock" UNCRC session/trainings
- Brown Bag lunch at UNICEF New York

³ Peer Research: How to Make a Difference: National Care Advisory Service/SOS Children's Villages International 2012, p.7.



The various findings across different national contexts have further been used to inform and support advocacy by SOS member associations at the national level and for their inputs to the alternative reporting to the UN Committee on the Rights of the Child.

The focus of Peer Research was empowering children and young people as child rights defenders through national research projects and both national and international advocacy. In other on-going work, with the active involvement of care-experienced young people, trainings have been developed and delivered, to build the capacity of care workers to ensure that practice, and the preparation for leaving care as a young adult, is fully respectful of the child's right to quality care.

Quality Care Foundations: Workforce Development

The basic foundation in ensuring the quality of care, particularly in alternative care, is a well-trained and professional workforce. Care professionals require a range of personal skills and commitments in the first instance but equally require relevant training and the tools to deliver quality care.⁴ Suitably empowered and trained care-experienced young people can and must play a leading role in the development and delivery of capacity-building for professionals.

The "Prepare for Leaving Care: Training Manual" is a partnership project between SOS Children's Villages and the Centre for Excellence for Looked After Children (CELCIS) which has been produced with the support of the European Union. The manual presents a range of hints, a trainer programme, and twenty-seven course hand-outs to facilitate a six-day training course.

Care-experienced children and young people, across five country contexts, Croatia, Italy, Latvia, Lithuania and Spain, contributed their expertise and insights directly to course content. The manual itself reflects a key message from those young people with respect to their right to quality care. In essence, whilst definite support, **planning and consultation with young people are basic requirements to facilitate the transition out-of-care,** in reality, "leaving care should be the end result of a process that begins the first day a young person enters care"⁵. Underpinned by a commitment to quality of care from the outset any "young person should be equipped and supported to live life as an independent adult"⁶!

Whilst involved in the development of the training the involvement of care-experienced youth is also a key principle in the delivery of the training.

"one of the principles of the course is that at least one care-experienced person should be involved, and paid for, part of the delivery....it is important to bring to life the experience and children and young people in care"⁷

All trainers planning delivery of the course are clearly guided to ensure that they assess the support needs, past training experience, of any care-experienced young person engaged. Further guidance is provided to ensure full participation in the planning of their engagement in the course and to ensure a debriefing session to reflect on the experience, successes and potential improvements.

The manual also includes some "helpful hints" for trainers based on the direct experience of one young person who has been involved in the delivery of training.

⁴ Guidelines for the Alternative Care of Children (A/RES/64/142) – paras 112-115

⁵ Prepare for Leaving Care: Training Manual: SOS Children's Villages International & Centre for Excellence for Looked After Children (CELCIS), 2017, p.4

⁶ as above. p.4

⁷ as above, p.8



• Build the relationship with the care-experienced person both inside and outside of work

- o take time to get to know the young person
- o respect potential issues relating the young persons' experience
- o be there to support in a non-judgemental manner
- o create a safe and friendly environment

Include the ideas of the care-experienced person

- o make participation meaningful
- o truly consider improvements and suggestions

Trust

- o the young person to deliver
- o demonstrate that trust to participants as a course principle
- o builds our confidence to deliver
- o will helps us generate more, better, ideas.

• Honesty and Constructive Criticism

o listen to, but also challenge our ideas, constructively

Recognition of strengths and weaknesses of the care-experienced person

- o we are a diverse group, different interests, experiences, capabilities
- assess our strengths and weaknesses and make best use of our skills

Conclusion

Quality of alternative care is a right that serves as critical foundations for the full, empowering and positive development of all children deprived of parental care. Quality of care is characterised by safety, stability, and the necessary support for children and young people to grow into the young people they want to become. "Safety" in terms of freedom from, for example, violence, abuse or neglect. Ensuring the "Stability" of care to develop positive and supportive relationships and attachments to consistent responsible. These are necessary foundations to empower and support them as they become independent thinkers and prepare to interact and succeed in their immediate and broader community. Foundations which are also the basis for them to become themselves human rights defenders.

Quality alternative care enables children without parental care to become strong human rights defenders. In our programme work, we seek consistently to ensure the fullest possible development and empowerment of children without parental care as the two examples presented above show. As also exemplified above, we work in partnership with them directly to analyse and identify key issues supporting them as human rights defenders, advocating for nationally and internationally necessary improvements of laws, policies and practices - to ensure respect for their best interests and their right to quality care.

SOS Children's Villages International estimates that as many as one in ten children worldwide has lost, or is at risk of losing, the loving care of their parents. After 70 years of experience and practice on the field, SOS sees that these children are still the most left behind, the most invisible and the ones with the most neglected rights. In the absence of quality alternative care, these children will grow up disempowered, left behind and often discriminated against. We need to support them while also empowering them to become advocates of their own rights. To that end, we believe that quality care is a critical foundation for empowering children as human rights defenders on behalf of an often overlooked and marginalised population of children and young people.