



Ministry of Social Affairs,
Veterans and Youth Rehabilitation

CAPACITY
DEVELOPMENT
PLAN

FOR

FAMILY SUPPORT



ADOPTION



FOSTER CARE



IN CAMBODIA 2018 - 2023

“building on the momentum” of existing reforms

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FOREWORD

For an effective and efficient implementation of the alternative care for children, and to ensure the best interests of the children, the Ministry of Social Affairs, Veterans, and Youth Rehabilitation (MoSVY), the United Nations Children's Fund (UNICEF), and the United Agency for International Development (USAID) in Cambodia, have commissioned the Permanent Bureau of the Hague Conference on Private International Law, and the International Social Service to conduct an assessment study on the achievements and challenges of family support, foster care, and adoption, and to develop a capacity building plan to accelerate the child welfare reform in Cambodia.

The study has identified key findings and 23 useful recommendations for short-term implementation (up to 2018), medium-term implementation (up to 2023), and long-term implementation (after 2023). At the same time, the study proposed a development of standards on domestic adoption, a review of the policy on alternative care for children 2006, a review of the minimum standards on alternative care for children 2008, and a review of the Prakas on the implementation procedure of the policy on alternative care for children 2011, to ensure consistency with the guidelines on the alternative care for children, adopted by the United Nations General Assembly in 2010.

MoSVY will review the above recommendations, and make adjustments for subsequent implementations of the recommendations based on the practicality of the Ministry and partner organizations. I would like to request the Directorate of Technical Affairs, the Department of Child Welfare, the Inter-Country Adoption Administration, relevant departments, non-governmental organizations, and development partners to work together to ensure the best interests of the children.

I would like to deeply thank UNICEF and USAID in Cambodia for the existing and on-going support to child care in Cambodia. I also highly appreciate the efforts of the Permanent Bureau of the Hague Conference on Private International Law, and the International Social Service in conducting this research study. I also would like to give a compliment to the Child Welfare Department, Provincial Department of Social Affairs, Veterans, and Youth Rehabilitation, sub-national government administrations, partner organizations, and relevant institutions for their collaboration and for making this study a success.

Phnom Penh, 07 June 2018

Vong Sauth
Minister
Ministry of Social Affairs,
Veterans and Youth Rehabilitation

ABBREVIATIONS

AAB	Adoption Accredited Body
AHC	Angkor Hospital for Children
UN Guidelines	UN Guidelines for the Alternative Care of Children
CCWC	Commune Committee Women and Children
DoJ	Department of Justice (provincial level)
DoH	Department of Health (provincial level)
DoSVY	Department of Social Affairs, Veterans and Youth Rehabilitation (provincial level)
FAST	Families Are Stronger Together (Save the Children project)
FCF	Family Care First
HCCH	Hague Conference on Private International Law
ICAA	Intercountry Adoption Authority
ILO	International Labour Organization
IOM	International Organization for Migration
ISS	International Social Service
MoSVY	Ministry of Social Affairs, Veterans and Youth Rehabilitation
RCI	Residential Care Institution
PAPs	Prospective Adoptive Parents
UNCRC	United Nations Convention on the Rights of the Child
UNCRC Committee	United Nations Committee on the Rights of the Child
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development
3PC	Partnership Programme for the Protection of Children
1993 HC	1993 Hague Convention on Protection of Children and Co-operation in respect of Intercountry Adoption

PREFATORY NOTE

This independent assessment was commissioned by the Child Welfare Department and Intercountry Adoption Administration of the Ministry of Social Affairs, Veterans and Youth Rehabilitation (hereafter MoSVY) of Cambodia and facilitated by UNICEF. It was jointly carried out by the Permanent Bureau of the Hague Conference on Private International Law (HCCH)¹, represented by Laura Martinez-Mora and Odeta Inte and International Social Service (ISS)², represented by Mia Dambach and Maria Herczog.

The main aims of this assessment were, in summary, to:

- Identify achievements and challenges to family support, foster care and adoption frameworks;
- Provide recommendations that capitalise on the achievements, address challenges and prevent possible illicit practices;
- Propose a capacity development plan to build on the momentum of considerable reforms on the topic occurring within Cambodia; and
- Share promising practices from other countries as inspiration, where relevant.

In preparation for the mission to Cambodia, the team reviewed a wide range of documentation (see Annex 1) and participated in a number of conference calls with authorities and actors in Cambodia and abroad. During the mission to Cambodia from 28 August to 6 September 2016, the authors had discussions with over 80 actors in Phnom Penh and two provinces (Battambang and Siem Riep). Among others, they met with Cambodian governmental officials, civil society, foster parents, residential care institutions (RCIs), representatives of foreign governments and adoption agencies. Throughout the visits, UNICEF staff accompanied the team. The mission included a consultative workshop on 2 September with approximately 100 participants, including: government; judiciary; civil society; UN agencies; embassy representatives; donors and development partners. The mission's preliminary findings and recommendations were shared in technical small groups, which allowed for feedback on contextualisation and implementation feasibility.

The preliminary report following this mission was submitted to UNICEF and the MoSVY in December 2016 for comment. The draft report was formally presented and discussed at a validation seminar organised by the MoSVY in Phnom Penh on 21 March 2017. The final report took into consideration the suggestions and recommendations given during this consultation exercise.

1 The Hague Conference on Private International Law (HCCH) is an inter-governmental organization that works for the progressive unification of the rules of private international law. The HCCH adopted many Conventions on the field of child protection and family law among others. One of these Conventions is the 1993 Hague Convention on the Protection of Children and Co-operation in respect of Intercountry Adoption (1993 HC) which establishes minimum standards for the protection of children who are the subject of intercountry adoption and prevents the abduction, the sale of, or traffic in children. Laura Martinez-Mora is the Principal Legal Officer at HCCH in charge of the follow up of the 1993 HC. Odeta Inte is an International Consultant on Child Rights, Child Protection and Adoption.

2 International Social Service is an international NGO founded in 1924 is a network of 120 national entities and a General Secretariat that assist children and families confronted with complex social problems as a result of migration. ISS has consultative status with the United Nations Economic and Social Council (ECOSOC), as well as with UNICEF and other intergovernmental bodies. Mia Dambach is Director of the International Reference Centre for the Rights of Children Deprived of their Family (IRC), hosted by ISS and coordinates advocacy and policy development efforts. Maria Herczog is an International Consultant on Child Protection Policies and former member of the UNCRC Committee.

Primarily due to our specific mandate and our own resource constraints, as well the complex nature of alternative care provision in Cambodia, less attention was given to the recent growth in RCIs and the reasons thereof, including inter alia funding streams analysis (larger funding organisations, faith based and private donors)³ and pagoda care.⁴ Indeed a substantial amount of research has been dedicated to addressing these issues, as well as other alternative care and adoption matters in Cambodia (see Annex 1). In view of this impressive research, the team did not aspire to replicate such efforts nor did it wish to produce another lengthy report canvassing well-covered ground.

As mandated, this report focuses on practical recommendations structured as a capacity development plan. The report commences with “umbrella” recommendations applicable in general, followed by specific recommendations and concrete actions, to be completed in the [short term](#) (2018), [mid term](#) (2019-2023) and [long term](#) (2023 beyond). Each recommendation attempts to build on the momentum of existing legal, policy and practical frameworks (when compliant with international standards), as well as relevant lessons learnt from other countries. Concerning adoption, the recommendations are framed on the basis that responsibility for ensuring the proper operation of intercountry adoption cannot fall to Cambodia as the country of origin alone, but also requires the full and active commitment of receiving States, including their competent authorities and adoption accredited bodies. It follows that recommendations target both Cambodia and foreign governments and entities. We have also been specifically asked to propose concrete steps of how to possibly implement each recommendation, identifying leads and potential support in a table format. We trust that these suggestions will be viewed as tangible activities to consider should the overall recommendation be accepted, with final decisions being made by relevant Ministries and stakeholders. Our assessment is systematically grounded in pertinent international standards, in particular the UN Convention on the Rights of the Child (UNCRC), the UN Guidelines for the Alternative Care of Children (UN Guidelines) and the 1993 Hague Convention on Protection of Children and Co-operation in respect of Intercountry Adoption (1993 Hague Convention).

We openly acknowledge the limitations of our mission given that data was not often available; only three provinces were visited; not all relevant actors were engaged with; and not all information received could be crosschecked. Considerable efforts were made to ensure as many relevant actors were involved as was practicable, including verification of report content.

At this time Cambodia is in a unique position of having multiple actors in Government and civil society, internally and externally, aligned in their willingness to move forward in alternative care and adoption reform. There is a new desire for a common approach among all. We look forward to seizing this exceptional opportunity to continue improving the lives of children in Cambodia, and also to showcase the country's experience as inspiration for others in their reform work.

Laura Martínez-Mora, Odeta Inte, Maria Herczog and Mia Dambach

The HCCH participation in this project was possible thanks to the voluntary contributions of Australia, Norway and UNICEF to the HCCH Intercountry Adoption Technical Assistance Programme (ICATAP).

3 For example, see Study on Funding and Financial models of Residential Care Institutions in Cambodia (to be published in 2018) UNICEF and Emerging Markets Consulting – a research project that will document and analyse how RCIs operate and sustain themselves and the funding and financial models of the different types of RCIs in Cambodia.

4 A Study on alternative care community practices for children in Cambodia, including pagoda-based care is currently being carried out by Coram Legal Centre with the support of UNICEF (to be published in 2018). In addition to this study, a Child Protection Pagoda Programme including Training Manual and Operational Plan for the Ministry of Culture and Religion will be designed for 2018 by a selected consultant.

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Brief overview of child protection in Cambodia: findings and umbrella capacity development recommendations

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The following section provides a very brief overview of the Cambodian child welfare and protection system. We do not purport to cover each relevant law, policy or practice, let alone provide details that have been well covered by other and ongoing research (see Annex 1). We trust the information provides some context for the consequent capacity development recommendations proposed.



Child rights in general

Cambodia has an estimated population of 15 million inhabitants, from which 32% are less than 15 (data of 2014).⁵ The civil war as a result of the Khmer

Rouge regime in the seventies where at least 1.5 million Cambodians died from execution, forced hardships, or starvation and its aftermath markedly

⁵ Better care network demographic data: www.bettercarenetwork.org/regions-countries/asia/southeastern-asia/cambodia (Sources: World Bank, UNICEF, UNDP HDR 2015, DHS 2014).

affected the country. In addition according to the World Risk Report 2014,⁶ “Cambodia is the ninth most at risk country in the world to disasters, due to a significant exposure to natural hazards and the limited adaptive and coping capacities of its population and of national and local structures to prevent and mitigate their effects.” UNICEF has designated Cambodia as the third most land-mined country in the world, with the majority of victims being children herding animals or playing in the fields. According to the Global slavery index 2016, Cambodia ranked third with the highest estimated prevalence of modern slavery by proportion of population.⁷ Tourism in Cambodia continues to increase - from 700,000 visitors in 2003 to more than 4.5 million in 2014 - which provides employment opportunities, but increases the vulnerability of children to sex tourists.⁸ Likewise the phenomenon of orphanage tourism increases the risk of children being exploited at the hands of international visitors.

In the context of such adversity and need, Cambodia has nevertheless made notable progress. UNICEF’s 2015 annual report lists a vast number of improve-

ments noting that “several landmark studies produced in 2015 led to further policymaking. The Economic Burden of Violence Study, based on findings from the 2013 Violence Against Children Survey (VAC) was launched in December 2015 to better understand the impact of violence against children and estimate the economic burden of related health aspects. (...) An important study on the impacts of migration on children was also completed. Enrolment of children aged three to five in early childhood education steadily increased from 25.4 per cent in 2011 to 35.3 per cent in 2015, due to expansion of the number of pre-schools from 37 in three provinces to 75 in five provinces.”⁹ In 2015, 94% of all newborns were registered within the first 30 days of life in 11 UNICEF target districts, compared to 88% in 2014. Since 2011, more than 35,000 children have been connected with services to prevent and respond to violence, abuse, exploitation and unnecessary separation thanks to the Partnership Programme for Protection of Children (3PC).¹⁰ In 2015 alone, a total of 5,618 children, 2,225 youth and 3,379 families benefited from access to child protection services thanks to 3PC partners.

6 <https://ehs.unu.edu/news/news/world-risk-report-2014.html#files>.

7 Walk free foundation, www.globalslaveryindex.org/methodology/ and www.bettercarenetwork.org/sites/default/files/Global%20Slavery%20Index%202016.pdf.

8 Walk free foundation, www.globalslaveryindex.org/methodology/ and www.bettercarenetwork.org/sites/default/files/Global%20Slavery%20Index%202016.pdf.

9 www.unicef.org/about/annualreport/files/Cambodia_2015_COAR.pdf.

10 3PC is a tripartite partnership between MoSVY, UNICEF and Friends International (FI). FI coordinates an umbrella of nine additional civil society organizations (implementing partners) to provide child protection services at field level. They in turn liaise with 40 community-based organizations (network of partners) to provide services. There are also six technical partners who provide specialized services on a contractual basis.



Family support, prevention of separation and re-integration

In 2015, Government statistics noted that 5.8% of children under 18 had lost one or two parents. Moreover an estimated 19% of Cambodians lived below the poverty line in 2013. The relevant Prakas¹¹ clearly outlines the duties of government representatives to visit children or families at risk of separation, as well as the procedure for opening case files and responsibility for interventions. Nevertheless, it seems that adequate budget and

appropriate training to equip actors for doing this defined work should be significantly increased. Whilst disparate promising initiatives exist across the country to strengthen families, often limited human and financial resources hinder success/sustainability, let alone a nationwide approach (see Rec. No 1 - Co-operation, Rec. No 3 - Training and Rec. No 5 - Secondary prevention).



Alternative care responses

The precise number of children at risk of separation or of being deprived of family care in Cambodia is unknown. A database to detect, assess and document these risks does not exist (see Rec. No 2). Children from poor families in Cambodia are highly vulnerable, often facing daily threats to their health, education, safety and overall development. Every

day in Cambodia, children are exposed to abuse, violence, exploitation and neglect. These issues are often exacerbated by gender inequity, marginalization of urban and rural poor, and negative attitudes and discrimination towards ethnic minorities and people with disabilities.”¹²

¹¹ Ministry Of Social Affairs, Veterans And Youth Rehabilitation, Prakas On Procedures To Implement The Policy On Alternative Care For Children (October 2011), Art. 6.

¹² Child Protection, www.unicef.org/cambodia/2.Child_Protection.pdf; Beth L. Rubenstein, Lindsay Stark: A Forgotten Population: Estimating the Number of Children Outside of Households in Cambodia, Global Social Welfare, June 2016, Volume 3, Issue 2, pp 119–124, www.unicef.org/cambodia/MAPPING_REPORT_5_provinces_ENG.pdf.

An impressive array of legislation and policy is in place covering the above situation (see Annex 1). Yet the UNCRC Committee has expressed concern that, ‘there has been a 65 per cent increase in the number of children in orphanages in the State party between 2005 and 2008 and that residential care continues to be considered as the best option’. The Committee notes ‘one third of institutionalised children still have one of their parents; residential care facilities remain inappropriately registered and monitored; and insufficient budgetary allocations and the lack of well-trained child-care workers hinder the effective implementation of the State party’s policies and guidelines’.

Moreover, verifying compliance with Cambodian Minimum Standards of Alternative Care for Children has proved challenging due to a recent proliferation of RCIs and the fact that not all have a Memorandum of Understanding with the MoSVY.¹³ Multiple facilities continue to operate without the necessary approval. To better understand the breadth of RCIs, MoSVY, with support from UNICEF and 3PC and USAID, conducted mapping of residential care facilities in two rounds: first, in five priority provinces between November 2014 and February 2015, followed by the remaining provinces from October to December 2015. The preliminary report on the five provinces was released in March 2016. In February 2017, the national mapping report will also be disseminated. The mapping found that there are 639 residential care facilities operating in Cambodia. Based on self-reported data from

institution staff, these facilities can be categorized into five types: residential care institutions (406), transit homes and temporary emergency accommodation (25), group homes (71), pagodas and other faith-based care in religious buildings (65) and boarding schools (72). The total of children living in all the 639 facilities is 26,187 (48 per cent female). An additional 9,187 young people between the ages of 18 and 24 (36 per cent female) were reported to be living in the 639 facilities. A total of 16,579 children (47 per cent female) were reported to be living in the 406 residential care institutions. Based on 2015 population figures, this means that nearly 1 in every 350 Cambodian children lives in a residential care institution. In response MoSVY has agreed on an aspiring target to reintegrate 30 % of the children in residential care in five priority provinces by 2018.

Most recently on 5 December, 2015, Cambodia adopted the Sub Decree on the Management of Residential Care, giving MoSVY supervision and licensing responsibility for the institutions. It specifies that, “the permission for children to reside in a residential care is the last and temporary option and it may be possible only after the search for parents, relatives or guardian or foster parent has been exhausted”. It also includes a technical department to identify residential care centres, conduct inspections, manage the process of authorisation of residential care facilities and establish follow up and support for families after reunification.

¹³ Until recently there was no clear mandate of MoSVY to oversee all residential care facilities. The situation has changed with the adoption of the Sub-decree on the management of residential care centers in September 2015 which mandates MoSVY to oversee all types of residential care centers and clarifies that all facilities have to be authorized by MoSVY. The process of authorization of all facilities has started but it is still not completed.



Adoption

In the past domestic adoption has not been very popular in Cambodia. Reasons reported by different actors, were that the procedures are not well known, “informal costs”, and that people prefer to follow informal procedure by simply keeping the child without seeking formalisation. In October 2016, the Ministry of Justice launched an Explanatory Note on domestic adoption to provide more clarity on domestic adoption in Cambodia. The Explanatory Note compiles existing legal provisions from the Civil Code and Law on Non-Litigations Civil Cases Procedure. It aims to explain the process and provide guidance to those involved in the process of domestic adoption, especially judges, prosecutors, lawyers, social workers and other competent authorities, with regard to principles, requirements, proceedings, and effects of domestic adoption as well as respecting the child’s best interests.

Intercountry adoption had started in Cambodia by the mid-80s’. In 1999-2000, the number of overseas child adoptions increased exponentially. A moratorium was implemented between 2001-2003 by Belgium, Canada, the United States, Finland, France, Luxembourg, the Netherlands and Switzerland - which is still in place. In response, the Government of Cambodia started working on a draft adoption law in 2002, which was finally adopted at the end 2009. Multiple sub-decrees have likewise been developed (see 0). In 2007 Cambodia acceded to the 1993 Hague Convention. Since 2011, Cambodia has been working on the future implementation of a new intercountry adoption system based on the 1993 HC and the UNCRC. At this stage, there is a

de facto moratorium in place, although the Central Adoption Authority has been working on identifying approximately 36 children with special needs who could be considered adoptable. It appears that most of these children are older than 10, with a number over 15, which could create challenges for identifying prospective adoptive parents that, have the capacity to adequately care for this group of children. Bilateral agreements have been signed with Italy, Cataluña (Spain) and Malta but new cases of intercountry adoptions have not taken place yet.

Moreover, it would seem that some foreigners who are not habitually resident in Cambodia seek to domestically adopt children that have been under their care, and subsequently ask their respective receiving State to recognise such adoption. This was an issue for the UNCRC Committee, that recommend that Cambodia ensures, “that all cases of adoption are in full conformity with the Optional Protocol and with the principles and provisions of the Hague Convention on Protection of Children and Cooperation in Respect of Intercountry Adoption, by developing and implementing a programme to prevent illegal adoptions and by regulating the licensing and monitoring of agencies, as well as the fees they charge for their various services.”¹⁴ The inter-country adoption law has been endorsed in December 2009. To effectively implement this law, Cambodia continued to collaborate with UNICEF and the Permanent Office of Hague to develop provision, regulatory frameworks and procedures to train the relevant partners, NGO staff and intercountry adoption agencies.

¹⁴ Concluding observations on the report submitted by Cambodia under Art. 12, para. 1, of the Optional Protocol to the UNCRC on the sale of children, child prostitution and child pornography (February 2015), para. 17 d).

Rec. No

1

Clearly identify responsibilities, promote enhanced co-operation and ensure adequate budget

ST

Agreement about actions and ensuing responsibilities

MT

Enhanced co-operation between function bearers

LT

Undertake research to facilitate advocacy for political will to ensure an adequate budget

MoSVY is in principle the leading ministry responsible for child protection, including alternative care and intercountry adoption, with representation at the provincial level (DoSVY) and Office of District of Social Affairs Veterans and Youth Rehabilitation (OSVY). In parallel a number of other Ministries are involved in child protection matters.¹⁵ For example, the Ministry of Interior is responsible for issues such as birth registration and was in the past responsible for registration of local NGOs.¹⁶ The Ministry of Cult and Religion is responsible for the oversight of pagoda based care as well as churches that often “informally” care for children and the Ministry of Justice (MoJ) is charged with the legal process of national adoption.¹⁷ Both the Ministry of Health and MoSVY are responsible for children with disabilities. Like the MoSVY, each of these Ministries has representation at sub-national levels. At the Commune level, Commune Councils for Women and Children (CCWC) are appointed bodies responsible for, inter alia, monitoring and providing services to children and families at risk, although it seems, are rarely adequately equipped to carry out these functions.

15 See article 6 Prakas On Procedures To Implement The Policy On Alternative Care For Children (October 2011).

16 Before the adoption of the Sub-decree on management of residential care centers there was no requirement to register a residential care institution under a specific ministry. Therefore, national NGOs running an RCI have been just registering the NGO with the Ministry of Interior and International NGOs have been registering with the Ministry of Foreign Affairs.

17 Within MoSVY, national adoption is under the mandate of the Department of Child Welfare.

In some areas, civil society has taken responsibility to provide services for families and children living in vulnerable situations. This work can occur within partnerships as well as in an isolated manner. For example the Partnership Programme for the Protection of Children (3PC) was created in 2011 by Friends International in collaboration with UNICEF and MoSVY. Since 2015, 3PC has brought together 12 NGOs and 41 community based organisations to provide child protection services to the most vulnerable children each year.¹⁸ Likewise Family Care First (FCF) brings together a consortium of 55 implementing partners. Established in September 2015, FCF seeks to align stakeholders from different sectors “to solve a specific social problem by using a common agenda, aligning activities, and defining and using common measure of success.”¹⁹ The Global Alliance for Children is establishing a coordination and information hub, facilitating communication. Save the Children oversees activities performed by multiple implementers through the Families Are Stronger Together (FAST) initiative and four thematic sub groups: 1) government system strengthening; 2) direct response to children and families through improved social service workforce; 3) prevention of unnecessary family-child separation; and 4) transformation of the institution-focused care model.

In other cases traditional pagoda based care is also offered to families living in poverty. In addition, faith based organisations are also providing care to children and their families.

Given the plethora of actors in child protection as well as multiple laws and policy frameworks, agreement is often lacking as to actions and responsibilities. For example, we systematically heard of the need for strengthened internal Ministerial co-ordination, given actual and perceived delimitations of responsibility. Therefore, Cambodian authorities should in the **short term** develop a checklist/flow chart for alternative care and adoption related actions with ensuing functions.²⁰ This could be achieved through an organigram outlining the authorities or bodies permitted by Cambodian legislation.²¹ It seems that a body such as the National Child Protection Commission (Commission) set up in 2015, which operates within the Cambodian National Council for Children (responsible for coordinating government bodies with respect to children rights), could be well positioned to facilitate responsibility identification.²²

Likewise systematic and targeted efforts to enhance co-operation between function bearers should be implemented in the short term – starting with

18 2009-2012 DCOF-UNICEF assessment of “strengthening Systems to protect vulnerable children and families in Cambodia” www.socialserviceworkforce.org/system/files/resource/files/DCOF%20UNICEF%20Assessment%20of%20Strengthening%20Systems%20to%20Protect%20Vulnerable%20Children%20and%20Families%20in%20Cambodia.pdf.

19 <http://familycarefirst.com/>

20 This could potentially be covered by the CORAM’s Theory of Change work

21 See Guide to Good Practice No 1: The Implementation and Operation of the 1993 Hague Intercountry Adoption Convention, Family Law (Jordan Publishing Ltd), 2008 (hereinafter, “Guide to Good Practice No 1”), Annex 6 – whilst applicable to adoption, a similar guide could be developed for alternative care. Note that the US Central Adoption Authority has already mapped procedures and responsible authorities, which may be helpful.

22 See www.cncc.gov.kh. This Commission may need to function in a similar way as the 13 Government ministries who formed a national steering committee to address violence against children during 2015.

existing initiatives. The Commission working closely with MoSVY could encourage co-operation with the help of civil society, such as Global Alliance for Children/FCF, who have been tasked to set up a coordination and information hub. Multiple opportunities exist to leverage existing resources and centralise efforts, building on promising work occurring in Cambodia (see Rec. No 2 - Database, Rec. No 3 - Consolidation of internal training; see Rec. No 4 - National hotline, Rec. No 11- Creating a pool of foster cares etc.). Cooperation can also be encouraged through regular cross-sectorial training (see Rec. No 3 - Training). As a start the information hub could centralise the preceding information in one database.

In the **mid term**, efforts to build co-operation must continue, including strategically including Pagoda based and faith based groups providing care in conversations to promote co-operation and better care provision. Opportunities to build bridges with these groups, often acting independently, can be facilitated by other faith based groups already actively engaged in alternative care reforms. It seems that Children in Families (CIF), an ACCIR partner organisation established in Cambodia in 2005 and formally licensed and recognised as Cambodia's first family-based alternative care provider in 2006, would be in an ideal position to open conversations. The information collected could be included on a centralised website in terms of key services providers.²³

Once the tasks and responsibilities are clearly defined and co-operation is optimised, adequate budget allocation is necessary to ensure quality service provision of a sustainable nature. At this stage, it is key that there is political commitment to understanding the long term social and economic value of investing in children. We would encourage the Government to work closely with the Childnomics initiative or similar work, which helps “determine the **long-term** social and economic return of investing in children. The tool will include an economic model informed by the costs of different services and approaches to supporting children and families in vulnerable situations. By using existing longitudinal data it will explore expected outcomes for children, families and society”.²⁴ Budget should be allocated for State support of families and the development of a national welfare program, similar to other countries.²⁵ Likewise, a budget should be set for implementing both the national 30% reintegration target and the 2015 Sub-decree on the Management of Residential Care Institutions, which states that ‘permission for children to reside in the residential care centre is the last and temporary option and it may be made possible only after the search for parents or parent, relative or guardian or foster parent has been exhausted’.²⁶

23 See <http://www.community.nsw.gov.au/for-agencies-that-work-with-us/child-protection-services>

24 www.eurochild.org/projects/childnomics/. The tool looks “at long-term societal costs linked to insufficient investment and misdirected funding of outdated care systems, which disenfranchise and further marginalise vulnerable children and families. (...) It will provide a means of engaging in dialogue with Ministries of Finance and those responsible for managing public spending across different sectors. It can also be used to influence private donors and charities which sustain systems that are not compliant with international human rights standards.”

25 The link between child protection and good governance, www.terredeshommes.org/wp-content/uploads/2013/06/20130315_the_links_between_child_protection_and_good_governance.pdf at 10-14; Taking child protection to the next level in Kenya www.unicef.org/protection/files/Kenya_CP_system_case_study.pdf, Building a national child protection system in Ghana: From evidence to policy and practice at 15-19, www.unicef.org/protection/files/Ghana_CP_system_case_study.pdf.

26 Article 11, Sub-Decree on the Management of Residential Care Centres (2015).

Rec. No

1

Clearly identify responsibilities, promote enhanced co-operation and ensure adequate budget

SHORT TERM (2018)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Agreement about actions	<ol style="list-style-type: none"> 1 Develop a checklist/flow chart of alternative care and adoption related actions with ensuing functions according to national frameworks. 2 Develop an organigram outlining the authorities or bodies permitted by Cambodian legislation. 	National Child Protection Commission (Commission) and all relevant Ministries jointly led by MoSVY and MoJ	UNICEF, 3PC, FCF. ISS if mandated could assist in the drafting of checklist/ flowchart/ organigramme. Alternatively CORAM could cover this through Theory of Change work	2018
Enhanced co-operation between function bearers	<ol style="list-style-type: none"> 1 Hold regular cross-sectorial training on alternative care and adoption among all stakeholders using same curriculum (e.g.: Development of Joint Ministerial Note and training on its implementation). 	National Child Protection Commission (Commission) and all relevant Ministries	UNICEF, Global Alliance for Children, Royal University of Phnom Penh and the National Institute of Social Affairs	2018 ongoing
Agreement about responsibilities	<ol style="list-style-type: none"> 1 Commission to organise roundtables among relevant Ministries to reach agreement. 2 Commission to set up steering group to finalise "agreement". 3 Joint Ministerial Note to be drafted outlining responsibilities and functions. 	Commission and all relevant Ministries led by MoSVY	UNICEF, 3PC, FCF	2018

MEDIUM TERM (2019 - 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Continued enhanced co-operation between function bearers and with faith based organisations	<ol style="list-style-type: none"> 1 Finalisation of information hub with census information readily accessible for all actors – through perhaps a dedicated website. 2 Strategic efforts to include Pagoda based and faith based groups providing care must actively sought 	Led by MoSVY working with National Child Protection Commission (Commission) and all relevant Ministries	UNICEF, Global Alliance for Children, Royal University of Phnom Penh and the National Institute of Social Affairs. CIF/ ACCIR could help engage with faith based groups.	2019 ongoing

LONG TERM (Beyond 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Undertake research to facilitate advocacy for political will to ensure an adequate budget	<ol style="list-style-type: none"> 1 Undertake research to determine the long-term social and economic return of investing in children (2020-2022). 2 Finalise research in 2023. 3 Based on research advocate Ministry of Finance for adequate budget. 	MoSVY	UNICEF, 3PC, FCF, Childonomics	2023 ongoing
Budget allocation	<ol style="list-style-type: none"> 1 Examine other State welfare systems to understand what could be feasible for Cambodia. 2 Ensure State support of families through a national welfare program 	All relevant Ministries	UNICEF	2023 ongoing

Rec. No

2

Create a comprehensive coordinated nationwide database of children who are at risk of separation (i.e. where interventions have started) and of children in care (i.e. from entry to exiting the system)

ST

Make an inventory of existing registers and identify existing good practices in administering a register

MT

Search for funding to create a nationwide database and test it in one or several regions

LT

Implement the database nationwide

A comprehensive electronic database will help to properly identify and monitor all children who enter into care. A database is a key tool for case management and for ensuring that all children have permanency planning and benefit from the best care option. A database will also help professionals such as policy makers, advocates, researchers and service providers develop a child protection system that adequately meets the needs of children. Likewise when data is appropriately anonymised, it can be extracted for policy and planning.

Cambodian legislation provides for several registers at different levels of child care (e.g., documentation of all family preservation and reunification efforts prior to commencement of permanency planning;²⁷ register of abandoned children;²⁸ individual case file for each child maintained by residential care facilities and alternative care providers in the community;²⁹ register of children whose parental power holder(s) have placed the child under the care of MoSVY;³⁰ register of adoptable children for intercountry adoption).³¹ Therefore, there is already a legal base that could be very useful in creating a comprehensive nationwide database. The challenge now is to create a database that will interconnect all existing registers, both at the national and provincial level, and incorporate any new register that needs to be created (e.g. register on adoptable children in need of domestic adoption – See Rec. No 20). Any centralised coordinated database should be built on the commune administrative data collection system (i.e. commune database).

27 2011 Prakas on procedures to implement the policy on alternative care for children, Art. 24.

28 Law on Intercountry Adoption, Art. 11.

29 2006 Prakas on minimum standards on residential care for children, Art. 8, and 2008 Prakas on minimum standards on alternative care for children in the community, Art. 9.

30 Law on Intercountry Adoption, Art. 12.

31 Law on Intercountry Adoption, Art. 13.

For the **short term**, the first task will be to make an inventory of all existing registers - provincial and national - and identify the authorities in charge of each register. In addition to Government databases, we are aware that civil society actors have introduced registers. These include, for example, World Vision's management information system, 3PC's database that records cases received through its hotline, and FCF's plan to develop a multi-agency management information system. This inventory will help identify whether there are certain child protection measures that are poorly reported and poorly interconnected;³² if there is a need for further registers; if certain regions face greater implementation challenges; and if there is an element of user illiteracy hampering the use of registers. All the challenges should be noted down.

The inventory will provide the opportunity to identify those registers which function properly and could serve as a model. Additionally, it will provide an opportunity to ascertain if standardized forms are being used, if they are understandable to the general public, and if there is a need to improve existing forms or create new ones. This will complement the work to streamline existing forms.

The experts undertaking the inventory should draft a report which includes recommendations on the resources needed in terms of equipment, development of forms, coordination of existing registers and creation of the common database, and training of the persons administering the registers. The

report could provide recommendations based on databases existing in other countries.³³ This recommendation should be considered in relation to CPIMs supported by FCF and potentially the use of PRIMERO,³⁴ which is an open source software program, as it is likely to be vastly cheaper than anything proprietary.

In the **mid term**, Cambodian authorities will need to seek funding to implement the recommendations regarding the database. A number of Central Adoption Authorities from receiving States have indicated an interest in possibly pooling resources to aid in establishing this national database. Once the necessary funding is secured, the common database should be created. The next step will be to provide the necessary training to professionals administering the database. The team recommends testing how the register and database work are interconnected through a pilot project in one or two regions. This will provide an opportunity to assess what needs to be modified, and make any necessary adjustments.

In the **long term**, the objective will be to progressively implement the database in other regions and finally nationwide. The file of the child should remain in the database as long as needed, which includes entry into alternative care (e.g., initial interventions and emergency foster care) until intercountry adoption. It is also important to have appropriate access control of the data.

32 For example, ensuring that all existing registers related to child protection measures and adoption are interconnected will help to optimise the work carried out by the NGOs that provide services in the area of family reunification and alternative care in Cambodia. Currently there are no clear channels for sharing information about the child between the NGOs and the authorities. The register will be key for sharing the information that each NGO has.

33 For example, see India an integrated child protection scheme (ICPS) A Centrally Sponsored Scheme of Government-Civil Society Partnership www.cara.nic.in/writereaddata/uploadedfile/NTESCL_635761170436561995_final_icps.pdf. Also, in Lithuania each municipality has its own local register, which includes, for example, the social services and financial support from which each family benefits, and how the allocations were used. The municipalities have to provide this information to the central database. The Ministry of Social Security and Labour is in charge of the central database and manages and controls the proper recording of data. See www.spis.lt. In Scotland, all local authorities are responsible for maintaining a central register-including unborn children-who are the subject of an inter-agency Child Protection Plan (see www.gov.scot/Resource/0045/00450733.pdf). Other examples in Australia www.dhs.vic.gov.au/about-the-department/plans,-programs-and-projects/programs/children,-youth-and-family-services/looking-after-children-in-victoria-lac/lac-references-and-reports/looking-after-children-assessment-and-records-redevelopment and in UK www.gov.uk/government/uploads/system/uploads/attachment_data/file/419595/Working_Together_to_Safeguard_Children.pdf.

34 <http://www.primero.org/>

Rec. No

2

Create a comprehensive nationwide database of children who are at risk of separation (i.e. where interventions have started) and of children in care (i.e. from entry to exiting the system)

SHORT TERM (2018)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Inventory of existing databases	<ol style="list-style-type: none"> 1 Inventory of existing government databases (national and subnational levels) and responsible authorities. 2 Inventory of existing CSO databases. 	MoSVY	UNICEF, 3PC, FCF	2018
Matrix of existing databases	<ol style="list-style-type: none"> 1 Establish a matrix of all databases. 2 Strengths/ gaps in database coverage/ functions and user-friendly nature. 3 Draft report on resources needed (equipment, forms, coordination of existing registers etc.). 4 Roundtable to agree on creation of common database (data entry, access, privacy etc.). 	MoSVY with all relevant Ministries	UNICEF, 3PC, FCF	2018

MEDIUM TERM (2019 - 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Identify budget	<ol style="list-style-type: none"> 1 Identify which Central Adoption Authorities would be willing to pool resources through HCCH and ISS to set up database. 2 Pool resources into an independent fund managed by perhaps UNICEF. 3 Once resources are identified set up a common database with technical assistance if necessary. 	MoSVY and Ministry of Finance	UNICEF, 3PC, FCF, HCCH and ISS	2019 ongoing
Pilot common database	<ol style="list-style-type: none"> 1 Pilot database in one or two regions. 2 Fine tune database. 3 Train on database use. 	MoSVY	UNICEF, 3PC, FCF	2019 ongoing

LONG TERM (Beyond 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Rollout of database	<div><div>1</div><div>Budget for ongoing database operation. Note with PRIMERO,³⁵ this could be fairly small.</div></div> <div><div>2</div><div>Progressively rollout database into other regions.</div></div> <div><div>3</div><div>Regional training.</div></div> <div><div>4</div><div>Independent evaluation of nationwide database.</div></div> <div><div>5</div><div>Fine tune database.</div></div>	MoSVY	UNICEF, 3PC, FCF	2023 ongoing

I 35 <http://www.primero.org/>

Rec. No

3

Build up social workforce and comprehensive training of all professionals

ST

Centralisation and standardisation of existing training (governmental and non-governmental)

MT

Draft an Implementation and Monitoring Handbook of relevant Prakas and national policies
Create a mobile team “child friendly justice”
Translate the Massive Open Online Course on Alternative Care into Khmer

LT

Development of vocational training for social workers

A common need was identified for skilled social workers, social assistants and child psychologists, requiring a [long term](#) holistic approach to developing a complete workforce. This would necessitate comprehensive training for existing professionals, specifically social workers. All stakeholders noted this as a priority action. Any eventual training must build on UNICEF’s work to equip 30 social workers employed by government and other training resources developed by other partners. Key technical partners should include the Royal University of Phnom Penh and the National Institute of Social Affairs of MoSVY, who recently ran an undergraduate course in social work. Such efforts could be complemented by FCF’s work to develop minimum standards for social workers, social media initiatives to promote the profession, and training needs assessment of social workers with Hagar and First Step Cambodia.

Whilst separate training has occurred, a more systematic approach has been lacking. Such an approach is crucial given the involvement of a large number of stakeholders (see Rec. No 1) combined with high staff turnover and consequent loss of institutional knowledge. It is also key that important Ministries such as the MoJ, the Ministry of Interior, the Ministry of Health, and the Ministry of Cults and Religions (including their sub-national counterparts such as CCWC and village chiefs) benefit from training on alternative care and adoption issues.

In the [short term](#), we recommend the centralisation of existing training – governmental and non-governmental – to develop standardised model training. Individually service providers have a myriad of internal training manuals that could be drawn upon including, inter alia, modules on equipping parents in their caregiving role (e.g.,

Children in Families, Komar Rikrey, M'LopTapang) as well as keeping families together (e.g., Cambodian Children's Trust, Friends International and Operations Enfant du Cambodge). Inspiration can be drawn from international training tools such as Moving Forward;³⁶ ISS thematic factsheets; Guide to Good Practice No 1: The Implementation and Operation of the 1993 Intercountry Adoption Convention and Guide to Good Practice No 2: Accreditation and Adoption Accredited Bodies.

A training tool in the form of a Cambodian Implementation and Monitoring Handbook,³⁷ focusing on relevant legislation and national policies, could be developed in the **short term**. Such a handbook could act as a procedural manual for all professionals and para-professionals involved in child protection work. The development of such a manual would involve coordination among Ministries, CSOs and regions, generating ownership/commitment to enforce such authorisation rules. One content example would be the use of the MoSVY intake forms (both existing and streamlined versions) for determining what information should be collected, when and by whom. Another content example could be dossier preparation for each child³⁸ including psycho-social, legal and medical assessments as well as promotion of life story books where inspiration can be gleaned from ISS models.³⁹ Additional content examples could focus on prevention work, family re-integration, foster care and adoption (see the Procedural Manual for dealing with intercountry adoption files developed in July 2011 by ICAA and a HCCH consultant), etc.

In addition to the Cambodian specific training, it may be worth considering whether international organisations such as Global Alliance for Children, the Global Social Service Workforce Alliance, or UNICEF could translate the Massive Open Online Course (MOOC) on Alternative Care into Khmer.⁴⁰ This would have the advantage of providing free access to thousands of professionals to international training delivered by leading experts.

As a **mid term** activity, we recommend the introduction of a mobile team of trainers to deliver the "standardised" teaching of the Cambodian Implementation and monitoring handbook. This would include DoSVY, regional Ministerial counterparts, as well as front-line workers delivering services together with faith based groups. 3PC and FCF partners, would be perfectly positioned to provide guidance as to which groups should be targeted. This project idea was developed by ISS Bulgaria⁴¹ where Roadshow seminars were introduced for judges and social workers targeting more than 850 professionals (250 judges) nationwide. During the procedural training, information, knowledge and experience were collected including data (see Rec. No 2 - Database). One aim was to ensure effective participation of children in judicial proceedings, which resulted in the child friendly justice standards, setting the framework for professional minimum standards of what is feasible in practice (e.g., who can respond, what kind of support can be offered).

In the **long term**, we strongly recommend introducing vocational training to encourage higher numbers of professionals, particularly para-social workers, entering the system without extensive training and experience, as a support to the social worker workforce.⁴² The para-professional social work Guidelines could help provide a framework.⁴³ Such training has been successfully introduced in many countries from Central Eastern Europe, Latin America, North America and UK with adaptable practices (see Rec. No 10 - Foster care). One example is the Signs of Safety⁴⁴ approach that Cambodian Children's Trust is piloting through FCF, hoping to train at least 35 para social workers (such as teachers), which could be up-scaled if successful. In the long run, programs could be developed in a way for para-professionals to eventually become professionals, such as by getting credits for experience plus some additional training, which would imply higher salaries.

36 Cantwell, N.; Davidson, J.; Elsley, S.; Milligan, I.; Quinn, N. (2012). Moving Forward: Implementing the 'Guidelines for the Alternative Care of Children'. UK: CELCIS www.alternativecareguidelines.org.

37 Cantwell, N.; Davidson, J.; Elsley, S.; Milligan, I.; Quinn, N. (2012). Moving Forward: Implementing the 'Guidelines for the Alternative Care of Children'. UK: CELCIS www.alternativecareguidelines.org.

38 ISS Manual <http://www.iss-ssi.org/images/practices/ISS-ManualEnglish.pdf>

39 ISS Life story book www.iss-ssi.org/index.php/en/what-we-do-en/cwd-en.

40 CELCIS has been commissioned by an inter-agency steering group comprised of BCN, FICE, Hope and Homes for Children, IFSW, RELAF, Save the Children led by International Social Service and SOS Children's Villages, to develop a MOOC - a six week training course to assist people implementing the UN Guidelines that was launched in 2017.

41 More information in English can be found in the "Child-friendly justice, Standards for children in civil law matters" book available at: <http://iss-bg.org/bg/publikatsii/>.

42 www.devex.com/news/why-countries-need-better-social-protection-programs-rich-or-not-88543.

43 <http://www.socialserviceworkforce.org/resources/para-professionals-social-service-workforce-guiding-principles-functions-and-competencies>

44 www.signsofsafety.net/signs-of-safety-2.

Build up social workforce and comprehensive training of all professionals

SHORT TERM (2018)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Inventory of all existing training	<ol style="list-style-type: none"> 1 Inventory of existing government training. 2 Inventory of existing CSO training. 	MoSVY	UNICEF, 3PC, FCF	2018
Matrix of existing training	<ol style="list-style-type: none"> 1 Establish a matrix of all training. 2 Roundtable to agree on promising training and gaps in training. 	MoSVY with all relevant Ministries	UNICEF, 3PC, FCF	2018
Develop a comprehensive implementation handbook as a training manual	<ol style="list-style-type: none"> 1 Develop an implementation manual of existing Cambodian standards using relevant examples from matrix and international promising practices. 2 Disseminate first draft among national and international experts. 3 Finalise manual with small group of experts (Cambodia and external). 4 Deliver training to government including MoSVY, MoJ, MoH etc. and civil society actors. 	MoSVY, Royal University of Phnom Penh and the National Institute of Social Affairs	UNICEF, 3PC, FCF, HCCH and ISS	2018 ongoing
MOOC on Alternative Care	<ol style="list-style-type: none"> 1 Examine possibility of translation into Khmer. 2 Encourage participation of MOOC by all actors including government and civil society actor. 	MoSVY	UNICEF, Global Social Service Workforce Alliance	2018

MEDIUM TERM (2019 - 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Mobile team of trainers (targeting service providers)	<div><div>1</div>Equip and identify handbook “trainers”.</div> <div><div>2</div>Deliver training to regions starting with the nine provinces with higher number of children in RCI based on National mapping report and/or provinces with highest population of “poor ID”.</div>	MoSVY	UNICEF, 3PC, FCF	2019 ongoing

LONG TERM (Beyond 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Set up vocational training for the social service workforce	<div><div>1</div>Develop curricula with external technical assistance.</div> <div><div>2</div>Identify existing service providers (e.g.: community nurses, youth workers) to apply curricula.</div> <div><div>3</div>Pilot test curricula in one/two regions.</div> <div><div>4</div>Fine tune curricula.</div> <div><div>5</div>Roll out curricula.</div> <div><div>6</div>Independent evaluation of curricula.</div>	MoSVY, Royal University of Phnom Penh and the National Institute of Social Affairs	UNICEF, 3PC, FCF	2023 ongoing

02

Family support: findings & capacity development recommendations



Rec. No

4

Encourage and support parents to care for their children so that families can remain together (i.e. primary prevention measures)

ST

Establish a national hotline that centralises different services for all families, children, professionals and paraprofessionals (streamline and pool resources)
Build capacity of WCCC and CCWC as frontline service providers

MT

Mobile team to provide link to basic services (focus on areas with poor identity, homeless, violence and limited services)

LT

Universal birth registration activities
Develop a smart phone application with all different services available to families

Preventing the need for alternative care must be a priority in any country, given universal acceptance that the “family, as the fundamental group of society and the natural environment for the growth and well-being of all its members and particularly children, should be afforded the necessary protection and assistance so that it can fully assume its responsibilities within the community.”⁴⁵ This view is central where traditionally strong family ties exist and the widespread belief ‘it takes a village to raise a child’, provide a natural safety net against separation in Cambodia. It is necessary to have extensive access to basic services to support all parents (biological, foster or adoptive) in their caregiving role, as is being currently explored within UNICEF’s positive parenting strategy.

Responding to UNCRC Committee recommendations⁴⁶ and building on existing efforts to improve access to services, we noted that the great majority of child protection service providers had their own region specific “hotline” for referrals. Often these numbers provided information about similar services, creating at times confusion among potential users as to which number to use. Noting the value of such hotlines, we recommend the implementation of a national hotline to consolidate information and resources in the [short term](#). Dissemination activities would be required to ensure widespread familiarity such as the ABC hotline, implying the building of a database of services linked to individual services/ numbers as well as staff training and their supervision (see Rec. No 2 - Database and Rec. No 3 - Training). Given the unique position WCCC and CCWC have in each commune and breadth of representation, they would be essential actors in dissemination activities and database development – on the proviso they are equipped and their capacity developed (see Rec. No 5).

45 Preamble to the UNCRC, www.ohchr.org/en/professionalinterest/pages/crc.aspx.

46 In 2011, the UNCRC Committee “recommends that the State party in cooperation with national and international organizations strengthen the existing counselling services for parents, further develop family education and awareness through, for example, training for parents on early childhood care, parental guidance and joint parental responsibilities, in light of article 18 of the Convention. The Committee also recommends that the State party build up a child-protection system to follow up on families that need supportive measures in order to give proper care and attention to their children”.

To support access to services for families in greatest need in the **mid term** (e.g., those with the poor identity card, homeless,⁴⁷ violence⁴⁸ and unreached populations), a mobile team of service providers by province could be established. The mobile team could be composed of professionals specialising in education, health, legal and social work – ideally civil servants. The aim would be to link families to local health clinics, education providers and other existing services, as well as identify which services are still needed (see Rec. No 5 - Service mapping). It seems this service has been effectively introduced in Phnom Penh, via a night bus targeting those at risk of sexual exploitation, providing early prevention/intervention. To ensure greatest impact, this initiative must be government led – working closely with local service providers, such as 3PC and FCF partners.

Despite improvements in birth registration as noted earlier, universal birth registration is still lacking.⁴⁹ Reasons given for this are varied including, that the house is far away from the commune, transportation fees, loss of necessary registration paperwork, and in some cases “informal/extra” registration costs. The fulfilment of this right is closely linked to the realisation of many other rights, inter alia, to a name, nationality, to know one’s origins and eligibility to services. Given the success of the Village Record Book tool initiative launched in

2015,⁵⁰ where Village chiefs use the books to record the number of children born in a given month, these key actors should be trained to facilitate birth registration with the support of the Ministry of Interior. It may be astute to promote wider birth registration in hospitals as the great majority of births occur there. Whilst the Commune has the authority for birth registration, social workers in facilities such as Angkor Hospital for Children (AHC), can be trained on assisting families with such matters as birth registration form completion, in addition to yellow card provision (see Rec. No 6 - Reintegration).

A **long term** initiative could involve the development of a smart phone application that maps all existing services provided by all the different Ministries. The team was told that even in families living in the most impoverished areas/conditions, many had access to such devices. The information contained in the application would need to be in multiple formats (e.g., traditional, images/icons) that could be easily accessible, particularly to those who may be illiterate. Such an application could complement the ‘Facts for Life’ project launched on ‘Facebook.org’ (local name: Free Basics) in 2015, aiming to transmit vital messages to people who do not have Internet access⁵¹ as well as projects such as Urbanrefuge.⁵²

47 Cambodian Ministry of Planning, National Institute of Statistics, Estimation of Homeless Children Across Seven Cities in Cambodia (2016).

48 Cambodian Ministry of Women’s Affairs, Findings from Cambodia’s Violence Against Children – survey 2013 summary (2014).

49 UNCRC Committee raised regarding the low level of birth registration especially in remote areas and villages in its Concluding Observations (OPAC) 2015.

50 www.unicef.org/about/annualreport/files/Cambodia_2015_COAR.pdf.

51 www.unicef.org/about/annualreport/files/Cambodia_2015_COAR.pdf.

52 <http://www.urbanrefuge.org/>

Rec. No

4

Encourage and support parents to care for their children so that families can remain together (i.e. primary prevention measures)

SHORT TERM (2018)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Inventory of all existing hotlines	<div><div>1</div> Inventory of existing hotlines.</div> <div><div>2</div> Inventory of existing services by region (Rec. No 5).</div> <div><div>3</div> Build capacity of WCCC and CCWC to facilitate prevention strategies</div>	MoSVY	UNICEF, 3PC, FCF	2018
Matrix of existing hotlines	<div><div>1</div> Based on inventory develop a matrix of all hotlines and services in centralised format.</div> <div><div>2</div> Set up national hotline which refers to centralised information.</div> <div><div>3</div> Training on hotline management.</div> <div><div>4</div> Advocacy and dissemination of hotline.</div>	MoSVY	UNICEF, 3PC, FCF	2018

MEDIUM TERM (2019 - 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Mobile team of service providers (direct link to families to services)	<div><div>1</div>Identify health, education, social service etc. to be part of mobile team.</div> <div><div>2</div>Training of mobile team to provide services directly to families.</div> <div><div>3</div>Mobile team to access remote areas.</div>	MoSVY	UNICEF, 3PC, FCF	2019 ongoing
Universal birth registration campaign	<div><div>1</div>Training of social work units at hospitals to assist with birth registration.</div> <div><div>2</div>Training of village chiefs to assist with birth registration/record books.</div>	MoSVY	UNICEF, 3PC, FCF	2019-2023

LONG TERM (Beyond 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Set up smart phone application of all existing services	<div><div>1</div>Regular updates of service inventory in one centralised database.</div> <div><div>2</div>Develop smart phone application.</div> <div><div>3</div>Test application among focus groups.</div> <div><div>4</div>Test in one/two pilot regions.</div> <div><div>5</div>Launch nationwide application.</div>	MoSVY and Ministry of Technology	UNICEF, 3PC, FCF	2023 ongoing

Rec. No

5

Develop safety net measures to protect children at risk, when primary prevention has not worked (i.e. secondary prevention measures)

ST

Collect information about existing and new alternative care/adoption services based on

- 1) MoUs providing licenses to service providers
- 2) Material shared at monthly CCWC meetings

 Extend social service mapping (13 indicators with birth registration, HIV, disability, etc.) to include health/education etc.

MT

Develop a National Directory of Services

Uniform case management system

Develop respite care services

LT

Develop Child Provincial Centres for assistance

Nationwide awareness raising campaigns to keep families together

Despite basic services being provided to families, in all countries there will be a certain number who will be at greater risk of separation and require additional support. In Cambodia this includes, for example, families living in poverty, disabilities within a family, children left behind when parents migrate, child abuse and neglect.⁵³ We were continually told that one of the main drivers for separation was the perceived educational opportunities at RCI’s, due to schools in regional areas often being poorly resourced and unofficial costs. FCF’s work to develop a child vulnerability index will help identify those at greatest risk. Opportunities for improved collaboration are ample for those working within MoSVY and Ministry of Education, as well as internally within organisations, such as UNICEF’s education and child protection sections.

Tailored responses are required to address these drivers of separation. Whilst a targeted national approach is missing, geographically isolated efforts occur. For example M’LopTapang works with families to set up small businesses, provides sewing machines to single mothers as well as provides emergency supplies and free medical care. Likewise in 2015 UNICEF has been supporting sub-national administrations to enhance investment and delivery of social services for vulnerable women and children in 101 communes, “benefiting 12,691 children under the age of one with birth registration; 10,315 pregnant women with access to antenatal care, delivery at a health facility and post-partum care, and 30,550 children aged three to five to attend community pre-schools.”⁵⁴

53 See also Cambodian Ministry of Planning, National Institute of Statistics, *National Estimation of Children in Residential Care Institutions in Cambodia (2016)* and Cambodian Ministry of Women’s Affairs, *Findings from Cambodia’s Violence Against Children – survey 2013 summary (2014)*.

54 www.unicef.org/about/annualreport/files/Cambodia_2015_COAR.pdf.

Even when specific services exist, we found that they were not always well-known. In the **short term** we recommend building on UNICEF/3PC's work on social service mapping to centralise information about all service providers. To date Friends International and Mith Samlanh have developed a Service Directory which compiles information on 58 NGOs and helps identify gaps in service provision. We recommend that the 3PC effort be broadened to include information about health, education, legal services, etc. Likewise, information should be gathered summarising information of approved services contained in MoUs provided by all Ministries (Education, Health, Justice, Social Services, Women etc.). An independent consultant could be engaged to undertake this task. Information about existing and new services can also be gathered at the monthly CCWC meetings that most service providers attend. It would be for DoSVY to group the information.

In addition as mentioned in Rec. No 4, the role of WCCC and CCWC to develop clear gate keeping mechanisms and to mobilise resources to support children and families who are at risk of separation should not be underestimated. Building prevention strategies on the basis of the nationwide presence of these two Committees will help ensure Government ownership and long term sustainability. However, given their resources, their capacity must be developed through investment and training.

In the **mid term** we recommend this information be used to develop a National Directory of Services (NDS) ideally in electronic database format. This information could also be displayed in brochures and a smart phone application, as well as used for the national hotline (see Rec. No 4).

Similarly, we were encouraged to see the online case management system developed by Children in Families through FCF designed to be open sourced and freely available to all. This facilitates the uniform transfer of information between organisations and centralises case notes, intake and subsequent follow up. This would of course imply that all stakeholders, particularly social workers and Ministries, agree on data input, which would necessitate training (see Rec. No 1 - Cooperation and Rec. No 3 - Training). A risk assessment should be built into this system to safeguard against potential abuses. A regular file audit by MoSVY could address complications. Although in its early stages, we would in the long run recommend scaling up such a system, once secure. This initiative should complement the ongoing work to streamline the 28 existing MoSVY forms by Friends International.

It has been observed elsewhere that, “despite poverty being self-cited by the mothers, fathers and carers as the main reason for separation, it was only when one or more negative events impact a family already struggling to get by, that the family decided to relinquish their children.”⁵⁵ This explains why not all families living in poverty abandon or relinquish their children. Respite care could be one means of providing temporary relief. For example, the respite care provided by AHC social work unit could be replicated in other hospitals. Their approach of providing temporary care for newborns and identifying support/services for families in crisis has resulted in almost total re-integration. The Ukraine example of proactive prevention work in hospitals could also be considered as a tool for equipping mothers to care for newborns.⁵⁶ Likewise “Short break” services for children with disabilities in Russia⁵⁷ is a useful reference model. This service is flexible in meeting the needs of each individual family and the care can be provided in the child’s own home or the carers’ home. Work on respite care work would complement ongoing **short term** foster care work (see Section 0).

In the **mid term**, building on the work of Cambodian Children’s Trust where “Community Centres,” provide assistance to families at risk, this service could be evaluated to examine potential for nationwide replication. ILO is piloting a migrant resource centre⁵⁸ to promote access to information⁵⁹ with funding ending end of 2018.

In the **long term**, if Community Centres can be replicated, they present a means of raising awareness among vulnerable groups of the benefits of family based care, and tackling deeply held beliefs that institutional care provides better living conditions and educational opportunities. Such campaigns in Khmer could be disseminated in local schools, media, community health centres, etc. Content could be drawn from the communication campaigns “Children are not Tourist Attractions” and “Don’t create more orphans” developed by Friends International. Examples of successful initiatives elsewhere include Families First in Indonesia,⁶⁰ “#SpeakUpForMe” communication strategy launched through social networks in Latin America,⁶¹ and the de-institutionalisation campaigns for 0-3 years in CEE/CIS region⁶² and Latin America.⁶³ The C4D behavioural change campaign strategy could also be considered as one dissemination mode.

55 Pien Bos, Fenneke Reysoo and Mia Dambach, Qualitative research into the root causes of child abandonment and child relinquishment in Viet Nam (International Social Service, 2013) – at the request of MOLISA and UNICEF Viet Nam.

56 www.hopeandhomes.org.ua/eng/cases/4f8eafaca550/.

57 Cantwell, N.; Davidson, J.; Elsley, S.; Milligan, I.; Quinn, N. (2012). Moving Forward: Implementing the ‘Guidelines for the Alternative Care of Children’. UK: CELCIS, www.alternativecareguidelines.org.

58 www.cambodianchildrensfund.org/programs/ (see community outreach).

59 www.ilo.org/dyn/migpractice/migmain.showPractice?p_lang=en&p_practice_id=84.

60 www.youtube.com/watch?v=t2A0-EyVYaU&list=PL31VPFI_z_Y9u1jX8JG4yQgK3e-z4kJsJ&index=1.

61 “#HablaPorMi” in Spanish at www.hablapormi.org.

62 www.europe.ohchr.org/Documents/Press/Dynamics%20of%20deinstitutionalization%20-%20Developments%20in%20Eastern%20Europe%20Jean%20Claude%20Legrand.pdf and www.unicef.org/ceecis/Reform_Efforts.pdf.

63 RELAF y UNICEF (2015), Model of prevention of abandonment and institutionalisation of small children”. Available in Spanish: www.relaf.org/materiales/ModeloPrevencion.pdf.

Rec. No

5

Develop safety net measures to protect children at risk, when primary prevention has not worked (i.e. secondary prevention measures)

SHORT TERM (2018)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Inventory of all service providers in alternative care/adoption	<ol style="list-style-type: none"> 1 Extend social service mapping nationwide to include other services. 2 Build on directory of Friends International and Mith Samlanh. 3 Inventory of all existing relevant MoUs to identify services. 4 Assessment of information gathered at CCWC about service providers. 5 Build capacity of WCCC and CCWC to facilitate prevention strategies 	MoSVY and all Ministries	UNICEF, 3PC, FCF, Friends International and Mith Samlanh	2018
Matrix of all service providers	<ol style="list-style-type: none"> 1 Establish a matrix of all services in centralised format by region. 	MoSVY	UNICEF, 3PC, FCF	2018

MEDIUM TERM (2019 - 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
National Directory of Services	<ol style="list-style-type: none"> 1 Based on short term activities, set up a National Directory of Services. 2 Identify who will manage the Directory 3 Identify how "new" and "obsolete" information will be included. 4 Widely disseminate existence of Directory among general public and families at risk. 	MoSVY	UNICEF, 3PC, FCF	2019 ongoing

Online case management	<ol style="list-style-type: none"> 1 Build on work of CSOs to develop online case management system. 2 Identify with relevant Ministries, CSOs and other actors additional requirements for case management. 3 Establish centralised case management system. 4 Training of all potential users on case management system. 	MoSVY	UNICEF, 3PC, FCF	2019-2020
Set up respite services	<ol style="list-style-type: none"> 1 Identify and agree on type of respite services needed through Ministerial co-operation and CSO meeting. 2 Build on work of CSOs and identify aspects that could be scaled up. 3 Set up specific services for families with children 0-3 years old and those with special needs. 	MoSVY	UNICEF, 3PC, FCF	2020-2023
Set up community centres	<ol style="list-style-type: none"> 1 Evaluate CCT and ILO community centres to see aspects that could be scaled up. 	MoSVY	UNICEF, 3PC, FCF	2023 ongoing

LONG TERM (Beyond 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Set up community centres	<ol style="list-style-type: none"> 1 Consider whether community centre model could be established nationwide. 2 Set budget for implementation. 3 Organise annual meetings with community centres for sharing of promising practices and troubleshooting. 	MoSVY	UNICEF, 3PC, FCF	2023 ongoing
Nationwide campaign on de-institutionalisation (De-I) as per Rec. No 7	<ol style="list-style-type: none"> 1 Analyse campaigns from other countries to identify those which could be helpful in Cambodia. 2 Set up focus groups to ascertain which messages are most effective. 3 Request assistance from Marketing professionals or those working in De-I. 4 Launch nationwide campaign during a "high level" event/day to attract maximum attention – consider involvement of a well-known celebrity such as a UNICEF Ambassador. 	MoSVY	UNICEF, 3PC, FCF	2023 ongoing

Rec. No

6

When entry into the alternative care system is unavoidable, efforts should focus on a “re-start” (i.e. tertiary prevention measures and reintegration)

ST

Encourage ongoing contact with families of origin by promoting kinship care
Implement child participation programs
Equip professionals to include the voice of the child in decision making

MT

Create an abandonment register to feed into national database
Introduce a mandatory reporting system to identify families at risk

LT

Training of social workers within DoSVY to focus on strengths of family and explore all options

Irrespective of efforts, some children may nevertheless enter the care system. This means promoting the return of children to the care of parents where appropriate. To facilitate reintegration, a number of principles should be followed, for example encouraging contact with families of origin when in the child’s best interests, provision of care as close as possible to the child’s habitual residence for the facilitation of visits, and regular review at least every three months.⁶⁴ Further direction is provided in the Guidelines on Children’s Reintegration launched in September 2016.⁶⁵ Many of these principles are reflected in national legal and policy frameworks.⁶⁶

In the **short term**, one means of promoting ongoing contact with families of origin is by prioritising care with relatives, for example, as successfully undertaken by Children in Families and M’Lop Tapang. Kinship carers, as with any biological or foster family, will need support in their caregiving role to ensure sustainability, however differently to “stranger care arrangements”.⁶⁷ As in countries facing migration, in Cambodia kinship carers are likely to be grandparents; this can be associated with complications such as health deterioration and respite care may be necessary (see Rec. No 5 - Respite care).

64 See UN Guidelines, paras 11, 15, 22, 40, 49-52, 67, www.unicef.org/protection/alternative_care_Guidelines-English.pdf.

65 www.familyforeverychild.org/our-impact/guidelines-on-childrens-reintegration/?utm_source=partners&utm_medium=social&utm_campaign=Guidelines%20Launch.

66 See list of situations of risks and assessment of the risks and strengths in the family, Family Preservations Services: Chapter 4 Prakas on Procedures to Implement the Policy on Alternative Care for Children (2011) and Role and Responsibility of the relevant agencies to assist vulnerable families and children: Chapter 1, Definition of situations of risk and need for intervention: Chapter 2. Section 1, and Family Preservation Services: Chapter 4, Monitoring Process: Chapter 4. Section 6; Guidelines and tools for implementing Prakas on procedures to implement the alternative care policy for children (2013).

67 Marie Connolly, Meredith Kiraly, Lynne McCrae and Gaye Mitchell, A Kinship Care Practice Framework: Using a Life Course Approach, *British Journal of Social Work* Advance Access published May 9, 2016.

When entry into the alternative care system is unavoidable, efforts should focus on a “re-start” (i.e. tertiary prevention measures and reintegration)

SHORT TERM (2018)				
What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Promoting of kinship care	<div><div>1</div>Organise information sessions on importance and benefits of kinship care within community, potentially as part of C4D behavioural change strategy.</div> <div><div>2</div>Establish policy for prioritising kinship care.</div> <div><div>3</div>Identify resources for policy execution.</div>	MoSVY	UNICEF, 3PC, FCF	2018
Training of RCI staff about reintegration	<div><div>1</div>Training on reintegration benefits including implementation challenges.</div> <div><div>2</div>During training, identify avenues for overcoming challenges.</div> <div><div>3</div>Develop support services for implementing effective reintegration based on existing practices.</div>	MoSVY	UNICEF, 3PC, FCF	2018
Introduce child participation programs	<div><div>1</div>Inventory of existing programs that encourage child participation.</div> <div><div>2</div>Consider external child participation programs.</div> <div><div>3</div>Streamline program and implement nationwide linked to the programme guidelines on reintegration.</div> <div><div>4</div>Train actors on child participation.</div>	MoSVY	UNICEF, 3PC, FCF	2018

MEDIUM TERM (2019 - 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Abandonment register linked to nationwide database Rec. No 2	<div><div>1</div>Identify policy for responding to abandonment of children including responsible authorities.</div> <div><div>2</div>Establish database for centralising abandonment information. Registers could be maintained by CCWC.</div> <div><div>3</div>Identify authority for managing register.</div> <div><div>4</div>Widely disseminate information about register at police stations, courts etc.</div>	MoSVY, MoJ	UNICEF, 3PC, FCF	2019 ongoing

LONG TERM (Beyond 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Address the reasons for separation	<div><div>1</div>Undertake a study on abandonment and relinquishment.</div> <div><div>2</div>Based on study identify practical recommendations to address root causes (access to “free” education).</div> <div><div>3</div>Set up services targeting root causes.</div> <div><div>4</div>Develop nationwide campaign against abandonment and relinquishment.</div>	MoSVY and Ministry of Education	UNICEF, 3PC, FCF	2023 ongoing

Further, to improve reintegration success an essential consideration is the participation of the child.⁶⁸ In the context of the national 30% reintegration target, concerns have been raised that no part of the process currently allows professionals the time to work with children and explain the reasons for entering care, and why they are now returning home. Active child participation programs must be developed. The future work of FCF to introduce family conferencing⁶⁹ may be one means of facilitating the participation of all relevant parties. In the Netherlands it has become an integral part of child protection legislation, and such conferences are now mandatory in care proceedings.⁷⁰

Ensuring child inclusion would necessitate training of RCI staff about reintegration, especially where misconceptions exist (see Rec. No 3 - Training). It has been observed elsewhere that “in some instances, staff may falsely assume that when parents do not regularly visit their children in Social Protection Centres (RCI equivalent) this was a sign of lack of interest as opposed to issues such as lack of capacity to travel to SPCs located some distance from the family home and in certain cases the visit being too traumatic (i.e., a reminder of their incapacity to care appropriately for their child).”⁷¹

In cases of abandonment (anonymous relinquishment of parental authority), in the **mid term** we recommend the creation of a register, that feeds into the national database (see Rec. No 2 - Database). As MoSVY has the mandate to undertake tracing activities for six months, they would have operational responsibility. Such a register would facilitate reintegration in cases where families have changed their mind, or when children have been illegally removed. Likewise reintegration efforts can be facilitated by using existing structures in society, such as through educating teachers in identifying children at risk and providing support. This could eventually involve a mandatory reporting system for all professionals working directly with children,⁷² so that challenges can be immediately identified.

Likewise, in the **long term**, sustainable reintegration requires focusing on the strengths of the family and taking the time to stabilise the situation. Without addressing the reasons for separation in the first place, there is a high risk of ongoing separation (see Rec. No 4 - Primary prevention and Rec. No 5 - Secondary prevention). This would involve the training of DoSVY staff to ensure that potential alternatives are followed up and duly noted before “formally” allowing the child to enter into care (see Rec. No 3 - Training and Rec. No 7 - Gatekeeping).

68 Article 12 UNCRC and General Comment 12 : The Right of the Child to be heard.

69 See for example Family Conferencing, <https://aifs.gov.au/cfca/publications/family-group-conferencing-australia-15-years>.

70 www.eigen-kracht.nl/assets/uploads/2015/05/20140000_Transforming_Care_The_new_welfare_state_RvPagée-EU-Forum-Rest.Justice.pdf, www.ncbi.nlm.nih.gov/pmc/articles/PMC4574617/, [http://english.wodc.nl/onderzoeksdatabase/2384-evaluatie-van-de-inzet-van-\(familie\)netwerkberaad-eigen-kracht-conferenties-\(ekc\)-in-jeu-gdbescherming.aspx](http://english.wodc.nl/onderzoeksdatabase/2384-evaluatie-van-de-inzet-van-(familie)netwerkberaad-eigen-kracht-conferenties-(ekc)-in-jeu-gdbescherming.aspx).

71 Pien Bos, Fenneke Reysoo and Mia Dambach, Qualitative research into the root causes of child abandonment and child relinquishment in Viet Nam (International Social Service, 2013) – at the request of MOLISA and UNICEF Viet Nam.

72 See www.community.nsw.gov.au/preventing-child-abuse-and-neglect/resources-for-mandatory-reporters/how-to-make-a-report.

Rec. No

7

Introduce effective gatekeeping mechanisms

- ST

Improve capacity of gatekeeper to properly carry out their functions
- MT

Develop uniform admission criteria for government & private providers of care
- LT

Awareness raising campaign about importance of families remaining together and harmful effects of RCIs

Ensure free access to quality education

Gatekeeping is defined as a “recognized 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.”⁷³ In child welfare and protection contexts it can be described as a set of strategic policies and programs preventing the use of out of home care, especially residential care.⁷⁴

During our visit, we noted the need for those in charge of gatekeeping to maintain a certain independence to avoid conflicts of interest. For example, RCIs receive financial support for each child in their care and therefore may have an incentive to increase or maintain numbers. Whilst DoSVY would be well placed to be the gatekeeper and the National Action Plan refers to the CCWC as having a gatekeeping role, in practice it appears that they both have neither the resources, for example to travel to families, nor capacity to make evaluations and propose sustainable options.

73

Cantwell, N.; Davidson, J.; Elsley, S.; Milligan, I.; Quinn, N. (2012). Moving Forward: Implementing the ‘Guidelines for the Alternative Care of Children’. UK: CELCIS www.alternativecareguidelines.org.

74

Herczog, M, Gatekeeping, Building on the Momentum Alternative Care Conference, Geneva, October 2016.

Given that community health nurses exist in each local commune, we suggest equipping them in the [short term](#) to work with DoSVY and CCWD to assess families at risk. This dual system allows for leveraging of resources and for minimising of any potential illicit practices. Alternatively training of community volunteers might be feasible, where for example 30,000 friends of the family were trained to do such initial identification work in Rwanda.⁷⁵

We strongly encourage the development of uniform admission criteria for government and private providers of care to be included in the Cambodia Implementation and Monitoring Handbook (see Rec. No 3 Training) in the [mid term](#). This would help set a clear benchmark of practical needs to be addressed before a child can enter care. This could include a gatekeeping document, noting any concrete efforts undertaken to support the family and reintegration. Specifically, as education is

viewed as one of the main drivers for separation, we recommend a gatekeeping document, that notes what concrete support for education were offered to the family, such as uniform, school books etc.

In order to combat the myth that children receive a better education in RCIs, we encourage the design of awareness raising campaigns among the general population that highlights the importance of families remaining together and the harmful effects of RCIs (see Rec. No 5 - Secondary prevention). This campaign would, of course, need to be concretely supported by improving truly free access to education for all children. This should be linked to the ongoing behavioural change strategy work. The Ministry of Education would also have to address other noted problems such teacher's low salaries, lack of school infrastructure and teacher's requesting additional fees – already confirmed by the UNCRC Committee in 2011.⁷⁶

⁷⁵ https://www.unicef.org/rwanda/RWA_resources_friendsOfFamily.pdf

⁷⁶ (c) There is still a lack of school infrastructure in the State party, especially facilities such as toilets and drinking water, as well as materials for pupils, particularly in rural areas; (d) Although the State party indicated during the dialogue that the issue of paying additional fees to teachers has been addressed, teacher salaries remain low; the overall level of corruption which exists in the State party, leads to the possibility of teachers taking money to pass pupils taking examinations; http://tbinternet.ohchr.org/_layouts/treatybodyexternal/Download.aspx?symbolno=CRC%2fC%2fKHM%2fCO%2f2&Lang=en.

Introduce effective gatekeeping mechanisms

SHORT TERM (2018)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Equipping community health nurses	<ol style="list-style-type: none"> 1 Training of CCWC, WCCC, community health nurses and DoSVY about gatekeeping. 2 Annual training sessions on gatekeeping among all “gatekeepers”. 	MoSVY and MoH	UNICEF, 3PC, FCF	2018
Nationwide De-institutionalisation campaign (Rec. No 5)	<ol style="list-style-type: none"> 1 Evaluate effectiveness of De-I campaign in Rec. No 5 and readjust for ongoing campaign. 	MoSVY	UNICEF, 3PC, FCF	2018

MEDIUM TERM (2019 - 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Uniform admission criteria for government and private providers of care	<ol style="list-style-type: none"> 1 Identify admission criteria among relevant Ministries, CSOs and others. 2 Criteria in compulsory “standard” intake form. 3 Develop a section in the intake form about what education measures have been provided to the family. 4 Clarify what should be done when information is missing. 5 Centralise all “intake” forms in database Rec. No 2. 	MoSVY	UNICEF, 3PC, FCF	2019 ongoing

LONG TERM (Beyond 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Nationwide campaign on de-institutionalisation (Rec. No 5)	<ol style="list-style-type: none"> 1 Ongoing training of all actors on De-I 	MoSVY	UNICEF, 3PC, FCF	2023 ongoing

03

Foster care: findings and capacity development plan recommendations

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As described, preventive and gatekeeping efforts need to be developed, as they safeguard against unnecessary out of home placement of children (see Section 2). Yet, despite all efforts, some children will be separated from their parents and require alternative care. In such cases, frameworks must exist to that ensure States fulfil their responsibilities to provide quality care which caters for the child's individual needs. Ideally such options should prioritise family based care, such as kinship care and foster care, in a way that is complementary to the support being offered to families of origin. A delicate balance of resource allocation is required to avoid foster care "support" bias, whereby foster families are supported more than families of origin. In some cases if the latter were supported in the same way as foster carers, separation would be less likely.

In response to the considerable number of children in alternative care the government has foreseen a vast number of legislative and policy frameworks (see Annex 1). There seems to be three types of purely "family" based alternative care recognised in Cambodia – informal care,⁷⁷ kinship care and foster care.⁷⁸ Such family based care can serve the best interests of the child if carers are provided with adequate support. The 2014 World Vision Cambodia research on community-based programs, including foster care, provides additional insights about differences in service provision.⁷⁹

It appears from our meetings that many children are living in informal care and informal kinship care, with family members, neighbours, and friends without competent authorities being involved. As with all other children, those living in informal arrangements may lack many basic services and/or require targeted or specialised services. Such support is being provided by organisations such as Children in Families,⁸⁰ Hagar and Komar Rikreay.⁸¹ It seems however that formal kinship care, involving a competent authority's approval, supervision and support, is less prevalent. Whilst we received anecdotal evidence about the nature of informal care and kinship care in Cambodia, we are not in a position to mention any trends due to our limited mandate.

77 Implementing Prakas on procedures to implement the alternative care policy for children (2013) (Chapter 9, Sec. 2. Informal Permanent kinship care)

78 See Prakas on Procedures to Implement the Policy on Alternative Care for Children (2011) (Art. 27 Procedures for permanent care by kin; Art. 29 Procedures for permanent care by non-kin foster care) and Implementing Prakas on procedures to implement the alternative care policy for children (2013) (Chapter 7, Sec. 2 Priorities of Alternative Care Placement)

79 Brake-Smith, Julia, Community-Based Alternative Care Options in Cambodia, Child Protection Unit: Trauma Recovery Project, World Vision Cambodia, March, 2014.

80 www.childreninfamilies.org/programs.

81 <https://komarrikreaycambodia.wordpress.com/our-programs/alternative-care/>.

Foster care is being provided by numerous civil society actors across the country, primarily focusing on specific regions. A centralised and nationwide system does not exist. The precise number of actors is not known, although could be approximately determined with reference to MoUs. However, it seems that not all service providers are necessarily licensed. Each organisation provides case management for up to 50 children and supervises between five and 25 foster carers in any given year.

The UN Guidelines define foster care as “situations where children are placed by a competent authority for the purpose of alternative care in the domestic environment of a family other than the children’s own family that has been selected, qualified, approved and supervised for providing such care.”⁸² Basic characteristics of foster care include “a care arrangement ordered or administered by a competent authority, whether on an emergency, short term or long term basis, whereby a child is placed in a family home where the carers have been selected, prepared and authorised to provide such care, are supervised, and may receive financial or other support or compensation for doing so.”⁸³

Importantly it should be noted that foster care must not be the only response considered for a child separated from his or her family. Each State has the responsibility to provide a continuum of quality care options to ensure each child’s individual needs are met. This is necessary given that foster care may not be suitable for all children for a variety of reasons. For example, teenagers, children who have grown up in group settings such as RCIs, care leavers, children living on the street, and children on the move cannot always be accommodated in families, nor have such a desire. Imposing foster care as the solution for all children is risky, even more so in cases where foster carers are poorly evaluated, inadequately supported, and little supervision exists.

The benefits of foster care compared to informal care without adequate support, or institutionalisation is clear.⁸⁴ This is why the development of a robust foster care system covering the country is being considered by Cambodia. The following recommendations focus on developing foster care by building on existing services. For example, M’lup Russey together with four other organisations - Children in Families, First Step, Mother’s Heart, and Prison Fellowship (informally known as the big five) - provide the great majority of emergency foster care services. Other organisations work on short term foster care, such as MlupTapang, Komar Rikreay, Mith Samlanh and Kalyan Mith whereas Friends International provides broad foster care services, with a particular initiative for abandoned babies in collaboration with AHC.⁸⁵ CCT offers foster care programs in parallel to their family preservation and reunification programs.⁸⁶ Children in Families⁸⁷ provide a broad range of foster care services from emergency to long term. Although each foster care service provider has varying *modi operandi*, a unifying factor is their belief in the importance of family based care which is reflected in their reintegration, kinship care and foster care programs. Inspiration can be taken from their promising practices as well as from internationally implementable strategies to develop the foster care system.⁸⁸ We are also aware for example, that Care for Children, working within FCF has been tasked to work directly with state run RCIs to introduce a foster care system in the next 18 months.

82 Para. 29 c (ii).

83 Identifying basic characteristics of formal alternative care settings for children, a discussion paper (March 2013) an output of the NGO Working Group on Children without Parental Care in Geneva (a sub-group of the NGO Group for the UNCRC Committee), commissioned and financed by Better Care Network, Family for Every Child, International Social Service, Save the Children and SOS Children’s Villages International.

84 Elizabeth Fernandez, Foster Care, in *The Wiley Blackwell Encyclopedia of Family Studies*, ed: Constance, L. Shenan, , John Wiley and Sons, 2016, 874-878, A Spotlight on Foster Care, Family for Every Child, 2014, www.familyforeverychild.org/wp-content/uploads/2015/05/A-spotlight-on-foster-care.pdf, Corinna Csáky, Keeping Children out of Harmful institutions, Save the Children, 2009, www.savethechildren.org.uk/sites/default/files/docs/Keeping_Children_Out_of_Harmful_Institutions_Final_20.11.09_1.pdf.

85 <http://friends-international.org/blog/index.php/foster-care-project-siem-reap-baby-vs-story>.

86 www.cambodianchildrenstrust.org/holistic-family-based-care-hfbc-model.

87 www.childreninfamilies.org/foster-care.

88 Family for Every Child, The place of foster care in the continuum of care choice: A review of the evidence for policymakers, London, 2015, www.familyforeverychild.org/wp-content/uploads/2015/02/Strategies_for_delivering_safe_and_effective_foster_care.pdf.

Rec. No

8

Development of national legislative framework on foster care as part of comprehensive child welfare and legal protection for children

ST

Assessment and evaluation of the currently operating NGO conducted programs to streamline promising practices

Development of a wide range of community based care options

MT

Development of foster care specific legislation to complete legislative & policy frameworks

LT

Assessment and fine-tuning of wide range of community based care options

Foster care service provision is spearheaded by a multitude of civil society organisations - the breadth, range and quality of services varying greatly. Even when government policies exist to standardise practices, this can be challenging to implement in practice. For example, whilst MoSVY requires the use of 28 common forms, these forms may not adequately reflect case management needs, resulting in some organisations developing parallel systems. Likewise, whilst DoSVY is in principle required to approve each placement, their capacity is limited and role appears more administrative. Given the multitude of practices, we recommend that an assessment and evaluation of all currently operating NGO conducted programs, including faith based organisations to identify and streamline promising practices in the [short term](#). This information could feed into the National Directory of Services (see Rec. No 5).

Likewise in the immediate future, universal and specialised services assisting children living with their biological families (see Rec. No 4 - Primary prevention) must likewise target children in kinship care, foster care, small group homes, etc. This

80 www.childreninfamilies.org/programs.

81 <https://komarrikreaycambodia.wordpress.com/our-programs/alternative-care/>.

82 Para. 29 c (ii).

83 Identifying basic characteristics of formal alternative care settings for children, a discussion paper (March 2013) an output of the NGO Working Group on Children without Parental Care in Geneva (a sub-group of the NGO Group for the UNCRC Committee), commissioned and financed by Better Care Network, Family for Every Child, International Social Service, Save the Children and SOS Children's Villages International.

84 Elizabeth Fernandez, Foster Care, in The Wiley Blackwell Encyclopedia of Family Studies, ed: Constance, L. Shenan, , John Wiley and Sons, 2016, 874-878, A Spotlight on Foster Care, Family for Every Child, 2014, www.familyforeverychild.org/wp-content/uploads/2015/05/A-spotlight-on-foster-care.pdf, Corinna Csáky, Keeping Children out of Harmful institutions, Save the Children, 2009, www.savethechildren.org.uk/sites/default/files/docs/Keeping_Children_Out_of_Harmful_Institutions_Final_20.11.09_1.pdf.

would include promotion of reintegration efforts (see Rec. No 6). The development of a wide range of community based care options should be part of the national legislative framework, given the national 30% reintegration target and the National Plan of Action.⁸⁹ For example small group homes⁹⁰ in communities may need to be developed in a way that avoids the renaming and reshaping of currently operating inappropriately large RCIs. This would necessitate group homes which are not too large, and of a size where children are afforded individual care. In the Hagar model program for the rehabilitation of sexually exploited boys, there are six children under 16 in a group home with two “house mothers”. This seems appropriate.⁹¹ Further ideas can be drawn from the positive experiences of group homes run by Friends International⁹² and Community Care First Organisation. Providing semi-independent living arrangements could be extended as a national program for children who cannot always be accommodated in families.

On the basis of such an assessment, in the **mid term** foster care specific legislation should be developed to cover recruitment, matching, preparation, supervision, support, follow up, etc. Whilst the legal and policy frameworks as well as the non-binding National Action Plan⁹³ mention foster care, the aforementioned details appear to be missing highlighting only the responsible Ministry. Examples of legislative frameworks that could provide guidance include, for example, Argentina,⁹⁴ Australia⁹⁵ and South Africa.⁹⁶ Ideas can likewise be broadly gleaned from existing standards and protocols that could be integrated into an Implementation and Monitoring Handbook.⁹⁷ (See Rec. No 3).

In the **long term**, given the development of wide range of community based care options as part of the national legislative framework in the short term, a five year review should be ideally undertaken by an independent team to identify existing challenges and opportunities for improvement.

⁸⁹ For example, noting the Standard Operating Procedure for Closure and Transitioning of RCIs to Community-based services and 30% reintegration target by 2018.

⁹⁰ Group-homes based care is defined as ‘a form of alternative care whereby a limited number of children [no more than 15] are housed in a family environment under the supervision of a small group of caregivers unrelated to the children. A group home is integrated into a community setting, but is not run by the community See Policy on Alternative Care of Children, 2006.

⁹¹ Supporting small group home family living at Hagar, <https://riselearningnetwork.org/resource/supporting-small-group-family-living-at-hagar-cambodias-recovery-centre-for-sexually-abused-and-exploited-boys/>.

⁹² <https://friends-international.org/social-services/>.

⁹³ www.unicef.org/cambodia/Country_kit_Child_Protection_Final_A4.pdf.

⁹⁴ www.relaf.org/Foster%20Care%20in%20Argentina.pdf.

⁹⁵ NSW Children and Young Persons (Care and Protection) Act 1998 www.community.nsw.gov.au/kts/legislation.

⁹⁶ South Africa Children’s Act 38 of 2005 www.justice.gov.za/legislation/acts/2005-038%20childrensact.pdf.

⁹⁷ www.bettercarenetwork.org/sites/default/files/Minimum%20Standards%20on%20Alternative%20Care%20for%20Children%20Cambodia.pdf.

Rec. No

8

Introduce national legislative framework on foster care as part of comprehensive child welfare and protection legal and policy frameworks

SHORT TERM (2018)				
What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Inventory of all foster care service providers	<div><div>1</div> Inventory of all foster care service providers based on MoU etc.</div> <div><div>2</div> Feed into National Directory of Services the chosen programs (Rec. No 5).</div>	MoSVY	UNICEF, 3PC, FCF	2018
Streamline basic foster care services	<div><div>1</div> Evaluation of NGO conducted programs</div> <div><div>2</div> Identify which aspects are working well and areas for improvement.</div>	MoSVY	UNICEF, 3PC, FCF	2018
Development of a wide range of community based care options	<div><div>1</div> Identify gaps in service provision using National Directory of Services.</div> <div><div>2</div> Identify which existing services require further development.</div> <div><div>3</div> Consider developing small group homes in communities to provide temporary shelter for those that cannot be accommodated in foster care.</div> <div><div>4</div> Providing training to those working in the field (Rec. No 2).</div> <div><div>5</div> Establish universal and targeted services, funded by the government (Rec. No 1).</div>	MoSVY, MoH and Ministry of Education	UNICEF, 3PC, FCF	2018 ongoing

MEDIUM TERM (2019 - 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Draft foster care specific legislation	<div><div>1</div>Set up roundtable to discuss what is needed in comprehensive foster care legislation (e.g. selection, preparation, matching, follow up, payment etc.).</div> <div><div>2</div>Examine external legislation examples</div> <div><div>3</div>Draft legislation.</div> <div><div>4</div>Include consultation with all the stakeholders, harmonising with the planned child welfare and protection legislation.</div> <div><div>5</div>Disseminate widely legislation.</div> <div><div>6</div>Train actors on implementation.</div>	MoSVY	UNICEF, 3PC, FCF	2019
Include "foster care" in handbook (Rec. No 3)	<div><div>1</div>Set up an advisory board of what to include in implementation handbook.</div> <div><div>2</div>Field test in one or two regions.</div>	MoSVY	UNICEF, 3PC, FCF	2019 ongoing

LONG TERM (Beyond 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Assessment of a wide range of community based care options	<div><div>1</div>Based on short term work to develop multiple options, an independent assessment should be carried out to identify areas needing fine-tuning</div>	MoSVY	UNICEF, 3PC, FCF	2023

Rec. No

9

Adequate foster care financing to implement legislative and policy framework

ST Work towards budget allocation for national foster care system

MT Encouraging civil society actors to incorporate activities that will ensure sustainability through social enterprises, including through foster families

LT Develop a Government owned foster care system, with outsourcing if necessary
Budget allocation for national foster care system including normative allowance

The effective implementation of the National Plan of Action and foster care specific legislation will require in the **short term** significant commitment from Government in terms of budget allocation. Whilst immediate budget allocation may not be feasible, the government should be immediately working towards adequate budget allocation within the government that can be implemented in the long term. As in all countries where de-institutionalisation has been planned and implemented, such as Australia, Azerbaijan, Central Asia, Turkey and US, cost implications must be considered⁹⁸ (see also Rec. No 1). Professionals, families and children will all have to be adequately prepared. Ideally, foster families should likewise receive remuneration for their incurred expenses and services. Paying a fee for the service, including salary and health/pension insurance can result in more applicants and higher quality of care.⁹⁹ Yet remuneration should not be the primary incentive for becoming a foster family.¹⁰⁰

98 Building and Reforming Child Care systems in Central Asia, Azerbaijan and Turkey Second Central Asia Child Protection Forum, Report , Bishkek, Kyrgyzstan 12—14 May 2009, p28-32, www.unicef.org/ceecis/Report_CP_Forum_Bishkek_Final_11_Aug.pdf, Foster Care payment US: www.childtrends.org/wp-content/uploads/2013/04/Foster-Care-Payment-Rate-Report.pdf, Australian Government Financial Support for Foster Families, www.fostercare.org.au/docs/afca_centrelink.pdf.

99 Madeleine Tarse, Love Fostering – Need Pay, a UK-wide survey of foster carers about fees, 2010, www.thefosteringnetwork.org.uk/sites/www.fostering.net/files/public/resources/reports/love_fostering_need_pay_0310.pdf , Damien W. Riggs, Paul H. Delfabbro, Economies of Care Remuneration and Recognition in Foster Care, Journal of the Association for Research and Mothering, Volume 10, No1, 2009, www.academia.edu/5418635/Economies_of_care_Recognition_and_remuneration_of_foster_carers

100 For example, in the case of M'lup Russey they receive 20 US\$ paid after each month as a retainer. They get 2.5 US\$ per day for each child for food and other expenses.

To a large degree almost all foster care service providers are dependent on external funding – private and development aid - which can be uncertain. Financial independence and security must be ensured. Only a few of these service providers have implemented measures to ensure financial sustainability, with Friends International leading, for example, through its restaurant and vocational centres. This places Cambodia in a risky situation should funding streams be diverted. Therefore, in the **mid term** we strongly recommend that civil society invest in social enterprises, like day care for children¹⁰¹ and service provision for disabled, elderly and other vulnerable people that can create employment opportunities. In Australia, France and the US thousands of well-regulated home

based family day care providers offer services to children under pre-school age in their own homes.¹⁰² Such activities raise awareness about needs and enables foster parents to work, etc., whilst generating income.

In the **long term**, Cambodia needs effective ownership for a well-functioning child protection system, including budgetary ownership, like in Bulgaria, Romania among other CEE/CIS countries,¹⁰³ Ghana and Tanzania.¹⁰⁴ Government should take the lead in a financially and operationally centralised sustainable system that would allow for the outsourcing of services when necessary. In terms of foster care, this could include considering the payment of normative allowance for carers.

101 National Action Plan on Early Childhood Care and Development 2014-2018, http://planipolis.iiep.unesco.org/upload/Cambodia/Cambodia_Early_childhood_national_action_plan_2014-2018.pdf, „The National Action Plan seeks to increase enrolment and enhance protection for children aged 0 to 6 years, especially children from poor families, indigenous minorities and children with disabilities and prioritize community-based pre-school and home-based early childhood education program”.

102 Home Day-Care Overview www.babycenter.com/0_home-daycare-overview_46.bc, <http://australianhomechildcare.com.au>; European Policy on Early Childhood Education and Care http://ec.europa.eu/education/policy/school/early-childhood_en, http://eacea.ec.europa.eu/education/eurydice/documents/thematic_reports/191EN.pdf.

103 Mapping Child Protection Systems in the EU Financial Resources and Budget Allocation <http://fra.europa.eu/en/publications-and-resources/data-and-maps/comparative-data/child-protection/budget-allocation>.

104 Building a national child protection system in Ghana: From evidence to policy and practice www.unicef.org/protection/files/Ghana_CP_system_case_study.pdf; Building a holistic child protection system, step by step, in the United Republic of Tanzania http://www.unicef.org/protection/files/Tanzania_CP_system_case_study.pdf.

Adequate foster care financing to implement legislative and policy framework

SHORT TERM (2018)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Initiate work on Budget allocation for national foster care system, including normative allowances	<div><div>1</div>Work with Childonomics (Rec. No 1), UNICEF's Benchmarking work¹⁰⁵ and other research initiative to promote political willingness for national budget.</div> <div><div>2</div>Calculate costs of varied forms of care and required resources/reallocation.</div> <div><div>3</div>Plan costs of all forms of suitable care including normative allowances for foster care.</div> <div><div>4</div>Develop advocacy strategy with Ministry of Finance.</div>	MoSVY and Ministry of Finance	UNICEF, 3PC, FCF	2018 ongoing to 2023

MEDIUM TERM (2019 - 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Encourage sustainability of CSO service providers	<div><div>1</div>Undertake needs analysis of service provision gaps in the community that could be fulfilled by social enterprises.</div> <div><div>2</div>Design and support social enterprise, non-profit forms of service provision.</div> <div><div>3</div>Develop home and centre based local services, like day care, ECEC, meals on wheels, etc.</div> <div><div>4</div>Provide training, seed money and support etc. to small businesses.</div>	MoSVY	UNICEF, 3PC, FCF, local business community	2019 ongoing

105 https://www.unicef.org/protection/files/UNICEF_CP_Benchmark_proposal_integrated_final_report_rev.pdf

LONG TERM (Beyond 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Develop nationwide foster care system	<div><div>1</div>Develop national accreditation system for foster care organisations.</div> <div><div>2</div>Set up a supervisory, monitoring, evaluation system.</div> <div><div>3</div>Ensure budget allocation for foster care programs including all elements from recruiting to leaving care.</div>	MoSVY	UNICEF, 3PC, FCF	2023 ongoing
Introduce normative allowance to cover needs of children and remuneration for foster parents	<div><div>1</div>Calculate costs of the needs of children, depending on their age and capacity.</div> <div><div>2</div>Consider normative allowance structures used by CSOs as well as in other countries that could be helpful.</div> <div><div>3</div>Agree on normative allowance for Cambodia (children and carers).</div>	MoSVY and Ministry of Finance	UNICEF, 3PC, FCF	2023

Rec. No

10

Equip professionals to support foster carers in care-giving role

ST

Centralisation of existing training for foster care professionals
Development of standardised curricula for foster care professionals

MT

Training to be delivered via professional mobile teams

LT

Development of vocational training

In addition to the umbrella recommendation (see Rec. No 3 - Training), targeted training for professionals working with foster families is essential. We were encouraged to see that all foster care service providers had internal training activities, albeit of diverse content and quality. Most promising is the occurrence of joint training sessions, such as those organised by 3PC and FCF partners, which we note promisingly includes government actors in some instances.

Nevertheless, standardised training is lacking, with no minimum requirements applicable to all. We strongly recommend in the [short term](#) the centralisation of existing training in order to develop comprehensive curricula for all care professionals. This could be done as part of the inventory of all foster care providers (Rec. No 8). For example, professionals need to be trained on assessing the individual child’s differing developmental needs (health, education, emotional, social, cultural and spiritual) as well as the completion of standard forms designed to capture this information in a uniform manner. Whilst the main elements would be applicable to all, the training should include the possibility of adaptation to each

local context. The benefit of such training would be the promotion of a uniform approach and facilitate relevant data collection to be fed into the national database (see Rec. No 2). The development of standardised training could be spearheaded by Cambodia's Royal University in Phnom Penh and the governmental National Institute of Social Affairs, with technical assistance from existing civil society actors led by MoSVY.

In the **mid term** such training and curricula could be disseminated through mobile professional teams (see Rec. No 4 - Mobile team "child friendly justice"). Currently there are several local community members, village chiefs, CCWCs, care workers, and authorities, who require information and skills in providing adequate assistance. The professional mobile teams would create opportunities for information sharing, raising awareness among locals and integrating information/skills into existing community care work. As community

nurses/village health support groups exist in each province they could also be upskilled to provide assistance. As a priority, the mobile teams could build on the work of Social Services Cambodia and Save the Children who are identifying two professionals as alternative care focal points by province. These focal points could become master trainers, working in pairs with an experienced foster carer.¹⁰⁶ It will also complement Save the Children's community-based program training local community members and supporting parents to enhance their capacities.¹⁰⁷

In the **long term** we strongly recommend the implementation of post-secondary training for workers in child welfare and protection as well as vocational training, including CCWC members. Social work assistant programs are available in many countries and can be adapted to local needs and circumstances¹⁰⁸ (See Rec. No 3 Training).

¹⁰⁶ See for example, www.cwla.org/pride-training/.

¹⁰⁷ Strengthening community systems for child protection https://cambodia.savethechildren.net/sites/cambodia.savethechildren.net/files/library/Brochure_A5_Parenting_FIN_LR2_0.pdf.

¹⁰⁸ Good examples of training and employment opportunities for social assistants: www.hotcourses.com/courses-by-subject/Safeguarding-Children-Course-CPD-Accredited-courses/56621300/; www.hotcourses.com/courses-by-subject/Safeguarding-Children-courses/56642736/; www.psychologyschoolguide.net/social-work-careers/how-to-become-a-social-work-assistant/; <http://collegemouse.com/jobs/how-to-become-a-social-work-assistant.html>; <https://nationalcareersservice.direct.gov.uk/advice/planning/jobprofiles/Pages/SocialWorkAssistant.aspx>; <https://collegegrad.com/careers/social-and-human-service-assistants>. Articles, books on practices on social work practices: Joe C. B. Leung, The emergence of social assistance in China, Department of Social Work and Social Administration, University of Hong Kong, International Journal Of Social Welfare, 2006, v. 15 n. 3, at 188- 198; <http://hub.hku.hk/bitstream/10722/54334/1/133645.pdf?accept=1>; Professional Social Work in East Africa: Towards Social Development, Poverty (Ed: by Spitzer, Helmut, Twikirize, Janestic M.), Fountain Publishers, 2014, Good Practices in Social Service Delivery in South Eastern Europe (ed: Elaine Fultz, Martin Tracy), ILO, Geneva, 2004, www.ilo.org/wcmsp5/groups/public/---europe/---ro-geneva/---sro-moscow/documents/publication/wcms_344663.pdf; Manohar Pawar, Political commitment needed – community social work in the developing countries: Social Work Practice With Local Communities in Developing Countries, Imperatives for Political Engagement, <http://sgo.sagepub.com/content/4/2/2158244014538640>.

Equip professionals to support foster carers in caregiving role

SHORT TERM (2018)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Inventory of all foster care training	<div><div>1</div> Inventory of all existing training.</div> <div><div>2</div> Identify aspects that should be standardised and where gaps exist.</div> <div><div>3</div> Develop minimum training for all foster care service providers.</div>	MoSVY	UNICEF, 3PC, FCF	2018
Set up accreditation system for foster care providers	<div><div>1</div> Undertake training sessions.</div> <div><div>2</div> Evaluate and accredit service providers who have complied with training requirements.</div>	MoSVY	UNICEF, 3PC, FCF	2018
Introduce curricula for professionals working with foster families	<div><div>1</div> Evaluate training.</div> <div><div>2</div> Improve and fine tune training.</div> <div><div>3</div> Consider mandatory training (e.g. via courses, hours etc.).</div>	MoSVY	UNICEF, 3PC, FCF	2018

MEDIUM TERM (2019 - 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Delivery of standardised training	1 Development of national roll-out plan for standardised training	MoSVY	UNICEF, 3PC, FCF	2019-2020
	2 Use of mobile of teams to deliver training initially			
	3 Integrated standardised training as part of national reforms			

LONG TERM (Beyond 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Set up vocational training (Rec. No 3)	<div><div>1</div><div>Develop vocational training for foster parents and professionals in specialised topics (e.g. children with special needs, complex needs, child abuse and neglect, cybercrime etc.).</div></div> <div><div>2</div><div>Provide vocational training to local professionals, CCWC members etc.</div></div>	MoSVY	UNICEF, 3PC, FCF	2023 ongoing

Rec. No

11

Foster carers -
adequate evaluation,
preparation and
follow up support

ST

Rapid assessment of operating procedures of each foster care service provider in Cambodia
Building on the work of civil society actors as well as other relevant international programs

- a rigorous standardised system of evaluation and authorisation of foster carers should be implemented
- targeted support services for foster carers should be developed

MT

Establish a pool of qualified foster carers
Incorporation of minimum standards, recruitment, placement policy and reintegration measures into the new legislation on child welfare and protection.

LT

Create an environment where foster care is accepted through awareness raising activities
Establish a framework for considering national adoption in long term foster care cases

Professionals should be equipped to evaluate and authorise potential foster carers, as well as to provide the necessary support to fulfil their caregiving roles (see Rec. No 10). Foster carers should be “selected, qualified, approved and supervised for providing such care” (UN Guidelines). To date each civil society service provider has its own internal procedures for evaluation and authorisation, again of varying quality. A rapid assessment of operating procedures of each foster care service provider as part of the inventory of foster care providers (Rec. No 8) is needed to identify feasibility and promising practices as well as possible gaps, when considering international standards in the [short term](#). Such an assessment will also provide the government with a more accurate picture of how widespread foster care service provision is given it seems not all are accredited.

Based on this rapid assessment and building on existing promising practices within Cambodia and relevant international examples, a rigorous standardised system of evaluation and authorisation of foster carers should be implemented. Minimum standards for assessment, training, placement decision and supervision of foster parents should, in particular, build on promising practices of existing service providers, such as Cambodian Children’s Trust, Children in Families, Friends International and M’lup Russey. Such standards must cover different skills required by different types of foster care such as, inter alia, emergency, short term, long term and therapeutic foster care.

Likewise, it is essential that professional support be provided to foster carers based on existing curricula¹⁰⁹ and international promising practices.¹¹⁰ Foster families and children living in foster homes need the same type of support as other members of the community - health, education, social services, etc. They also need targeted support, as in many cases children in their care may have specialised needs due to previous trauma, neglect, abandonment, injuries, illness, etc. (see Rec. No 4 and Rec. No 5 - primary and secondary prevention).

As discussed, in order to implement the existing reintegration and deinstitutionalisation strategies, a pool of foster parents is essential, to be developed in the **mid term**. In other words, families adequately prepared to accept children in accordance with the placement needs with proper matching system in place. Whilst Children in Families has a small pool of two to three foster families in waiting, the majority of service providers do not. In practice it appears that calls for foster carers are made through local channels, such as the CCWC, only when a child is in need. Once the most appropriate family is selected the applications of others potential foster carers are not considered for a potential pool. A pool could provide respite care to existing foster families, with the added benefit that they can be monitored and supported before children are placed into their care.

Where foster families are ready to accept children, it provides an opportunity to safely match children and families (see Rec. No 18 - On importance of matching in adoption). As part of matching, regulations on foster care should include the maximum geographical distances between biological and foster families to facilitate regular contact between the child and his/her family members, provided it is in their best interests. We note that FCF intends to pilot alternative care panels through IOM, who will have a matching function and the benefit of multiple independent eyes. We have some concerns about lack of government ownership and its composition, which could include persons

with potential conflicts of interest such as an accredited adoption body. It is yet to be seen how a child would participate, as well as how dubious cases, falsification of documents and corruption would be handled.

Once matched, foster carers need to be supported and have the placements regularly reviewed by DoSVY at intervals suitable to the needs and age of each child. In the case of M'lup Russey, they visit FC families once a month. This can prevent burn out and help identify any special services needed for children with complex issues. It requires trained helpers and access to different forms of information, like the suggested national hotline, media programs, etc. In cases of placement breakdowns, procedures must be in place to avoid multiple placements.

The successful placement of children in foster care requires a supportive environment - neighbourhood, school, etc. Therefore, in the **long term** we recommend there be programs raising awareness about fostering. This could be part of recruitment programs, as well as informing communities and local helping professionals about foster care and the importance of fostered children being accepted locally. However recruiting and keeping suitable- "good enough" foster families is not an easy task. We recommend the strategies implemented by CoramBAAF,¹¹¹ including programs to recruit families that are willing to adopt children with special needs, and peer networking groups.

In the **long term** a framework should be established for considering national adoption for long term foster care cases, when it is in the best interest of the child. In such cases domestic adoption should be facilitated as a permanent solution, as described in the adoption section of this report (see Section 0). It may be the case that local adoptive families may need additional support, including financial, that is already offered to foster families.

109 Friends International and 3PC Foster Care, <http://mithsamlanh.org/download/fostercare.pdf> and KAP Survey, <http://3pc-cambodia.org/wp-content/uploads/KAP-on-Foster-Care-Report-Finalized.pdf>.

110 Maja Laklija : Foster Care Models in Europe, 2011, supporting foster parents, http://www.bettercarenetwork.nl/dl-17382-1-37371/download/pleegzorgmodellen_in_europa.pdf at 24-30.

111 <http://corambaaf.org.uk/info/fostering#rec>.

Foster carers - adequate evaluation, preparation and follow up support

SHORT TERM (2018)				
What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Rapid assessment of operating procedures of the current service providers in Cambodia	<div><div>1</div> Inventory of all existing operating procedures.</div> <div><div>2</div> Assessment and evaluation of all existing operating procedures.</div> <div><div>3</div> Identify procedures to be streamlined and gaps in procedures.</div> <div><div>4</div> Draft national operating procedures.</div>	MoSVY	UNICEF, 3PC, FCF	2018
Standardised system of assessment, authorisation, monitoring of foster carers	<div><div>1</div> Identify existing practices for selection, assessment, training, placement and supervision of foster carers.</div> <div><div>2</div> Develop minimum standards for all foster care types (emergency, temporary, long term, therapeutic, etc.)</div> <div><div>3</div> Disseminate minimum standards to all stakeholders, professionals working in other sectors (e.g. health, education, law enforcement, justice system etc.).</div> <div><div>4</div> Include standards in national legal framework.</div> <div><div>5</div> Train all relevant actors on standards.</div>	MoSVY	UNICEF, 3PC, FCF	2018 ongoing

MEDIUM TERM (2019 - 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Establish pool of qualified foster carers	<div><div>1</div>Register all assessed and trained foster carers to be included on waiting for placement of a child (pool of carers).</div> <div><div>2</div>Hold regular meetings with the prospective foster parents to update their knowledge and skills.</div> <div><div>3</div>With close supervision use pool as respite carers for already operating foster families.</div>	MoSVY	3PC and FCF	2019-2023

LONG TERM (Beyond 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Develop supportive environment for foster care	<div><div>1</div>Introduce campaigns to recruit more foster parents.</div> <div><div>2</div>Develop awareness raising about needs of children in foster care.</div> <div><div>3</div>Organise national and regional seminars on different areas of. alternative care, including foster care</div> <div><div>4</div>Consider a regional conference on alternative care.</div>	MoSVY	UNICEF, 3PC, FCF	2023 ongoing

Rec. No

12

Children - adequate evaluation, preparation and follow up support

ST

Assessment of individual needs of children including consideration of his/her views
Develop specific foster care services for children with special needs

MT

Introduce robust preparation services for children, effective leaving care system and operative complaint mechanism

LT

Independent assessment of foster care system and how it meets children’s needs

A comprehensive assessment of the individual child’s needs is necessary (see Rec. No 7 - Gatekeeping). For those children entering the alternative care system this assessment task in practice usually falls to civil society. In cases where a child requires placement in a residential care institution, they will have a written authorisation by the CCWC, approved DoSVY and certified by MoSVY according to the National Action Plan. It appears DoSVY have a purely administrative function.

In assessing the individual child’s needs, his or her views should be given due consideration and their active participation be encouraged in all phases of the procedure. This is a **short term** priority. Once foster care is deemed suitable for the child, effective preparation services should be developed.¹¹² Children leaving residential care institutions to be placed in family based care settings need adequate support, tailored to their individual needs and properly followed. CCT has been conducting a Family-Based Care Model that can be extended and mainstreamed in Cambodia.¹¹³

In the framework of a robust foster care system, specific foster care services for children with special needs should be an immediate priority (see Rec. No 5 - Respite care). This issue is to be covered in the capacity development plan currently being

112 <http://fosteringandadoption.rip.org.uk/topics/matching>.
113 www.cambodianchildrenstrust.org/family-based-care-model.

discussed with MoSVY, UNICEF and ISS. The KAP Survey conducted by 3PC in 2015¹¹⁴ demonstrated the understanding of the need for different types of foster care provisions among those organisations and care takers, who have experience in Cambodia with foster care. 76% of respondents in the survey agreed that children with special needs could be placed into foster care. Both national and international experiences show difficulties in the placement in foster care of children with special needs for example, children with disabilities, refugee or migrant children, and sexually exploited or trafficked children. This is especially the case in situations where there is no proper support system, such as respite care and local community support.

In the **mid term** an effective leaving care system should be introduced. Preparation for leaving care is acknowledged and exercised by several NGOs working in Cambodia. Friends International

is a good example of leaving care preparation, providing counselling, special training and vocational education to prepare young people for earning a living, as well as half way houses to facilitate independence.¹¹⁵ In addition an operative complaint mechanism should be developed. In the Policy for Alternative Care for Children in Cambodia there is only one avenue for complaints by children, in adoption cases. Information on available hotlines, contact persons, designated members of staff, independent monitors, social workers, or members of the community can aid children in seeking help if necessary. New Zealand and the UK government provide examples of comprehensive complaint systems.¹¹⁶

In the framework of a robust foster care system, an independent assessment of the foster care system with respect to meeting children's needs should be undertaken in the **long term** (see Rec. No 8).

114 KAP Survey by 3pc : Knowledge, Attitude and Practice Survey on Foster Care, <http://3pc-cambodia.org/wp-content/uploads/KAP-on-Foster-Care-Report-Finalized.pdf>.

115 <https://friends-international.org/in-cambodia>.

116 Recommendations on how Child, Youth and Family can take a Child-Centred Approach to Complaints Resolution, www.occ.org.nz/assets/Uploads/Reports/Child-rights/Review-of-the-Child-Youth-and-Family-Complaints-Resolution-Policy-and-Procedure.pdf and Getting the Best from Complaints, www.gov.uk/government/uploads/system/uploads/attachment_data/file/273895/getting_the_best_from_complaints.pdf. See also ratification of the 3rd Optional Protocol on Communication Procedure of the UNCRC could also help learning more and setting up a national system, www.childrightsconnect.org/connect-with-the-un-2/op3-crc.

Children - adequate evaluation, preparation and follow up support

SHORT TERM (2018)				
What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Individual assessment of children	<div><div>1</div> Prepare documentation system to assess individual needs of children to prepare individual placement plans and ongoing support.</div> <div><div>2</div> Assess children’s needs in RCIs (see Rec. No 16).</div>	MoSVY, MoH and Ministry of Education	UNICEF, 3PC, FCF	2018
Encourage child’s participation in case planning (see Rec. No 6)	<div><div>1</div> Develop training for professionals on child friendly procedures.</div> <div><div>2</div> Draft child friendly material about their rights, drawing on existing material (e.g.: representation, complaints etc.).</div>	MoSVY, MoH and Ministry of Education	UNICEF, 3PC, FCF	2018
Develop foster care for children with special needs	<div><div>1</div> Allocate additional resources for foster parents caring for children with special and complex needs.</div> <div><div>2</div> Develop specialised training and supervision for them.</div> <div><div>3</div> Provide support and back up services both for children and foster carers.</div> <div><div>4</div> Allocate needed equipment and facilities.</div> <div><div>5</div> Assess local provisions to ensure access to health and education services.</div> <div><div>6</div> Ensure respite care is available (see Rec. No 11).</div>	MoSVY, MoH and Ministry of Education	UNICEF, 3PC, FCF	2018 ongoing

MEDIUM TERM (2019 - 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Introduce national leaving care policy	<ol style="list-style-type: none"> 1 Inventory of existing services for care leavers. 2 Identify promising practices and gaps. 3 Develop national services for care leavers. 4 Train service providers and professionals to provide after care and follow up services. 	MoSVY	UNICEF, 3PC, FCF	2019 ongoing
Establish nationwide complaint mechanism	<ol style="list-style-type: none"> 1 Inventory of existing complaint mechanisms. 2 Identify promising practices and gaps. 3 Develop national complaint mechanism and consider introducing an ombudsman for children. 4 Prepare professionals and volunteers to receive complaints from children. 5 Complaint procedures to be disseminated to children and actors. 6 As part of training, determine how to prevent and respond to cases of abuse. 	MoSVY	UNICEF, 3PC, FCF	2019-2023

LONG TERM (Beyond 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Independent assessment of foster care system	<ol style="list-style-type: none"> 1 As part of the independent assessment of the alternative care system (Rec. No 8) particular attention should be on the functioning of the foster care system 	MoSVY, MoH and Ministry of Education	UNICEF, 3PC, FCF	2023 ongoing

04

Adoption: findings & capacity development recommendations

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States should take, as a matter of priority, appropriate measures to enable the child to remain in the care of his or her family of origin.¹¹⁷ When this is not possible, States should do their utmost to find another appropriate and permanent solution, including kinship care, long term foster care when in the best interests of the child (see section 3), and adoption. The best interests of the child shall be the paramount consideration in adoption. The adoption of a child should be only authorized by competent authorities who have determined that the adoption is permissible.¹¹⁸ Adoption encompasses a range of complex procedures that should meet the needs of children, be efficient, and timely.

In Cambodia adoption is regulated by a number of laws such as the Civil Code, Law on Non-Litigation Civil Procedure, 2009 Law on Intercountry Adoption; regulations (such as the Prakas)¹¹⁹ and other decisions (2016 Explanatory Note on Domestic Adoption). The key recommendation at this point is to implement the existing and quite developed legal framework, although as mentioned below some gaps need to be addressed. The government should provide the necessary human and material resources and training to the professionals who will implement the legal provisions (see Rec. No 1).

This section of the report presents general recommendations applicable to both domestic and intercountry adoptions, then applicable to domestic adoptions alone, and finally applicable solely to intercountry adoptions.

¹¹⁷ Preamble of the 1993 Hague Convention.

¹¹⁸ Art. 21 UNCRC.

¹¹⁹ See 0.

Enhance the internal co-operation of the different Ministries that take part in the adoption procedure, in particular MoSVY and the Ministry of Justice

ST

Improve institutional cooperation through further multidisciplinary training
Designate in each of the regions a judge who will act as the focal point for adoption matters

MT

Consider the accession to the 1961 Hague Convention on Apostille

LT

Enhance cooperation through the National Child Protection Commission

Many different authorities are involved in an adoption procedure. In order to ensure the best interests of the child is the paramount consideration, it is of the utmost importance that all authorities, bodies and professionals are well coordinated and cooperate on a daily basis.

There are clear examples of cooperation between different Cambodian Ministries, such as the workshop organised by MoSVY following this teams' mission and the presentation of the Explanatory Note on Domestic Adoption. However, these efforts need to be strengthened and inter-institutional cooperation in Cambodia improved. In particular, domestic adoption should not be seen as a matter for the MoJ, and intercountry adoption as a matter for the MoSVY. The team recommends that, in the **short term**, this perceived division of responsibilities and method of working is improved. Both Ministries have an important voice during many stages of the adoption procedure. Namely, the declaration of adoptability of the child, and the adoption decision (both at the domestic and intercountry level). As the MoSVY is closest to the child and should prepare all the background information for these important decisions, and the judge should, as an independent and qualified authority, take the final decision based on the information and counselling provided by MoSVY.

We recommend further joint training sessions with MoSVY authorities, staff and judges be organised including relevant Ministries, such as Health. Such joint activities provide distance and perspective and allow a comparison with their own systems of values and professional culture. The organisation of common activities would encourage interaction between judges and staff of authorities responsible for adoption. Such practices can prove fruitful and promote faster assessment of files that are blocked simply due to a difference of opinion (see also Rec. No 3 - Training)

In the **short term**, the representatives of both the MoSVY and the MoJ could read and comment on this report, participate in the presentation and round table about this report, and agree on a common action plan.

For the **short term**, it is envisaged that the MoJ designate a small number of judges to be the focal point for adoption matters in the capital and different regions. These judges could be specially trained on

domestic adoption. One benefit of such a system is to minimise the potential for illicit practices, including the falsification of documents, which was an ongoing concern for many stakeholders. Some noted that one possible way of overcoming the problem of falsification of documents would be that the Government consider acceding to the 1961 Hague Convention on Apostille.¹²⁰

In the **mid/long term**, the National Child Protection Commission (see Rec. No 1) could be a key body to improve co-operation between the different Ministries. For example, in Lithuania there is a similar Council (composed of vice-ministers of the Ministry of Social Security and Labour, Ministry of Education, Ministry of Justice, Ministry of Interior Affairs, and Ministry of Health as well as representatives of NGOs), which has helped enhance co-operation and coordinate activities.¹²¹

¹²⁰ For more information, see www.hcch.net/en/instruments/specialised-sections/apostille.

¹²¹ The last decree of the Minister of Social Security and Labour: <https://e-seimas.lrs.lt/portal/legalAct/lt/TAD/df71a8a066e511e5b316b7e07d98304b?jfwid=-ji9gt26lu>
Members of the commission are Vice Ministers of the Ministry of Social Security and Labour; Ministry of Education; Ministry of Justice; Ministry of Interior's Affairs; representatives from other public institution's: department of family and community, State child protection and adoption service, municipal child rights protection service; representative of Pupil Parliament; Child Ombudsmen; representatives of 6 NGO's (like Save the children and etc.) All information about its activities and protocols – <http://www.socmin.lt/lt/veikla/tarybos/tarpzinybine-vaiko-geroves-komisija.html>

Enhance the internal co-operation of the different Ministries that take part in the adoption procedure, in particular MoSVY, Ministry of Justice and Mol

SHORT TERM (2018)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Improve institutional cooperation	<ol style="list-style-type: none"> 1 Disseminate report between relevant Ministries. 2 Organise round table to discuss report and agree on a common action plan. 	MoSVY, MoJ, Mol	UNICEF	2018
Multidisciplinary training	<ol style="list-style-type: none"> 1 Undertake joint training session with MoSVY, authorities, staff, judges, relevant Ministries on action plan. 2 Undertake annual joint training sessions with relevant Ministries, CSOs and other services providers on agreed priorities. 	MoSVY, MoJ, Mol	UNICEF, 3PC and FCF	2018

MEDIUM TERM (2019 - 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Specialised judges for the adoption matters	<ol style="list-style-type: none"> 1 Designate a small number of judges to be focal point for national adoption. 2 Training focal point judges (alternative care, domestic adoption and ICA). 	MoJ	MoSVY, UNICEF, 3PC and FCF	2019 ongoing
Minimise potential for illicit practices	<ol style="list-style-type: none"> 1 Workshop on benefits of 1961 Hague Convention on Apostille. 2 Consider steps to accede to 1961 Hague Convention on Apostille. 	All relevant Ministries	HCCH	2020

LONG TERM (Beyond 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Empowering National Child protection Commission	<ol style="list-style-type: none"> 1 Agreement among all Ministries about role of Commission. 2 Set up a MoU/Ministerial Note on role of Commission to enhance cooperation. 	All relevant Ministries	Commission, UNICEF	2023 ongoing

Establish clear criteria to determine if an adoption is domestic or intercountry (habitual residence)

Define when foreigners are considered permanent residents in Cambodia.

Publicise the requirements to determine if foreign PAPs can adopt or not in Cambodia, including the prohibition against foreign PAPs who are not permanent resident in Cambodia adopting children domestically.

ST

Receiving States should not recognise such adoptions Training of judges and authorities, in particular at the local level

Study the feasibility of having the “habitual” residence as the connecting factor in deciding if an adoption is domestic or intercountry (as opposed to “permanent” residence) in the legislation.

MT

Ongoing training of judges

It is important to determine if an adoption is domestic or intercountry, as some of the adoption procedures are different. This is particularly relevant in cases where foreigners live in Cambodia and undertake an adoption there. For example, the PAP’s habitual residence will have specific consequences for them. It will determine the State where they should apply and the State that will evaluate if they are suitable and eligible to adopt.

According to the 1993 Hague Convention, an adoption will be considered intercountry when the child and the PAPs are habitually resident in different Contracting States. The 1993 Hague Convention does not include rules for determining when the conditions for habitual residence exist. Rather, habitual residence is a “question of fact” for the judicial or administrative authorities of a State to decide. Habitual residence is generally treated as a factual concept denoting the country that has become the focus of the individual’s domestic and professional life.¹²² It will be that country which will be required to comply with many of the obligations imposed by the Convention’s rules, such as the preparation of the reports required by Articles 15 and 16 (as opposed to the country of nationality, which may not be able to do so).

122 See Guide to Good Practice No 1, para. 490. PAPs would likely be considered habitually resident in a country based on: the amount of time they have lived in that State; the fact that they have indefinite employment contracts in that State; and their intention to remain living there for the foreseeable future.

The Law on Intercountry Adoption defines intercountry adoption as based on the permanent residence of the child and the PAPs.¹²³ The 2016 Explanatory Note on Domestic Adoption clarifies that domestic adoption may be applied only to foreigners living in Cambodia who are recognized by Cambodian law as “permanent residents”. However, there is no clarification on how “permanent resident” is defined in the Explanatory Note. Interestingly, the Law on Nationality states that foreigners can obtain Cambodian citizenship after 3 or 7 years of continuous residence depending on the case (or in exceptional cases with no time limit).

Currently, some foreigners who are not permanent residents in Cambodia take a child under their care, and then after some time, apply to the Courts to adopt him or her through domestic adoption. This is done without following established procedure in the Cambodian law. Therefore, there is rarely information on how the child was identified as needing care, involvement/consent of biological family, and matching, etc. In addition, there are concerns about the unknown origins of the child and the veracity of documents. This poses serious problems.

In the [short term](#), the government should clearly define when foreigners are considered permanent residents in Cambodia.

The new provisions in the 2016 Explanatory Note prohibits foreign, non-permanent resident PAPs in Cambodia, from adopting domestically. It provides a useful tool for avoiding the cases of domestic adoption of children by foreigners who are not habitually resident in Cambodia. This new policy should be clearly publicised by a highlevel authority, with an emphasis on the need to stop this practice. In addition, the authorities of the State of nationality and/or habitual residence of the PAPs should not recognise domestic adoption decisions taken without following the appropriate procedures in Cambodia. Foreign Embassies should implement a common approach with respect to such cases.

According to the 2016 Explanatory Note, foreigners who live temporarily or habitually in Cambodia and want to adopt a Cambodian child, should do so through an intercountry adoption (following the Law on Intercountry Adoption), as there is a likelihood that the child will be moved out of Cambodia. This last rule is contrary to the 1993 Hague Convention, to which Cambodia is party, as the adoption could not be considered as intercountry if the PAPs and the child are habitually resident in the same country, Cambodia. Foreigners who have habitual residence in Cambodia should be able to apply for adoption there through domestic procedures. These adoptions should not be handled as intercountry adoptions.

I | 123 Art. 3.

Specifically, this rule is potentially problematic as many receiving States will not be in a position to decide on the eligibility and suitability of PAPs not habitually resident in their State. Therefore, receiving States will not be permitted by their laws to take part in the adoption procedure. The Explanatory Note should not regulate matters that are not under the Cambodian jurisdiction. The Explanatory Note should be amended so as to avoid giving false expectations to PAPs and creating problems for the adopted child. In order to prevent potential misuse, the same requirements should be laid down for foreigners residing in Cambodia who apply for approval as a foster family.

Another consequence of the above mentioned rule is that some foreign PAPs with long standing habitual residence in Cambodia will not be able to apply for adoption domestically (forbidden by the Explanatory Note), nor intercountry (as they will not be considered habitually resident in their State of nationality, and the latter State may be unable/unwilling to permit the adoption as it will be in conflict with many of the obligations imposed by the Convention's rules). This can be a disadvantage

for adoptable children, as these PAPs know Cambodia, its culture and way of life. Therefore, they could provide better care to the child. Cambodia should study a way to ensure that PAPs habitually resident in Cambodia can apply for adoption domestically with thorough safeguards in place (see Rec. No 20).

For the **medium term**, it is key to train judges and others authorities and bodies involved in the adoption procedure on when to consider an adoption domestic or intercountry. Local judges and authorities may be unaware of the 1993 Hague Convention and may process an intercountry adoption as a national adoption, or vice versa. Training will help prevent such cases.

The team recommends that in the **short term** Cambodia determine if an adoption is domestic or intercountry based on the habitual residence (and not the permanent residence) of the child and the PAPs. Likewise, Cambodia should study the feasibility of making a change in its legislation that will ensure that the 1993 Hague Convention is properly followed in this regard.

Establish clear criteria to determine if an adoption is domestic or intercountry (habitual residence)

SHORT TERM (2018)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Set definition and requirements for permanent residents in Cambodia	<ol style="list-style-type: none"> 1 Define when foreigners are considered permanent residents. 2 Share this part of the Report with Foreign Embassies. 3 Publicise the 2016 Explanatory Note prohibiting foreign, non-permanent resident PAPs in Cambodia from adopting domestically. 4 Inform and train Foreign Embassies, CSOs and other services providers about new provisions and definition. 	MoJ, MoSVY, Ministry of Foreign Affairs	UNICEF	2018
Amend the Explanatory Note	<ol style="list-style-type: none"> 1 Meeting with relevant actors to consider/ agree that same requirements for foreigners residing in Cambodia are applicable as those who apply for approval as a foster family. 	MoJ, MoSVY	UNICEF	2018
Training of judges and authorities	<ol style="list-style-type: none"> 1 Set up regular training sessions in Capital about adoption procedures. 2 Roll out training sessions at regional levels. 	MoSVY, MoJ	UNICEF, HCCH and ISS	2018 ongoing

MEDIUM TERM (2019 - 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Ongoing training of judges and authorities	<ol style="list-style-type: none"> 1 Implementation regular training modules developed in the short term 	MoSVY, MoJ	UNICEF, HCCH and ISS	2019 ongoing
Study the feasibility of having the "habitual" residence as opposed to "permanent" residence in the legislation to determine an ICA	<ol style="list-style-type: none"> 1 Study cases of adoptions granted based on "permanent residency" to see if any limitations. 2 Seek further guidance/technical assistance about benefits of using "habitual residence". 3 If habitual residence is agreed as more beneficial, examine feasibility of making legislative change compliant with 1993 Hague Convention. 	MoSVY, MoJ	UNICEF, HCCH and ISS	2020-2023

Rec. No

15

Declare the adoptability of the child in compliance with international standards, and before matching takes place

ST

Establish and apply clear criteria to declare the child’s adoptability (legal, psycho-social and medical)
Agree who will decide on the adoptability of the child and establish a clear procedure for declaring the child adoptable

MT

Train specialists who will participate in the declaration of adoptability

LT

Carry a pilot project in a few provinces

Any child who may be adopted should be first declared adoptable. The declaration of adoptability is one of the key elements for ensuring that adoption is in the best interests of a particular child. It should be based on legal criteria, as well as medical, psychological and social aspects. Adoptability should be declared regardless of whether the child will be adopted domestically or intercountry (although there may be additional criteria applicable for intercountry adoption).

The Civil Code (Art. 1010) and the Law on Intercountry Adoption (Chapter IV) establish some legal criteria to determine the adoptability of a child, including how the consent of the child (when possible) and that of the birth parents or other authorities and bodies should be given. These criteria are also applicable to domestic adoption.¹²⁴ The Law on Intercountry Adoption requires that the dossier of the child include information about his or her social environment, medical records and adoptability in general. It is clear in the legislation that priority should be given to preservation and reunification efforts with the birth family before adoption takes place.¹²⁵

In addition to the legal criteria, Cambodian authorities should establish clear psycho-social and medical criteria in the **short term**.¹²⁶

124 Prakas on Alternative Care, Art. 28.
125 The principle of subsidiary is well reflected in the legal texts (e.g. Art. 28 Prakas on Alternative Care, Art. 13 Law on Intercountry Adoption). The key issue is to implement the principle in practice.
126 See Guide to Good Practice No 1, supra note 21, Chapter 7.2.

The declaration of the child's adoptability should be founded on evidence-based, accurate, objective and complete information about the individual child. Some information could be found on the recommended database (Rec. No 2). The decision-making process should be clearly set out and include supporting information and evidence, so that all professionals involved in making decisions can see how and why the decision was reached. In order to ensure this, different authorities and bodies need to closely cooperate and share relevant information, in particular regarding preservation and reunification efforts with the birth family, as established in the law. In addition, this would be a way to review the situation of children placed in permanent foster families, and assess if this is the best measure for them, or if there are other options, such as adoption.

In the **short term**, authorities should ensure that the declaration of adoptability is done through adequate and recognised procedures. First, it should be clearly established, ideally with multi-disciplinary professional input, which authority will be in charge of declaring adoptability (e.g., in some countries it is an administrative body such as the director of the capital/provincial department in charge of Social Affairs,¹²⁷ or a judge¹²⁸). Secondly, clear timeframes should be defined to ensure that the decision is taken in a timely manner. The decision about child adoptability should be made as quickly as possible in the best interests of the child, without curtailing any necessary investigation into the child's origins, and respecting the principle of subsidiarity.

The decision on adoptability will be one of the elements that will be included in the dossier of the

child, which should also include evidence/proof of the child's background and family history, efforts regarding family tracing and reunification, the child's state of health, developmental needs of the child, and child's opinion. This dossier will prove important in the future for the child as an adult, in discovering how and why a decision was reached.

In the **mid term**, in order to ensure that adoptability is declared with suitable guarantees, the authorities and professionals, in particular social workers, should have the necessary knowledge, skills and expertise. We recommend that, after criteria and procedures for declaring the child adoptable are established, specialists train a pool of social workers selected to participate in the declaration of adoptability. Training increases cooperation and enables a common understanding between professionals and a common view of cases (see Rec. No 3: Training). Any training should also include the need to counsel and prepare adoptable children for their adoption.

In the **long term**, all children declared adoptable should be included in the register of adoptable children, which should be properly linked with the Database (See Rec. No 2). This will avoid a challenge that the Intercountry Adoption Administration (ICAA) faces today, namely the receipt of completed and accurate files for adoptable children. The database will be a key tool to avoid unnecessary delays in the preparation of the child's file, his or her placement and sharing of information between responsible bodies. Cambodian authorities may wish to plan a pilot project in two provinces to test the criteria and procedures with the newly trained professionals.

¹²⁷ For example, in Colombia it is Colombian Family Welfare Institute (ICBF, www.icbf.gov.co/portal/page/portal/ICBFEn/WhatWeDo/Adoptions), in China it is the Provincial Departments of Civil Affairs and in the Philippines, the Department of Social Welfare and Development (see Country Profiles, www.hcch.net under Adoption section).

¹²⁸ Chile (Family Court) and Peru (see Country Profiles, www.hcch.net under Adoption section).

Declare the adoptability of the child in compliance with international standards, and before matching takes place

SHORT TERM (2018)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Set broad criteria to declare child's adoptability	1 Discuss within relevant Ministries the criteria to declare adoptability including psycho-social and medical criteria. ¹²⁹	MoSVY, MoJ	UNICEF	2018
	2 Establish criteria in either law or Ministerial decree.			
	3 Define procedures for establishing criteria for each child including Ministerial responsibility.			
	4 Define clear timeframes to ensure that the decision is taken in a timely manner.			
	5 Wide dissemination of criteria and procedure among stakeholders.			

MEDIUM TERM (2019 - 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Identify professionals for declaration of the child's adoptability	<div><div>1</div>Identify professionals who can declare child's adoptability (e.g. medical professional, psychologists, social workers).</div> <div><div>2</div>Identify which authority will be in charge of declaring adoptability (ideally with multi-disciplinary professional input).</div> <div><div>3</div>Define clear timeframes to determine adoptability.</div> <div><div>4</div>Set up "test" cases to discuss within an inter-Ministerial meeting to encourage learning/co-operation.</div>	MoSVY, MoJ	UNICEF	2019 ongoing

129 See Guide to Good Practice No 1, supra note 21, Chapter 7.2 and <http://www.iss-ssi.org/images/thematic-facts-sheet/eng/20.Adoptability%20and%20Consent%20doc.pdf>

Comprehensive dossier of adoptable child	<ol style="list-style-type: none"> 1 Set up a roundtable with Ministries, CSOs and other relevant actors to identify/agree what is needed in each child's file (e.g. decision on adoptability, evidence/proof of the child's background and family history, efforts regarding family tracing and reunification, the child's state of health, developmental needs of the child, and child's opinion). 2 Agree on a "model" dossier. 3 Identify/agree on who is responsible for information collection. 4 Identify/agree on who is responsible for supplying this information. 5 Pilot test the criteria/procedures in two regions prior to rolling out. 	MoSVY and MoJ	UNICEF, 3PC and FCF	2019 ongoing
Train relevant actors for agreed responsibilities for declaring adoptability and completing dossier	<ol style="list-style-type: none"> 1 Establish minimum requirements. 2 As a first step, train a pool of social workers to undertake work. 3 Training all authorities and professionals who could be involved in declaring adoptability and completing dossier (including RCI staff, religious institutions). 	MoSVY	UNICEF	2019-2023 ongoing

LONG TERM (Beyond 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Establish register of adoptable children	<ol style="list-style-type: none"> 1 Based on adoptability procedure, ensure all children declared adoptable are included in a specific register. 2 Seek technical assistance to ensure that this register is properly linked with the Database (See Rec. No 2). 	MoSVY and MoJ	UNICEF	2020 ongoing

Rec. No

16

Review the situation of children in care to see if they could benefit from adoption

ST

Review the situation of children in RCIs (including faith based and pagoda based care)
Ensure proper and timely declarations of adoptability of children in need of adoption

MT

Interim measures for children in institutions while domestic adoption strategies are implemented

LT

National review of children in the care system (informal care, kinship care, foster care, small group homes, etc.), using the Tracking Progress Tool

There may be children in the care system whose reintegration into their birth family is not possible, and who may benefit from adoption as a family based permanent care solution. In order to accomplish this, it is necessary to revise and update the files of such children. MoSVY has undertaken some evaluations on the number and characteristics of children in care in five provinces, however to our knowledge, an individual needs assessment of each of these children remain pending (see Rec. No 2). This should ideally build on the 2016 study on alternative care community practices for children in Cambodia, including pagoda-based care by Coram Children’s Legal Centre.

Many children have been placed in RCIs in Cambodia. Delaying permanent family placements for these children runs contrary to the best interests principle. Therefore, the team recommends that in the **short term**, MoSVY establish a clear timeframe for reviewing the cases of children in RCIs. Special attention should be given to children with special and complex needs. MoSVY and other competent authorities, perhaps outsourcing to civil society based on set criteria such as experience and independence, should closely cooperate to prepare and complete the child’s file, gathering information about child background and needs. The MoSVY Commitment Statement on the implementation of the Sub-decree on the management of residential care centres requires all RCI to have case plans for each of the child in their care. MoSVY should follow up to ensure this is implemented and set a system to review the case plans of the children and enter the data in the centralised database (Rec. No 2).

Then MoSVY should as soon as possible analyse and update its current information regarding children in RCIs in these five provinces. For each case a balance need be struck between time spent working toward reintegration of the child to his family of origin, and the need to provide the child with a permanent family solution. States that take decisions on adoptability too quickly without ensuring the necessary safeguards have been complied with can face problems and abuses. Such problems and abuses ultimately can result in the imposition of moratoriums on intercountry adoption, if it is seen that the problems, cannot be coped with.¹³⁰ Conversely, in States that do not take decisions in a timely manner, children may remain in institutions for too long. Domestic adoption should be a priority for children declared adoptable. However, in reality there are often few national adoptive parents. This should not prevent children permanently placed in institutions from having access to a family. A delay in finding solutions for these children is not in the best interests of the child. Therefore, if domestic adoption is not possible, the priority should shift to finding PAPs through intercountry adoption for those children who have been placed in care institutions for long periods of time.¹³¹

In the **mid term**, during the implementation of the strategies to promote domestic adoption (See Rec. No 20), Cambodia could consider using interim measures to encourage intercountry adoption where domestic adoption is not possible. A pilot project for a small number of children in RCIs meeting specific criteria for adoptability could be developed. Otherwise, children who are currently in institutions with an immediate need for a family unfortunately face remaining in the institutions until adulthood.

In the **long term**, we strongly recommend a nationwide census of all children in alternative care, including, for example, foster care, small group homes, pagoda based care and RCIs, and care provided by faith based groups. It is important that the Government has an accurate picture of the needs of children in care in developing its policies. A Tracking Progress Tool,¹³² developed by an interagency group could be one means for collecting such information.

¹³⁰ States that invest adequately time and resources in assessing adoptability of children have had the least occurrence of illicit practices such as the Philippines and South Africa.

¹³¹ For example, in Lithuania there is a 6 month period for finding family in Lithuania. If no family is found in Lithuania, then the authorities should try to find a family through intercountry adoption. In South Africa the period is 60 days, in Belarus it is 6 months and in Ukraine 1 year. This minimum period provides local authorities a time limit to find a domestic family and ensures that the child is not waiting for an indefinite period. The time limit can vary depending on the needs of each country and relaxed in certain cases. Even if these registries with time limits are set up, it is important to ensure that genuine and effective activities are undertaken during the waiting periods, to find domestic solutions. There is no point having a waiting period, if the persons who have access to this list are then not tasked with finding a domestic solution for this child. It should also be said that perhaps a waiting period of 1 year can be considered too long especially for children with specific special needs.

¹³² This is a comprehensive tool for evaluation of the implementation of the UN Guidelines in the different countries, www.bettercarenetwork.org/sites/default/files/Tracking%20Progress%20Initiative%20-%20Monitoring%20the%20Guidelines'%20Implementation.pdf.

Rec. No

16

Review the situation of children in care to see if they could benefit from adoption

SHORT TERM (2018)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Review situation of individual children in RCIs	<ol style="list-style-type: none"> 1 Establish clear timeframe for reviewing cases of all children in RCIs (including faith based and pagoda based care) – see Rec. No 12. 2 Encourage child’s participation in case planning (see Rec. No 6). 3 Based on procedures/responsibilities identified (Rec. No 15) update children’s files in five provinces. 4 Undertake an evaluation of all other children’s needs (outside of five provinces) to determine most suitable outcome for him/her including both options in Cambodia and ICA. 	MoSVY	UNICEF, 3PC and FCF	2018
Declaration of adoptability of children in need of adoption	<ol style="list-style-type: none"> 1 Establish procedure that if national alternatives and domestic adoption is not possible, priority should shift to finding PAPs through ICA. 2 Train relevant actors on these procedures. 	MoSVY	UNICEF	2018

MEDIUM TERM (2019 - 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Interim measures for children in institutions while domestic adoption strategies are implemented	<ol style="list-style-type: none"> 1 Identify a small number of children where domestic adoption is not possible. 2 Ensure adoption dossier is compliant with Rec. No 15. 3 Test ICA procedures with pilot group. 	MoSVY and MoJ	UNICEF, 3PC and FCF	2019 ongoing

LONG TERM (Beyond 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
National review of children in the care system	1 Undertake nationwide census of all children in alternative care, including for example, foster care, small group homes, pagoda based care, RCIs and care provided by faith based groups.	MoSVY	UNICEF, 3PC, FCF	2023 ongoing
	2 Consider Tracking Progress Tool as one means for collecting such information.			

Rec. No

17

Create a register where all adoptable children are included to be integrated into the national database

ST

Create the register, including the necessary forms to register the child

Identify funding for establishing such a register

MT

Train the persons in charge of the register

LT

Include the data of the register on adoptable children in the centralised database for children in care (See Rec. No 2)

A common register of adoptable children is a key tool in implementing the principle of subsidiarity, as it would facilitate initially looking for PAPs at the domestic level and, if no family is found in Cambodia, then facilitating the search for PAPs at an international level who are best placed to respond to the needs of the child.

Whilst the Law on Intercountry Adoption already mentions a register for children who have been determined to be adoptable for purposes of intercountry adoption (Art. 13), we are not aware of its actual implementation.

Based on the existing register for adoptable children in need of intercountry adoption, Cambodian authorities should in the [short term](#) create a register where all children declared adoptable are registered. In most of the cases when a child is declared adoptable, it is not known if he or she will be adopted domestically or intercountry. A common register ensures continuity, and timely further decision-making. Therefore, it is prudent to have a common register maintained by an appropriate authority, such as MoSVY.

This register should be based in the capital but should have links to the different provinces, to facilitate the DoSVY in each of the provinces including in the register any child that has been declared adoptable in that province. Authorities should decide who will host the register in the provinces.

A number of Central Authorities from receiving States have indicated an interest in providing funding to develop such a database. Any pooled resources would have to be managed by an independent body such as UNICEF to avoid any potential conflict of interest.

In the **mid term**, persons proposed to administer the register should be trained to do so, to carefully monitor the length of time that a child is on the register, and to evaluate the operation of the system.

In the **long term**, this register should be included in the nationwide database of children in care (See Rec. No 2). Any change in the status of the child should be updated.

Create a register where all adoptable children are included to be integrated into the national database

SHORT TERM (2018)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Identify funding for establishing a register	<div><div>1</div> Contact Central Authorities from receiving States to confirm funding interest.</div> <div><div>2</div> Set up system so that any pooled resources to be managed by an independent body such as UNICEF to avoid any potential conflict of interest.</div>	MoSVY	UNICEF, HCCH, ISS, Central Authorities from receiving States	2018
Create register where all children declared adoptable are included.	<div><div>1</div> Determine host for register in capital.</div> <div><div>2</div> Determine how information will be regionally collected and centralised.</div> <div><div>3</div> Set up database with external technical assistance if necessary.</div> <div><div>4</div> Plan how register will link with centralised register in Rec. No 2.</div>	MoSVY	UNICEF	2018

MEDIUM TERM (2019 - 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Train persons in charge of the register	<div><div>1</div>Train persons to administer register, to carefully monitor length of time that a child is on the register, and to evaluate system operation.</div> <div><div>2</div>Train actors who will provide information for data entry.</div>	MoSVY and MoJ	UNICEF, 3PC and FCF	2019 ongoing

LONG TERM (Beyond 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Include the data of the register on adoptable children in the centralised database for children in care (See Rec. No 2)	<div><div>1</div>Based on short term planning, link register to nationwide database of children in care (See Rec. No 2).</div> <div><div>2</div>Establish requirements that any change in child's status should be recorded, perhaps through Ministerial note.</div>	MoSVY and Ministry of Technology	UNICEF	2023 ongoing

Rec. No

18

Establish a matching committee in charge of finding the best PAPs for a child (for both domestic and intercountry adoptions)

- ST Establish the matching committee and a clear and transparent procedure
- MT Training of the matching committee
- LT Pilot project

Matching a child’s needs with the qualities of the PAPs is essential for the best interests of the child. The primary consideration in deciding which PAPs should be chosen for a particular child is their ability to meet the needs of that specific child.

Making a good match between an adoptable child and PAPs is a highly skilled task and is vital for both the child and the PAPs. Therefore, it should be done by a multidisciplinary team of child protection professionals not left to the responsibility of an individual or to PAPs,¹³³ preferably specialists in psycho-social fields trained in adoption. In the case of intercountry adoption, it is desirable to invite a lawyer to join the team to ensure that any legal requirements are met. The team should consider the child’s needs holistically, including whether the placement meets the development needs of the child, the child’s views, the parenting skills of the PAPs, and their capacity to meet the concrete needs of the child (see Rec. No 16). Potential matches should be scrutinised by professionals seeking to prevent adoption breakdown.

The matching procedure should not start before the adoptability of the child has been established, and the PAPs have been approved to adopt. The initial matching of PAPs with the child must be done on the basis of a report on the child and a report on the selected PAPs. It is recommended that

133 PAPs should never themselves select the child to adopt (unless it is a relative adoption, but in these cases the adoptability of the child should be properly assessed, and in particular whether there is a need for the child to be adopted, or if the adoption is taking place to respond to a desire of the PAPs).

the search for the best family be started as soon as the child is declared adoptable. Unnecessary delays in finding a suitable family for a child can prove detrimental to the child's welfare and the child's chances of adoption. It should be noted that the Law on Intercountry Adoption¹³⁴ establishes a matching procedure that could be used as a base and expanded to domestic adoption as well.

Nowadays in Cambodia there is no professional matching for domestic adoption. Instead, PAPs appear in front of the judge with the child that they have selected. Such "adoptions" are inherently risky given the lack of gatekeeping mechanisms to monitor how the child was identified by the PAPs and ensure adequate safeguards apply. It is highly recommended that this practice change, and that in the **short term**, 1) a matching committee be created composed of experts from different fields (a multidisciplinary team); and 2) clear procedure for matching be established.

Regarding the composition of the matching committee, Cambodia could follow the experience of Burkina Faso where the multi-sectorial committee is composed of the Director General on Child Protection, the Director on Adoptions, one representative of justice, health, the association of RCIs and a psychologist.¹³⁵ As discussed in the foster care section, we are aware that FCF will be piloting an alternative care panel that will also be tasked with undertaking matching in adoption matters. Whilst such a system has its benefits, we believe that any committee must be Govern-

ment led and safeguards must be in place to avoid conflicts of interest as well ensure capacity at a regional level.

Regarding matching procedure, Cambodian authorities could explore the merits of a matching committee in charge of both domestic and intercountry adoption.¹³⁶ A joint matching committee will facilitate the search for the best family for the child occurring in the shortest time, as the professionals will be aware of the files of the child and all PAPs. They will assess the developmental, social, cognitive, and cultural needs of children available for adoption in order to match them with PAPs, firstly trying to find a family in the same region, and if this is not possible, in other regions of the country. Finally, if needed, they could refer to the register of PAPs approved for intercountry adoption.¹³⁷ In order to accomplish this task, a centralised register of all adoptable children (See Rec. No 17) and all PAPs (See Rec. No 19) will be key.¹³⁸

The next step in the **mid term** will be to ensure proper training of the matching committee. A quality matching process is essential to ensure good outcomes for children and PAPs. Better and increased training is vital to developing and maintaining a quality child welfare workforce.

In the **long term**, Cambodia could trial the matching committee with children from a limited number of provinces. This would allow for the making of any necessary changes before implementing the matching committee at a national level.

134 Art. 27.

135 See Burkina Faso Country Profile under www.hcch.net under "Adoption". There are many other examples under other Country Profiles.

136 Cambodian authorities could explore the merits of including in the matching committee the search for foster families. The benefit of having one matching committee is that it may simplify the process, allowing for fast tracking of cases. However, the risk is less gatekeeping mechanisms in the steps (i.e., different professionals) checking the match, this may be more conducive to illicit practices. In addition, the differences in each child protection measure may be disregarded in the matching process.

137 In Lithuania, regional or municipal welfare agencies should first try to reunite a child with its birth family or other relatives. If this is not possible, the child may be placed with a Lithuanian family for adoption, fostering or guardianship. If a Lithuanian family cannot be found, the authorities will look for a family in the register of PAPs for intercountry adoption. In the Slovak Republic, once a child has been declared adoptable by a Slovak court, he is included in the register of children in need of alternative protection. An adoptive family is preferably sought in the administrative region of the child's residence, and subsequently, if necessary, across the Slovak territory. If it proves impossible to establish personal contact between the child and a prospective adoptive parent residing in the country, a file is opened for an intercountry adoption, and is submitted to the Centre for International Legal Protection of Children and Youth. This practice is advantageous as it applies the principle of subsidiarity within the country as well (i.e. by looking for a PAP within various regions of the country of origin).

138 See, for example, Brazil (1990 Child and Adolescent Law, Art. 50); Bulgaria (Ordinance No 3 on the Conditions and Procedure for giving Consent for the Adoption of a Person of Bulgarian Nationality by a Foreigner, 16 September 2003, Section III); Chile (Law 19.620/1999 on Child Adoption, Art. 5); Latvia (Regulation No 111 of the Council of Ministers, 11 March 2003, Art. 3); Lithuania (Resolution No 1422 of 10 September 2002, Procedure for Registry of Adoption in the Republic of Lithuania and Civil Code, Art. 3.219).

Rec. No

18

Establish a matching committee in charge of finding the best PAPs for a child (for both domestic and intercountry adoptions)

SHORT TERM (2018)				
What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Matching committee	<div><div>1</div>Government to establish a matching committee composed (multidisciplinary team experts from different fields). Follow and use good practice of other countries.</div> <div><div>2</div>Government to explore the merits of a matching committee in charge of both domestic and intercountry adoption.</div>	MoSVY, MoJ	UNICEF, 3PC and FCF	2018
Matching procedure	<div><div>1</div>Examine the Law on Intercountry Adoption¹³⁹ which establishes a matching procedure as a base – but must be extended to national adoptions and include other ethical practices (e.g. matching procedure should not start before adoptability of the child has been established, and the PAPs have been approved to adopt).</div> <div><div>2</div>Set round table with stakeholders including those involved in trialling alternative care panels to establish clear/transparent matching procedure.</div> <div><div>3</div>Agree on responsibilities.</div> <div><div>4</div>Include procedure in law or policy.</div>	MoSVY , MoJ	UNICEF, 3PC, FCF and IOM	2018

¹³⁹ Art. 27.

MEDIUM TERM (2019 - 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Training of matching committee	<div><div>1</div>Once ST objectives are met, train matching committee members.</div> <div><div>2</div>Wide dissemination of matching procedure (e.g. Central Adoption Authority website/publications).</div>	MoSVY	UNICEF, 3PC, FCF and IOM	2019 ongoing

LONG TERM (Beyond 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Pilot project	<div><div>1</div>Trial matching committee with children from a limited number of provinces.</div>	MoSVY and MoJ	UNICEF, 3PC, FCF and IOM	2023 ongoing



05

Domestic Adoption in Cambodia

Domestic adoption in Cambodia is regulated by the Civil Code, the Law on Non-Litigation Civil Procedures, the Prakas on Alternative Care and the Explanatory Note on Domestic Adoption. To date it appears that there is no preparation, matching, nor follow up for national adoptions. The absence of domestic adoption in practice makes it difficult to properly implement the principle of subsidiarity before deciding to proceed with an intercountry adoption as one very important step is missing, namely, the research for a permanent family solution in Cambodia through domestic adoption.

Rec. No

19

PAPs declared eligible and suitable to adopt, and properly trained and supported during the domestic adoption procedure

ST

Establish clear criteria for declaring the eligibility and suitability of PAPs

Decide who will declare the PAPs eligible and suitable, and establish a procedure

MT

Develop information and counselling programs for PAPs

Train the professionals that will decide on the eligibility and suitability of PAPs

LT

Create a register that will include all PAPs habitually resident in Cambodia that have been declared eligible and suitable to adopt

Adoption is a child protection measure that responds to the needs of a particular child. To effectively do this, PAPs should be declared eligible and suitable to adopt following specific criteria and procedures. This should be done before any matching takes place (see Rec. No 19). PAPs should be properly trained and supported.

PAPs should have information sessions and counselling before they decide to adopt. Information sessions and counselling will give PAPs an opportunity to learn, take a realistic view of adoption, reflect and evaluate their own skills and ability to deal with challenges that arise in adoption, and to better understand the adoption process. Counselling and support should continue during the whole adoption procedure and if needed, afterwards. There should be a register of all PAPs that want to adopt domestically in Cambodia.

The Civil Code¹⁴⁰ establishes some criteria for determining the eligibility (legal criteria) of PAPs. The Prakas on Alternative Care¹⁴¹ mentions some of the criteria regarding the suitability of PAPs (i.e. psycho-social questions).

140 Art. 1009

141 Art. 28 refers to the personal history of emotional stability and good relationships, suitable housing and safe neighborhood, ability to provide the child access to adequate education and health care, ability to provide material and emotional support for the child, genuine desire to raise the adopted child in the same manner as a biological child, and feelings of other children who live in the same family.

The assessment of PAPs in Cambodia should pay special attention to the PAPs' suitability. Current criteria in Cambodia focus on the PAPs' social position, finances and housing standards. In the **short term** further criteria regarding the psychosocial capabilities of PAPs to care for the child should also be included (e.g., personal and family history, personal characteristics, marital relationship, extended family relationship, physical/social environment, general and specialized parenting, motivation). These additional criteria should be established in the required legal form. PAPs should be informed of all the criteria by which they will be evaluated.

In the **mid term** Cambodia will need to establish a procedure to evaluate the eligibility and suitability of PAPs, and determine who will be in charge of this decision. One option could be to appoint DoSVY as the responsible entity, on the proviso that they are adequately equipped. This would allow decisions to be made at the provincial level and in close proximity to the possible PAPs.

Cambodia will also need to develop information and counselling programs for PAPs applying to adopt domestically, as they are currently non-existent. Many countries have developed programs that may be adapted to Cambodian needs.¹⁴⁸ The programs can either be provided by public authorities (e.g. by DoSVY in each province) or by private independent bodies. Cambodian authorities will have to decide what is best for the country. If it is decided that DoSVY provide these services, its human and financial resources will need to be strengthened. An advantage of a public body is that its work should be easier to monitor, and services could be provided for free. The professionals deciding on the eligibility and suitability of PAPs should have the necessary qualifications (recommended a degree in behavioural science, such as social work or psychology), practical knowledge, and proper training.

In the **long term**, PAPs declared eligible and suitable to adopt should be included in a register of PAPs at the provincial and country level. This register will be key to finding the best family for each child during the matching process (See Rec. No 18). Cambodia will need to develop this register for domestic adoptions, and ensure that data on PAPs is current.

¹⁴² For example, the PRIDE Model of Practice provides a standardized, consistent, structured framework for the competency-based recruitment, preparation, assessment, selection, of foster and adoptive parents, and for foster parent in-service training and ongoing professional development. The PRIDE Model of Practice is used, in whole or in part, in more than 25 countries, see: www.cwla.org/pride-training.

PAPs declared eligible and suitable to adopt, and properly trained and supported during the domestic adoption procedure

SHORT TERM (2018)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
The eligibility and suitability of PAPs	1 Establish clear criteria for declaring PAPs eligibility and suitability as above.	MoSVY and MoJ	UNICEF, 3PC and FCF	2018
	2 Establish a procedure to evaluate the eligibility and suitability of PAPs.			
Decide who will declare the PAPs eligible and suitable, and establish a procedure	1 Disseminate criteria widely among public.	MoSVY and MoJ	UNICEF	2018
	2 Determine who will be in charge of this decision.			
	3 Identify how responsible authority will work with other stakeholders.			

MEDIUM TERM (2019 - 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Information and counselling programs for PAPs	<div><div>1</div>Develop information and counselling programs for PAPs applying to adopt domestically.</div> <div><div>2</div>Determine who will deliver programs such as public authorities (e.g. by DoSVY in each province) or by private independent bodies.</div>	MoSVY	UNICEF	2019 ongoing
Equip authority/ service providers to assess and prepare PAPs	<div><div>1</div>Train and resource responsible authority and service providers.</div> <div><div>2</div>Ensure annual training for troubleshooting of procedures.</div>	MoSVY	UNICEF, HCCH and ISS	2020-2023

LONG TERM (Beyond 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
PAPs register	<div><div>1</div>Based on assessment of all PAPs habitually resident in Cambodia, create a register where details to be included.</div> <div><div>2</div>Identify who will host PAPs register.</div> <div><div>3</div>Identify how information from regions will be centralised in one register.</div>	MoSVY and MoJ	UNICEF	2023 ongoing

Rec. No

20

Promote domestic adoption

ST

Analyse the current challenges and identify the obstacles relating to domestic adoption

Prepare and implement the advocacy strategy on promoting domestic adoption

MT

Implement a media campaign and other strategies

LT

Provide specific support to adoptive families (before, during and after the adoption)

Priority should be given to children being raised by a permanent family in the country that they are most familiar with, namely where they live. In order to make this possible, there is a need to promote national adoption. In States such as Cambodia, where it appears that adoption has not traditionally been considered an option in caring for children without families, there is a need to promote awareness and cultural acceptance of adoption. Building awareness of the need for adoptive families may require a change in public attitudes. In developing a national adoption system, it is important to know what factors, if any, are inhibiting national adoption, and to consider how families can be encouraged to adopt children.

Cambodia has taken steps to promote domestic adoptions. Namely, it has very recently produced the 2016 Explanatory Note on Domestic Adoption and has provided training to judges and other stakeholders.¹⁴³

I 143 Training for judges in December 2013 and in October 2016.

In the **short term** Cambodian authorities should analyse current challenges and identify obstacles relating to domestic adoption, including measures that could be taken to overcome them. Lessons can be gleaned from the work of IOM who will be working with Children in Families to provide pro bono legal assistance helping long term foster carers adopt children. It seems lessons may also be collected from the trial FCF project on alternative care panels that in principle will cover national adoptions.

Many States have managed to increase the number of domestic adoptions through clearly explaining the meaning of adoption to the general public and making domestic adoption free of charge. An advocacy strategy to promote adoption should include clear objectives and goals, target groups, and planned activities. Advocacy should be done at both the local and national level.¹⁴⁴

In the **mid term** government should focus on changing public attitudes to build awareness of the need for adoptive families. Some countries have had success in building awareness of adoption for the benefit of children and families through public announcements, media campaigns and active involvement of many in the government sector at the local, regional and national level.¹⁴⁵

In the medium term, Cambodia should particularly target the CCWC and local community health centres as they are close to community and can have a key role in changing attitudes.

It is very important to support PAPs and adoptive families and to mitigate against any difficulties. For example, applying to the court is a challenge for many PAPs. Therefore, the team recommends that in the **long term**, free legal aid and assistance is available during the court procedure. Alternatively, DoSVY could apply to the court and present adoption files in the name of the PAPs. Another measure would be to provide a lump sum per child that will encourage people to adopt.

Cambodia should provide post-placement services to adoptive families (e.g. in Lithuania, in each municipality there are at least two accredited social workers who provide training for PAPs and post placement service to adoptive families;¹⁴⁶ South Africa also provides such services). The relevant authorities should monitor and study issues faced by adoptive families, and provide new, improved and expanded services for children and families.

¹⁴⁴ See Ugandan initiative to promote national adoptions at <http://ugandansadopt.ug/>. See also ACPF work to promote national adoptions and prevent illicit practices in http://www.iss-ssi.org/images/News/Illegal_Adoption_ISS_Professional_Handbook.pdf.

¹⁴⁵ See media campaigns in Colombia (www.icbf.gov.co/portal/page/portal/PortalICBF/Especiales/prueba/Bienestar/ProgramaAdopciones) and Chile (www.sename.cl/web/que-es-la-adopcion).

¹⁴⁶ These social workers provide training, evaluation, declaration of suitability and post placement support of both foster families prospective adoptive parents as per http://www.vaiokoteises.lt/media/file/gimk%20dar/GIMK_kontaktai_2017_vasaris.pdf

Promote domestic adoption

SHORT TERM (2018)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Improving current situation in domestic adoption	<div><div>1</div>Identify obstacles relating to domestic adoption, including measures that could be taken to overcome them.</div> <div><div>2</div>Consider making domestic adoption free of charges.</div>	MoSVY and MoJ	UNICEF, IOM, Children in Families	2018
Advocacy strategy on promoting domestic adoption	<div><div>1</div>Prepare an advocacy strategy to promote adoption looking to international examples for inspiration.</div> <div><div>2</div>Set up clear objectives, target groups, and planned activities.</div> <div><div>3</div>Implement advocacy strategy.</div>	MoSVY and MoJ	UNICEF	2018

MEDIUM TERM (2019 - 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Media campaign and other strategies	<div><div>1</div>Focus on changing public attitudes to build awareness of the need for adoptive families.</div> <div><div>2</div>Build awareness of adoption for the benefit of children and families through public announcements, media campaigns and active involvement of government sector at local, regional and national level.</div> <div><div>3</div>Target CCWC and local community health centres as they are close to community and can have a key role in changing attitudes.</div>	MoSVY and MoJ	UNICEF	2019 ongoing

LONG TERM (Beyond 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Specific support to adoptive families (before, during and after the adoption).	<div><div>1</div>Discuss and set up specific support to adoptive families.</div> <div><div>2</div>Consider court providing free legal aid and assistance during the court procedure.</div> <div><div>3</div>Consider if DoSVY could apply to court and present files in PAPs name.</div> <div><div>4</div>Consider if a lump sum per child could be provided that will encourage people to adopt.</div> <div><div>5</div>Set up post-placement services to support adoptive families.</div> <div><div>6</div>Monitor and study issues faced by adoptive families and provide new, improved and expanded services for children and families.</div>	MoSVY and MoJ	UNICEF	2023 ongoing

MoSVY and MoJ

UNICEF

2023 ongoing



06

Intercountry Adoption in Cambodia

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Intercountry adoption may offer the advantage of a permanent family to a child for whom a suitable family cannot be found in his or her State of origin.¹⁴⁷ However, it is firstly necessary to ensure that the principle of subsidiarity is applied and domestic solutions are considered. This requires having a workable alternative care system (e.g., support to families of origin and re-integration) as well as a domestic adoption system as discussed above. It is our view that it will take at least two years before there is an operational principle of subsidiarity. Therefore, until such a time, we would recommend against “fully” opening up the intercountry adoption system. In the interim period, this would not preclude pilot testing parts of the intercountry adoption laws and policies in place, specifically for children with special needs. We would strongly recommend that receiving countries adopt a common approach in response to Cambodia’s decision in this regard.

Cambodia has been working very hard to ensure that its internal legal framework is in compliance with the 1993 Hague Convention. In this respect, a Law on Intercountry Adoption as well as several Prakas (regulations) on intercountry adoption have been approved in the past few years (see Annex 2). These excellent achievements establish a sound base for the system. There are now two challenges:

Firstly, to ensure that intercountry adoption is well integrated into the domestic child protection system, and that the principle of subsidiarity is applied in all cases of intercountry adoption. The second challenge is to implement the legal framework properly and, in particular, to ensure that all authorities taking part in the adoption procedure have the necessary powers and resources, as well as the necessary knowledge, experience and education concerning child protection and adoption. This would also imply that there is an appropriate social workforce in place, equipped to implement and monitor all the required adoption procedures (see Rec. No 3).

In the following section, the team, while acknowledging that much has already been done, focuses its recommendations on the major remaining challenges regarding intercountry adoption.

I 147 Preamble of the 1993 Hague Convention.

Rec. No

21

Provide information about the characteristics and needs of adoptable children in need of intercountry adoption

ST

Specify the number and type of children in need of families, with a specific emphasis on children with special needs (e.g. older, sibling groups, with a disability)

Specify the number of adoption applications and the qualifications of PAPs that will be accepted

MT

Pilot project with the reversal of the flow of the files

LT

Monitor and follow up

If receiving States know which children are in need of intercountry adoption in Cambodia, they will be able send files of PAPs that will respond to the needs of those children. In order to avoid pressure from receiving States, States of origin are encouraged to specify through their Central Authority any limits in relation to the number and type of applications for intercountry adoption that they will accept in light of the number and profile of intercountry adoptable children in the State. Receiving States should respect any limits.¹⁴⁸

In the [short term](#), based on the profiles of children in the central database (Rec. No 2), ICAA could specify the number and profile of files of PAPs needed. This information should be communicated to the Central Authorities of receiving States through, for example, a written common letter (see next recommendation) or the website of MoSVY. ICAA should also specify the required criteria and requirements for PAPs. This method will help to achieve a child-centred intercountry adoption program by matching specific children with the most suitable family and help PAPs to avoid unreasonable expectations, long waiting periods, loss of motivation as well as prevent disappointment among children.

I 148 2015 Special Commission, Rec. No. 8.

Children with special needs should have adoptive parents with special skills. Not all PAPs have the necessary skills to care for such children. At this moment, many children with special needs wait for years for a suitable family. Some of these children never find a family through domestic adoption. A delay in starting the adoption procedure for these children is contrary to their best interests. Therefore, children with special needs should receive priority for intercountry adoption. Cambodia could consider starting, in the [mid term](#), a pilot project following the reversal of the flow of the files method:¹⁴⁹

- assess the number and profiles of adoptable children with special needs;
- share these details (save any identifying information to protect children's privacy) with the Adoption Accredited Bodies (AABs) of receiving States with whom cooperation agreements have been signed about the needs;
- request the receiving States to look for PAPs capable of caring for particular children with special needs; and then do the matching.

This assessment of adoptable children with special needs could be facilitated by the work of ISS and its professional manual, which evaluates individual needs of each child (see Rec. No 3 on training of assessing individual needs of children).

It is important to inform Central Authorities and AABs about positive matching decisions and negative ones. Providing motivated responses will help future collaboration, as the receiving State will know better how to improve the preparation of PAPs.

In the [long term](#), authorities should monitor and evaluate adoptions, in particular what services and support is provided to adoptive children and their families. This could be a tool to evaluate the activities of AABs. If there are many adoption disruptions, authorities may consider if there are serious reasons to stop cooperation.

I 149 See Guide to Good Practice No 1, *supra* note 21, para. 394.

Rec. No

21

Provide information about the characteristics and needs of adoptable children in need of intercountry adoption

SHORT TERM (2018)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Specify number and type of children in need of families, with a specific emphasis on children with special needs (e.g. older, sibling groups, with a disability)	<div><div>1</div>Based on centralised database Rec. No 2 and adoption database Rec. No 17, specify number and type of children in need of families.</div> <div><div>2</div>Identify children who have special needs, clearly listing their particular requirements.</div>	MoSVY, ICAA	UNICEF	2018
Specify number of adoption applications and qualifications of PAPs that will be accepted	<div><div>1</div>Based on numbers and types of children identified, specify the number and profile of files of PAPs needed.</div> <div><div>2</div>Specify the required criteria and requirements for PAPs.</div> <div><div>3</div>Communicate this information to the Central Authorities of receiving States either through website or policy notes.</div>	MoSVY, ICAA	UNICEF	2018

MEDIUM TERM (2019 - 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Pilot project with reversal of flow of files ¹⁵⁰	<ol style="list-style-type: none"> 1 Select a small number of adoptable children with special needs. 2 Share children’s details (save any identifying information to protect children’s privacy) with receiving States with whom cooperation agreements have been signed. 3 Set timeframe for receiving States to look for PAPs capable of caring for particular children with special needs; and then do the matching. 4 Receiving States to inform Cambodia of decision for final approval. 	MoSVY, ICAA	UNICEF, PB, HCCH and receiving States	2019 ongoing
Cooperation with Central Authorities and AABs	<ol style="list-style-type: none"> 1 Develop a standard format outlining reasons for matching decisions. 2 Upon completion of matching decisions, inform Central Authorities and AABs about positive matching decisions and negative ones. 	MoSVY, ICAA	MoSVY, ICAA	2019 ongoing

LONG TERM (Beyond 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Monitor and follow up	<ol style="list-style-type: none"> 1 Set up adoption monitoring and evaluating procedures (including a complaints mechanism). 2 Request receiving States to comply with above procedures in a timely manner. 3 MoSVY to evaluate compliance. 4 MoSVY to consider ceasing co-operation when there is systematic non-compliance. 	MoSVY, ICAA	UNICEF	2023 ongoing

I 150 See Guide to Good Practice No 1, supra note 21, para. 394.

Cooperation with a limited number of receiving States and Adoption Accredited Bodies (AABs)

ST

Receiving States wanting to work in Cambodia have a common approach
Cambodia decides to start cooperation in intercountry adoption only with a limited number of countries

MT

Cambodia and receiving States authorise a maximum of two AABs per country to work in Cambodia

LT

Monitoring the activities of AABs

Cambodia should concentrate its work on providing appropriate support to families, and in the case of adoption, on preparing adoptable children.¹⁵¹ It should not use its scarce resources to deal with a high number of receiving States, AABs and PAPs. In order to avoid pressure, it is recommended that these guidelines be followed:

- choose only the most professional authorities and AABs to work with;
- seek information from other States of origin about particular AABs;
- refuse to collaborate with underperforming receiving States or AABs;
- resist inappropriate pressure from receiving States and AABs to maintain a supply of children.¹⁵²

To start, in the **short term**, receiving States should have a common approach and work together with Cambodia. States should not seek advantages based on previous contacts and agreements. We note that many of the receiving States have written a joint letter to Cambodia about clarifications in its adoptions procedures. We encourage building on this common approach to the extent that it does

151 <http://www.iss-ssi.org/images/thematic-facts-sheet/eng/26.Preparation%20of%20the%20child%20eng.pdf>

152 See HCCH, Guide to Good Practice No 2: Accreditation and Adoption Accredited Bodies, Family Law (Jordan Publishing Ltd), 2012 (hereinafter, "Guide to Good Practice No 1"), para. 554.

not place unwarranted pressure on Cambodia. Such unity avoids sending mixed messages to Cambodia and prevents undue competition. This common approach is further facilitated by the work of UNICEF in chairing regular meetings of foreign Embassies.

Cambodia is not obliged to cooperate with all receiving States that apply to do so. The team recommends that when Cambodia decides to reopen intercountry adoption, it starts cooperating with a limited number of States. The Cambodia Central Authority can make its choice based on the profile of PAPs that wish to adopt, the type of preparation programs for PAPs, the post-placement services available, etc.

ICAA is encouraged to cooperate with the Central Authorities of other States of origin. Before deciding to cooperate with another State, ICAA can seek the experience that other Central Authorities of States

or origin have had with that country and its AABs. In the medium term Cambodia should only authorise a maximum of two AABs per country with which it has decided to cooperate, as per its own legislation. This should be communicated clearly to avoid pressure from other States and AABs. It may also specify the number of files that each AAB will be able to send.

For better accountability of AABs, Cambodia could consider in the [long term](#) having regular monitoring of the AABs, annual meetings with them, and producing an annual report which includes financial statements relating to their operations. This would help in monitoring AABs and in ensuring that placements do not result in improper financial gain for those involved. Cambodia should also consider listing all AABs who have been sanctioned for improper dealings as well as systematically informing the relevant receiving States as such.

Cooperation with a limited number of receiving States and Adoption Accredited Bodies (AABs)

SHORT TERM (2018)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Cooperation in intercountry adoption	<ol style="list-style-type: none"> 1 Before deciding to cooperate with another State, seek the experience that other Central Authorities of States or origin have with that country and its AABs (this could be initiated with regional teleconference). 2 Based on above/number of adoptable children (Rec. No 21), initiate cooperation with limited number of countries 3 Organise regular meetings of Foreign Embassies to manage expectations. 4 Refuse collaboration with underperforming receiving States or AABs. Resist inappropriate pressure from receiving States and AABs to maintain a supply of children. 	MoSVY, ICAA	UNICEF, Foreign Embassies	2018

MEDIUM TERM (2019 - 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Cooperation with AABs	<ol style="list-style-type: none"> 1 Choose only the most professional authorities and AABs to work with. 2 Authorise a maximum of two AABs per country to work in Cambodia. 3 For countries with previous arrangements for more than two AABs, renegotiate agreements. 4 Specify the number of files that each AAB will be able to send based on Rec No. 21. 	MoSVY, ICAA	UNICEF	2019 ongoing

LONG TERM (Beyond 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Monitoring activities of AABs	<div><div>1</div>Organise annual meetings with AABs to discuss Cambodian expectations.</div> <div><div>2</div>Request AABs to produce annual report which includes financial statements relating to their operations.</div> <div><div>3</div>Evaluate AABs in context of above.</div> <div><div>4</div>List all AABs who have been sanctioned for improper dealings as well as systematically informing the relevant receiving States as such.</div>	MoSVY, ICAA, Ministry of Foreign Affairs	UNICEF	2023 ongoing

Regulation of the financial aspects of adoption¹⁵³

ST

Ensure the proper implementation of the legislation on financial aspects for ICA

MT

Discuss the possibility of asking only for fees and expenses, and not for contributions

LT

Ensure that proper funding of the alternative care system that is completely dissociated from intercountry adoptions to avoid dependency

To reach the standards and fulfil the guarantees of the 1993 Hague Convention, a number of professionals need to be involved in the adoption process. It is reasonable to anticipate that payments will be necessary for such professionals, whether working in government or non-government offices. The Convention therefore allows authorities, AABs in receiving States and States of origin to charge reasonable and lawful fees for services provided in relation to the adoption.¹⁵⁴ However, the Convention clearly prohibits improper financial or other gain.¹⁵⁵

The 2009 Cambodian Law on Intercountry Adoption establishes that adopters shall pay expenses and fees for the adoption procedure and contributions for the support of alternative care options. AABs shall also pay some fees to be authorized to work in Cambodia.¹⁵⁶ It is prohibited to transmit fees, donations or payments of any kind to orphanages.¹⁵⁷ The adopters shall also pay a small Court fee.¹⁵⁸

The 2013 Prakas on the determination of expenses, fees and contributions for intercountry adoption (2013 Prakas) established a joint payment of 5 000 US dollars. 30% of this is for expenses and fees of the adoption procedure. The payment of fees and expenses for professional services to complete the adoption is in line with the Convention. The remaining 70% will be for alternative care programs, to be paid to a specific Fund at the national treasury. Positively, it is clear the amount to be paid and to whom it should be paid. Other guarantees are established under the 2013 Prakas. There is a view

153 The text under this recommendation is based on the Note on Financial Aspects of Intercountry Adoption, HCCH, 2014.

154 See Art. 32(2) of the Convention. See also Guide to Good Practice No 1, supra, note 21, para. 225 and the

155 Art. 32 of the Convention.

156 2014 Prakas on procedures to authorise intercountry Adoption Agencies.

157 Art. 25.

158 Art. 35.

that this kind of fund constitutes good practice under certain conditions, such as: specifying in advance the purpose of the contributions in a detailed and pragmatic manner; identifying the authority or body regulating and monitoring the fund; and regular reporting by States of origin on the use of such funds to assure donors that the funds are used for the benefit of children, and not for other purposes.

However, this type of fund can often involve dangers and risks, particularly when the fund is not administered properly and is not the subject of careful oversight by the relevant competent authorities. A strong regulation of these funds is of paramount importance. In addition, contributions to support alternative care systems entails risks as they may undermine the integrity of a safe adoption procedure. For example, contributions may have the effect of prioritising intercountry adoption over national solutions and therefore, may result in insufficient support being provided to the birth family and an absence of, or deficient, investigations undertaken into the adoptability of the child and / or the availability of a domestic alternative care solutions (i.e., the subsidiarity principle may not be respected). Arguably 3500 US dollars per child, when compared to daily living costs is quite high and therefore can lead to illicit practices, as it may act as an incentive to “produce” children inappropriately for adoption. Contributions create a dependency on the part of States of origin on the funds provided through these sources and raise expectations that they will continue to receive them. States wanting to ensure a steady flow of external funds to support child protection efforts may feel obliged to ensure that children are supplied for intercountry adoption. Contributions can also create competition between receiving States and AABs, whereby whoever provides the greatest amount receives the greater number of children.

Furthermore, in UNICEF's view,¹⁵⁹ these types of funds should not be the way in which support is provided from other countries for the development of child protection services and alternative care services in States of origin. When contributions to such funds are mandatory in order for intercountry adoptions to be carried out, the contributor may have little or no influence over the kind of projects financed and, in particular, may have no information concerning whether or not the projects conform to internationally approved policy guidelines in this sphere. Consequently, contributions of this nature cannot automatically be considered as a desirable form of 'development aid'.

Therefore, the team recommends that, in the **short term**, if and when intercountry adoptions recommence in Cambodia, the authorities implement the Law and the 2013 Prakas immediately and comprehensively, in particular in relation to the expenses and fees. This will require collaboration with MoSVY and Ministry of Economy and Finance (MoEF).

In the **mid term**, Cambodian authorities should discuss the possibility of asking only for fees and expenses of the actual costs of the adoption procedure, and not for contributions nor donations. This is particularly important given that some areas in Cambodia have been prone to illicit adoption practices in the past.

Finally, in the **long term**, Cambodia should ensure other channels for funding the alternative care system, completely dissociated from intercountry adoption. The sustainability and quality of its child protection framework is the ultimate responsibility of the government and therefore intercountry adoption should not be the way of financing the child protection system, as it creates dependency and undermine the integrity of a safe adoption procedure.

I 159 Note on Financial Aspects of Intercountry Adoption, HCCH, 2014, para. 134.

Regulation of the financial aspects of adoption

SHORT TERM (2018)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Ensure proper implementation of the legislation on financial aspects for intercountry adoptions	<ol style="list-style-type: none"> 1 Set up a roundtable with relevant Ministries, CSOs and other actors about practical implementation of Law and 2013 Prakas related to financial aspects. 2 Identify responsibilities and procedures. 3 Disseminate agreed responsibilities and procedures widely including ICAA website, central authorities of receiving States, Foreign Embassies. 	MoSVY, ICAA, MoEF	UNICEF, 3PC and FCF	2018

MEDIUM TERM (2019 - 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Set fee policy with safeguards against illicit practices	<ol style="list-style-type: none"> 1 Seminars on fee structures of other countries as well as benefits/risks therein among relevant stakeholders. 2 Discuss possibility of asking only for fees and expenses of actual costs of the adoption procedure, and not for contributions nor donations. 	MoSVY	UNICEF	2019 ongoing

LONG TERM (Beyond 2023)

What is required?	How will it be implemented?	Who will be responsible?	Who will support?	Timeframe
Proper funding of the alternative care system	<ol style="list-style-type: none"> 1 Based on Rec. No 1, ensure proper funding of alternative care system that is completely dissociated from ICA to avoid dependency. 2 Identify other channels for funding the alternative care system, completely dissociated from intercountry adoption. 	MoSVY	UNICEF	2023 ongoing

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- M. RUSSEY, Emergency Foster Care and the Big Five

Annex 1 List of persons met during the mission in Cambodia

NGO’S REPORTS

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- Mr Or Mao, DoSVY Director in Siem Riep
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- Mr Ku Khemlin, Deputy Director of Judicial Department

Ministry of Foreign Affairs and International Cooperation

- Mr Tho Samnang, Director, Legal and Consular Department

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- Mr Huot Synead, Deputy Director General, General, Department of Local Administration

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- Mr Chay Chandara Vann, Judge of the Appeal Court

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