

KINGDOM OF CAMBODIA
NATION RELIGION KING



Ministry of Social Affairs,
Veterans and Youth Rehabilitation

REPORT ON
RESULTS OF
THE IMPLEMENTATION OF
THE ACTION PLAN FOR
IMPROVING CHILD CARE

WITH THE TARGET OF **SAFELY RETURNING 30 PER CENT**
OF CHILDREN IN RESIDENTIAL CARE
TO THEIR FAMILIES
BY 2019

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FOREWORD

The Action Plan for Improving Child Care with the target of safely returning 30 per cent of children in residential care to their families was developed to support the implementation of Sub-Decree No. 119 on the Management of Residential Care Centres, dated 11 September 2015, and the Commitment Statement of the Ministry of Social Affairs, Veterans and Youth Rehabilitation (MoSVY). The reintegration of children from residential care to their families adheres to the guiding principles of the UN Convention on the Rights of the Child, “Best Interests of the Child”, and the humanitarian principles of “Do No Harm” and “Equity”.

In 2015, MoSVY conducted a mapping of residential care facilities nationwide, and identified 16,579 children (47 per cent girls) living in 406 residential care institutions (RCIs). Of the 406 RCIs, 267 RCIs accommodating 11,788 children were located in Phnom Penh, Battambang, Siem Reap, Kandal and Preah Sihanouk, which MoSVY classified as priority provinces for the reintegration of children to their families and communities. The results of the action plan implementation from 2016 to December 2019 show a reduction in the number of RCIs across the country to 232, accommodating 6,778 children (3,313 girls). Compared to 2015, the number of RCIs across the country decreased by 174 (43 per cent) and the number of children living in RCIs decreased by 9,801 (59 per cent).

These results reflect efforts made by management and technical officials of MoSVY and relevant provincial Departments of Social Affairs, Veterans and Youth Rehabilitation, commune committees for women and children, local authorities and development partners who collaborated and implemented the Action Plan for Improving Child Care and the safe return of 30 per cent of children from residential care to their families until these desired results are achieved. However, there are a number of challenges and these require more efforts from all relevant stakeholders to ensure that each of them is discussed to identify effective and efficient solutions for child well-being and safety.

MoSVY would like to express its profound thanks for the collaboration and cooperation of ministries, institutions, and national and international NGOs, particularly UNICEF, 3PC partners and USAID for technical and financial support in implementing the action plan.

We strongly hope that the report on the results of the implementation of the Action Plan for Improving Child Care and the safe return of 30 per cent of children in residential care to their families will be widely disseminated to all stakeholders, to share lessons learned in promoting family-based care in the community and to enhance current and future child reintegration.

Phnom Penh,
Minister

Vong Sauth
Minister for Social Affairs, Veterans and Youth Rehabilitation

EXECUTIVE SUMMARY

Based on the Mapping of Residential Care Facilities in 2015, there are 636 residential care facilities nationwide and 26,187 children living in them. Of these facilities, 406 are classified as residential care institutions (RCIs) which accommodate 16,579 children. Global studies show the negative impacts of residential care on the social, physical, mental and intellectual development of children. The Ministry of Social Affairs, Veterans and Youth Rehabilitation (MoSVY) asked that the Royal Government issue Sub-Decree 119, dated 11 September 2015, on the Management of Residential Care Centres, to promote and improve the quality and effectiveness of residential care management and uphold the best interests of the child.

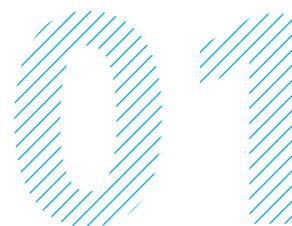
To effectively implement the sub-decree, MoSVY developed the Action Plan for Improving Child Care and the safe return of 30 per cent of children (3,500 children) in residential care to their families in five target provinces: Phnom Penh, Kandal, Preah Sihanouk, Battambang and Siem Reap.

The action plan was implemented from 2016 to 2019, with the following results:

- 32 social workers were recruited and supported. Of these, 17 were recruited by MoSVY and 15 were recruited by the Partnership Programme for the Protection of Children (3PC), with UNICEF financial support, to do case management, case follow-up of children undergoing reintegration and child protection.
- Around 400 government officials and stakeholders (MoSVY, DoSVY, women's and children's consultative committees (WCCC), commune committees for women and children (CCWC) and NGOs) have been trained to implement case management and provide basic social service and psychosocial support during and after the child is reunified or placed in other family/community-based care, and to promote the best interests of the child.
- In 2015, a total of 16,579 children were living in 406 RCIs nationwide.¹ By 2019, there were 232 RCIs with a total of 6,778 children (3,317 girls) living in them. Compared to 2015, the number of RCIs has decreased by 174 (43 per cent) and the number of children living in them has decreased by 9,801 (59 per cent). Of the 174 RCIs, 77 closed (two were closed for failing to meet the minimum standards, 43 were closed due to a lack of funding and lack of support from donors, and 32 were closed for other reasons that were not specified); 24 were reclassified as community-based care and 73 transitioned to non-residential care.
- 1,419 children (12 per cent of 11,788 children living in RCIs in the five target provinces) were supported for reintegration. Based on the Child Tracking Tool, the status update is as follows:
 - ✓ 1,021 children (75 per cent) are in the Green category (children who are in a safe and stable situation)

¹ Mapping of Residential Care Facilities published in March 2016.

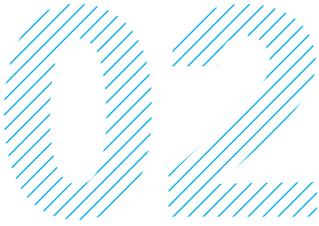
- ✓ 78 children (6 per cent) are in the Yellow category (children undergoing reintegration are in vulnerable conditions that require additional attention)
- ✓ 34 children (3 per cent) are in the Red category (children undergoing reintegration are in vulnerable conditions that require reassessment to identify risks and essential services for the children and families)
- ✓ 199 children undergoing reintegration have migrated with their families or moved location and cannot be located. Therefore, their case status has not been updated by the focal points and social workers. However, the focal points and social workers continue to make efforts to trace them to ensure that they are safe, as per the principles of MoSVY
- ✓ 87 cases have not been updated yet, as the children have just been reunited or placed in other placements. Focal points and social workers will conduct the case update status of these children in 2020.



INTRODUCTION

In 2006, MoSVY issued the Policy on Alternative Care for Children. Through this policy, MoSVY issued a Prakas on Minimum Standards of Residential Care for Children (2006), a Prakas on Minimum Standards of Alternative Care for Children in the Community (2008) and a Prakas on Procedures to Implement the Policy on Alternative Care for Children (2011). MoSVY has conducted ongoing inspections of RCIs since 2008, gathering valuable data on the number of RCIs and children living in them to produce an annual report for the government, with dissemination to stakeholders. In 2011, MoSVY entered into an agreement with UNICEF and Friends International to implement a programme entitled, Partnership Programme for the Protection of Children (3PC). This is financially supported by USAID to improve alternative care for children, with a focus on reintegrating children from residential care to their families and communities, as well as preventing unnecessary family separation. Family Care First (FCF)-REACT partners also supported reintegration activities.

MoSVY disseminated Sub-Decree 119 on the Management of Residential Care Centres in 2015, along with a statement of commitment on the reintegration of children. In response to the implementation of the sub-decree and the commitment, MoSVY developed the Action Plan for Improving Child Care with the target of safely returning 30 per cent of children in residential care to their families by 2018 (the action plan has been extended to 2020) and the provincial operational plan in five priority provinces (Phnom Penh, Kandal, Sihanoukville, Battambang and Siem Reap).



ACTION PLAN FOR IMPROVING CHILD CARE AND THE SAFE RETURN OF 30 PER CENT OF CHILDREN IN RESIDENTIAL CARE TO THEIR FAMILIES

Goal

The goal of the plan is that by 2018 (the plan has been extended until 2020), girls and boys separated from their families, or at risk of separation, are increasingly protected by institutional and legislative frameworks, quality services and a supportive community environment.

Indicator of progress towards the goal: 30 per cent of children in residential care (around 3,500 children) in the five target provinces of Phnom Penh, Kandal, Sihanoukville, Battambang and Siem Reap are reunified with family and placed in community-based care.²

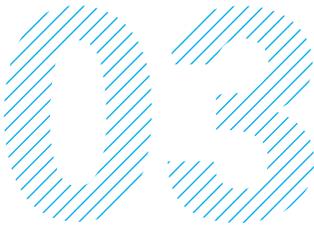
Objectives

1. Strengthen the capacity of MoSVY and five provincial authorities to formulate and implement the institutional and legal frameworks, and develop costed plans for the scaling-up of child protection prevention and response interventions, including de-institutionalization and provision of reintegration services.
2. Strengthen the capacity of 3PC partners and other social services providers to protect girls and boys separated from their families, or at risk of separation, and those being de-institutionalized and supported for reintegration.
3. Strengthen the capacity of commune councils and religious leaders to protect girls and boys separated from their families, or at risk of separation.

² Community-based care is defined in the policy.

Strategic actions

1. Implement the Sub-Decree on the Management of Residential Care Centres, as well as the commitment statement and existing alternative care regulatory framework.
2. Establish a national framework for fostering and adoption, and improve the processes for inter-country adoption.
3. Scale-up the pilot of the transfer of functions on the management of RCIs in Battambang to other provinces.
4. Simplify the procedures for inspections of residential care facilities and introduce innovative mobile technology for data collection and analysis.
5. Strengthen social work to support effective case management, family preservation approaches and broader child protection interventions.
6. Design and implement programme guidelines and standard operating procedures to guide the closure of RCIs, de-institutionalization and reintegration.
7. Strengthen the capacity of government officials and agencies working with abandoned children and children with disabilities in alternative care to provide better quality care, support reintegration with families and communities, and prevent institutionalization.
8. Strengthen the capacity of WCCCs, CCWCs, commune councils and religious leaders to prevent unnecessary separation, protect children deprived of parental care and support the reintegration of children from residential care.
9. Improve the functioning of the alternative care database and build a National Child Protection Information Management System.
10. Design and implement a national behavioural change campaign to prevent and respond to violence against children and unnecessary family separation.
11. Support the implementation of the National Strategic Framework on Positive Parenting to prevent violence and unnecessary family separation.



KEY ACHIEVEMENTS FROM 2016 TO 2019

3.1 Key achievements against the goal and objectives

- **The action plan has enabled the creation of a basic child protection system in Cambodia.** Although the sub-decree and the action plan for improving child care are primarily on the alternative care system, they nonetheless have contributed to strengthening the overall child protection system in Cambodia. Specifically, the basic case management system has been institutionalized within MoSVY. This achievement can be further expanded to include a comprehensive range of child protection concerns so that a fully functional child protection system can be established.
- **Multi-layered interventions created a synergistic effect to control the institutionalization of Cambodian children.** Sub-Decree 119 on the Management of Residential Care Centres and the Action Plan for Improving Child Care have provided consistent messaging that Cambodia does not want too many residential care centres. MoSVY has played operational, leadership and programmatic service roles, which include case management services and inspection of RCIs (with support from the 3PC partners, UNICEF and USAID). It has also paved the way for stricter regulation of residential care in Cambodia, the reintegration of children living in RCIs, and better gatekeeping processes. Significantly, no formal approval was given for the establishment of any new RCIs.

3.1.1 Inspection report

a. Inspection report nationwide

The number of RCIs and children living in them has significantly declined, showing a trend that is now more aligned with family-based care. The Royal Government has been able to control the increasing trend of institutionalization in the country, a long-running significant concern for the Cambodian Government and other child protection stakeholders. According to a 2018 inspection, 252 RCIs were inspected, with 7,634 children (3,634 girls) residing in those RCIs. However, an additional 13 RCIs were found to have no information and MoSVY continues to trace information about these RCIs. In 2019, 232 RCIs were inspected, with

6,778 children (3,317 girls) reported to be living in them. There was a reduction of about 43 per cent in the number of RCIs and 59 per cent in the number of children in RCIs since the mapping in 2015 (see Graph 1 and Tables 1 and 2).

Graph 1: Number of residential care institutions (RCIs)

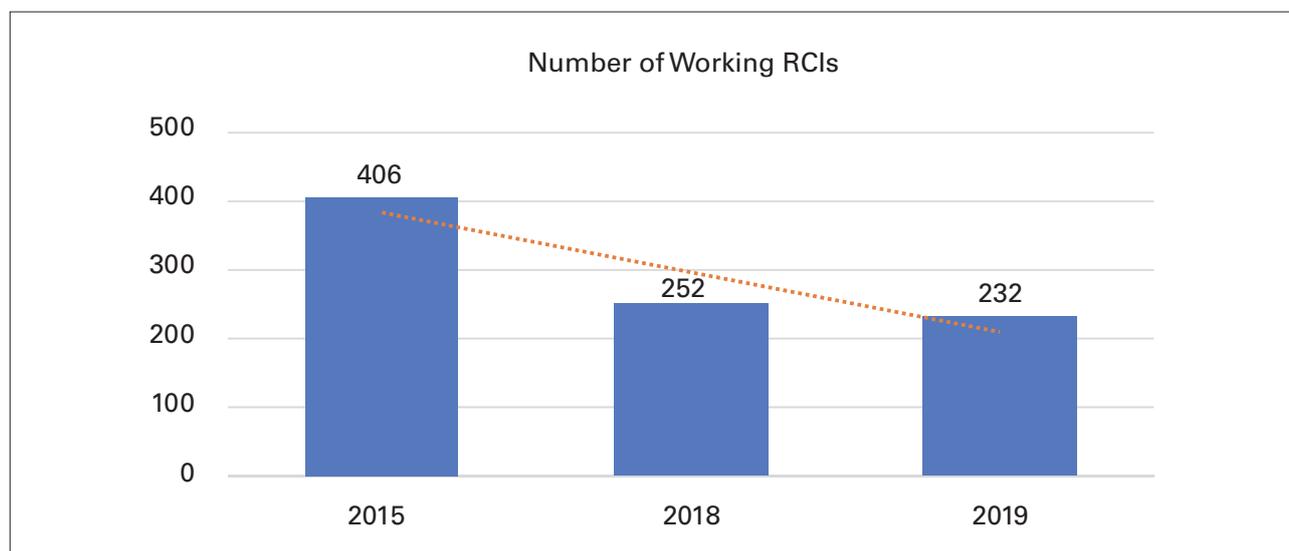


Table 1: Number of children living in RCIs in 25 municipalities and provinces

Description	2015	2018	2019
Number of girls	7,776	3,634	3,317
Number of boys	8,803	4,000	3,461
Total	16,579	7,634	6,778

Table 2: Number of children supported for reintegration or who left RCIs in 25 municipalities and provinces

Description	2018	2019	Total number of children	Percentage of Children Left RCIs since 2016
Number of children supported for reintegration or who left RCIs	8,945	856	9,801	59%

b. Inspection report in the five target provinces

According to the 2019 inspection, 4,209 children (see Table 3) are living in RCIs in the five target provinces (Phnom Penh, Kandal, Preah Sihanouk, Battambang and Siem Reap), which means that 7,579 children or 64 per cent, have left RCIs (see Table 4). Out of this, a total of 1,419 children received reintegration support from DoSVY and NGOs, while 6,160 children left the RCIs without DoSVY involvement (see Graph 2). DoSVY and stakeholders have been working to track all these children for case management purposes and to ensure they are safe.

Table 3: Number of children living in RCIs in the five target provinces

Description	2015	2018	2019
Number of girls	5,607	2,451	2,149
Number of boys	6,181	2,309	2,060
Total	11,788	4,760	4,209

Table 4: Number of children supported for reintegration or who left RCIs in the five target provinces

Description	2018	2019	Total number of children	Percentage of Children Left RCIs since 2016
Number of children supported for reintegration or who left RCIs	7,028	551	7,579	64%

Table 5: Number of working RCIs and reduced RCIs in five target provinces

Description	2015	2018	2019	Total
Working RCIs	267	147	135	
Number of reduced RCIs		120	12	132
% Reduction				49%

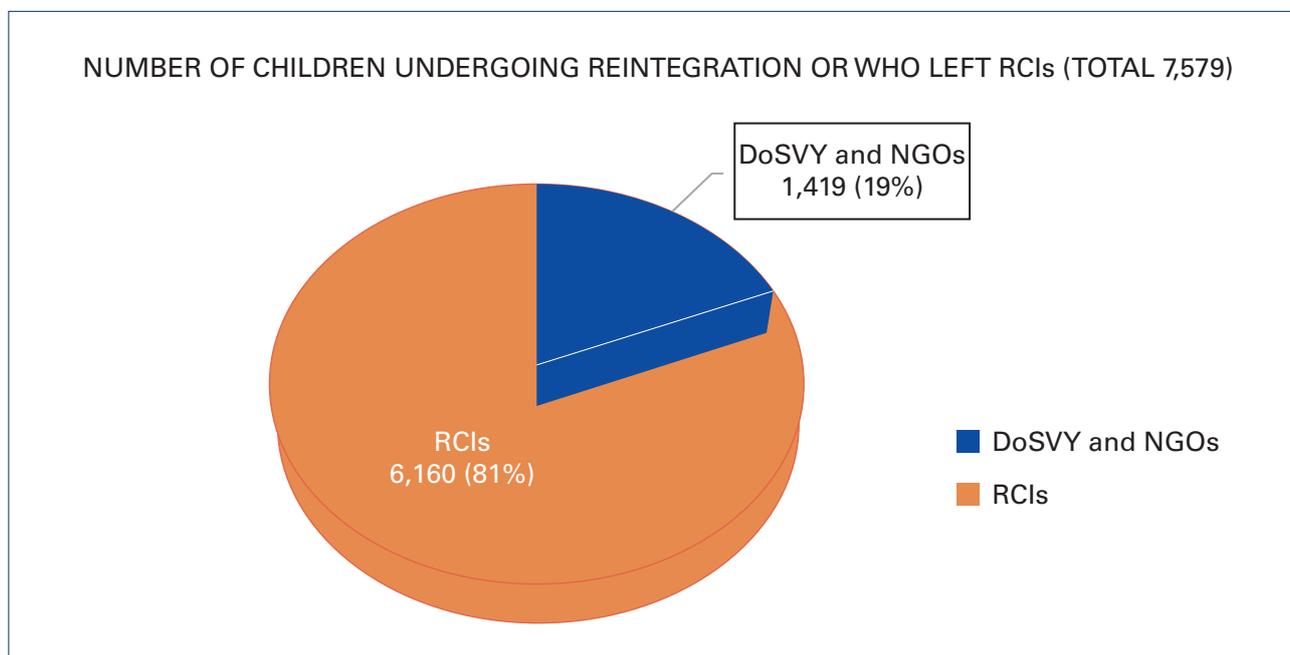
3.1.2 Reintegration report from the five provinces

According to the Child Tracking Tool, 1,419 children (41 per cent) out of the target of 3,500 children (see Table 7) have been supported by DoSVY social workers, 3PC and FCF-REACT partners to reintegrate to their families and communities from the five target provinces.

Table 6: Children undergoing reintegration within and from five target province vs. 3,500 target

Children Undergoing Reintegration				Total Target
Female	Male	Total	% Compared to Target	
720	699	1,419	41%	3,500

Graph 2: Number of children undergoing reintegration or who left RCIs vs. number of children undergoing reintegration supported by DoSVY, 3PC and FCF-REACT



- **Through this process, plans were developed and implemented in partnership with key stakeholders and the capacity of the service providers was enhanced:** MoSVY and five provincial authorities formulated national and provincial action plans for improving child care in a participatory manner, including with other government and non-government partners, religious leaders and commune councils. Although not all the targets have been met, the plan has set the pace for ongoing activities. Importantly, the capacity of service providers in the area of child protection has been strengthened.
- **Capacity of key government actors and stakeholders was strengthened, and basic social work mechanisms have been institutionalized within MoSVY:** The Royal Government and NGOs have access to much-needed human and financial resources to implement the Sub-Decree on the Management of Child Care Centres and the Action Plan for Improving Child Care. In addition, there are staff trained in child protection focusing on alternative care (MoSVY, DoSVY, WCCC, CCWCs and NGOs, including the 3PC partners, RCI staff and other NGOs). Thirty-two social workers were recruited (17 directly by MoSVY and 15 seconded from 3PC, with UNICEF financial support). These social workers provided much-needed capacity to conduct case management. Around 400 officials and stakeholders were reached through training, coaching and workshops on case management, upholding the best interests of the child, do no harm and following sub-national gatekeeping procedures, as well as the Action Plan for Improving Child Care.
- **For the first time, Cambodia has evidence-based data on the number of residential care facilities and children living in them.** Recognizing the gap in information about the number of residential care facilities, Cambodia has invested heavily in data management of residential

care, enabling evidence-based analysis. The mapping, digitization of the inspection system, and data on children being reintegrated from RCIs (using the child tracking tool) have assisted in understanding the big picture of residential care in Cambodia. Authorities now know how many children are leaving residential care, including how many are being reintegrated, and their well-being status. Importantly, the inspection system also provides disaggregated data on children and ratings on the level of compliance of RCIs against minimum standards, to facilitate follow-up actions from MoSVY. The online dashboard for both inspection and child reintegration is now available for relevant stakeholders. These are significant achievements for any ministry working with scarce resources and in a context where technology is yet to be extensively used in data management.

3.2 Key achievements against the 11 strategic actions

1. **The Sub-Decree on the Management of Residential Care Centres, as well as the commitment statement and existing alternative care regulatory framework** have had significant impact in controlling unplanned increases in residential care in Cambodia within just three years. A key objective of the sub-decree is to improve the quality and strengthen the effectiveness of residential care management, and this is underway. The key achievements are:
 - a. To better regulate the residential care sector, the Royal Government issued Sub-Decree 119 on the Management of Children’s Centres. Based on the sub-decree, MoSVY issued a notification letter to NGOs operating residential care centres to notify of their existence. As a result, 501 RCIs provided notification to MoSVY. MoSVY conducted site visits to those NGOs and issued authorization to 125 NGOs. Since 2015, no new RCIs have been given official permission to open.
 - b. From 2015 to 2019, the number of RCIs across the country was reduced by 174. Of these 174 RCIs, 77 closed (two were closed for failing to meet minimum standards, 43 were closed due to lack of funding and lack of support from donors, and the rest were closed for other, unspecified reasons). There were 24 re-classified as community-based care and 73 that were transitioned to non-residential care.
 - c. All the RCIs in the country were inspected using the digital app. Table 8 shows compliance based on the inspection of 232 RCIs in 2019.

Table 8: Evaluation of RCIs based on 2019 inspection

No	Description	Number of RCIs	Percentage
1	RCIs that meet the standards	98	42%
2	RCIs that do not meet the standards	59	25%
3	RCIs in critical situations	75	32%
4	Total RCIs that do not meet the standards	134	57%

A significant number of RCIs not meeting minimum standards of care is a big concern for MoSVY. MoSVY is following up with the RCIs that do not meet standards.

d. A total of 1,419 children, or 12 per cent of the 11,788 children living in RCIs in the five target provinces have been supported for reintegration. Of these 1,419 children, the cases of 1,359 children have been updated and entered into the Child Tracking Tool. Meanwhile, DoSVY focal points and social workers are following up on case updates for the remaining children and entering data into the Child Tracking Tool. Based on the Child Tracking Tool, the status update is:

- ✓ 1,021 children (75 per cent) are in the Green category (children who are in a safe and stable situation)
- ✓ 78 children (6 per cent) are in the Yellow category (children undergoing reintegration are in vulnerable conditions and require additional attention)
- ✓ 34 children (3 per cent) are in the Red category (children undergoing reintegration are in vulnerable conditions and require reassessment to identify risks and essential services for the children and families)
- ✓ 199 children undergoing reintegration have migrated with their families or moved location and cannot be located. Therefore, their case status has not been updated by the focal points and social workers, but the focal points and social workers continue to make efforts to trace them and ensure they are safe, as per the principles of MoSVY
- ✓ 87 cases have not been updated yet as the children have just been reunited or placed. Focal points and social workers will conduct the case update status of these children in 2020.

The evaluation of the safety and well-being of children undergoing reintegration is based on a number of criteria, including daily food and health, relationships with family, education, violence and abuse. The status of some children has not been evaluated, as they have moved to other locations or just been reunited or placed in family and community-based care and have not been followed up by the focal points. The child case status will continue to be updated by DoSVY.

e. As required by Sub-Decree 119 (article 9) MoSVY acted immediately when cases of abuse against a child were reported from RCIs. In 2017, four cases of abuse (all girls) were reported from two state-run RCIs (both were outside the five priority provinces), and these were investigated by MoSVY within 48 hours. Appropriate actions were taken. One of the girls has been reunified with her family, while three others have been transferred to rehabilitation centres. Another case of abuse was also reported in 2019, involving 8 girls in an NGO-run RCI outside the five priority provinces. MoSVY took immediate action when the issue came to their attention.

- f. As per Sub-Decree 119 and the commitment statement, MoSVY has stated a clear gatekeeping mechanism in the Action Plan for Improving Child Care to ensure that no child is placed in residential care unnecessarily. To ensure the implementation of the action plan, MoSVY has developed a series of trainings and has produced supplementary guidelines, such as the practice sheet for child protection on best interests of the child and do no harm, and the handbook for CCWCs on the action plan to help with the dissemination of information. These efforts have helped limit new enrolments into RCIs. In 2017, some 33 children were authorized to stay in state-run RCIs all over Cambodia. None of the children was under 3 years of age (as required by the commitment statement). However, 59 children were reported to have entered residential care in Battambang in non-state-run RCIs without appropriate authorization. MoSVY is aware of this and is tracking to ensure full compliance. Positively, due to increased training and guidelines, more and more children coming to sub-national authorities for placement at state orphanages are being re-directed for family stabilization support, with help from NGOs.
2. **A national framework for fostering and adoption has been developed.** The Royal Government, through the 3PC partnership, has been engaged in promoting and giving permission for foster care placements for separated children. From 2016 to the end of 2019, 59 children were placed in foster care as per 3PC reports. To further strengthen this continuum of care, a robust national framework was needed. Accordingly, an extensive capacity development plan for strengthening kinship care, fostering and adoption, including inter-country adoption has been developed based on the findings of an assessment jointly carried out by the Permanent Bureau of the Hague Conference on Private International Law (HCCH) and International Social Service (ISS). This was launched by the Minister of MoSVY in September 2018. The plan presents key findings and 23 recommendations, sub-divided into short-, medium- and long-term actions. The recommended actions are being progressively implemented, such as the establishment of a case management system for all children in care (Primer) and the development of more specific guidelines on kinship care, foster care and adoption.
3. **Sub-Decree 34 was launched in 2017 to devolve responsibility for providing child protection services from national to sub-national level.** Sub-Decree 119 required a phase by phase transfer of control of residential care centres to sub-national administration (Article 4). With reference to this sub-decree, MoSVY shall transfer the management of state child care centres to capital and provincial administrations, the responsibility for inspection of NGO residential care to capital and district administrations, and the management of community-based victim and vulnerable child care services to the capital, city and commune administrations, with funding and staff to be reallocated accordingly. Based on the sub-decree, MoSVY retains its role in setting policy, service standards and legislation, for setting guidelines, and for monitoring and quality control. The sub-decree puts in place a basic child protection system and provides an opportunity to take services closer to children. Its operationalization will be strengthened during the coming years. The current inspection process has already institutionalized this, as those conducting digital inspection are staff of district administrations.

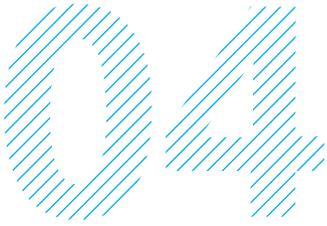
4. **The process for inspecting residential care facilities has been simplified and digitized, resulting in a more efficient system.** A significant achievement has been the digitization of the inspection process, which has converted the previous time-heavy, paper-based and cumbersome process to a more effective and timely monitoring process. The Open Institute provided technical support to develop an 'inspection app' on a digital tablet, and since 2018 it has been used by inspectors to monitor all residential care facilities all over Cambodia. All the inspectors (about 118 staff) involved in this process have been trained and are already operating the system.
5. **The social work capacity has been strengthened to support effective case management, family preservation approaches and broader child protection interventions.** Strengthened capacity of people and organizations involved in alternative care as a result of the implementation of the action plan has been of critical significance. Specifically, the placement of social workers at provincial level (32 social workers, 17 through DoSVY in the five target provinces, with UNICEF financial support, and 15 seconded from NGOs) increased the capacity of DoSVY to conduct case management of children undergoing reintegration more effectively, and as per required standards. All the social workers, as well as additional staff from provinces have been provided with a series of training on case management, case management forms, key principles and broader child protection. The government has recruited five of the social workers deployed to it as civil servants.
6. **Programme guidelines and standard operating procedures to guide the closure of RCIs, de-institutionalization and reintegration have been developed.** The implementation of the action plan has been guided by various programme guidelines dispersed across areas, including but not limited to the Policy on Alternative Care, minimum standards, Sub Decree 119, the action plan itself, child protection practice sheets on the best interests of the child and do no harm, case management forms, and case status update guidelines. In addition, the learning from the implementation process and the existing standards have been used to develop guidelines on the procedures for reintegration, de-institutionalization and closure of RCIs. The Child Welfare Department of the Directorate of Technical Affairs, MoSVY, completed a review of the draft guideline. UNICEF has engaged with Save the Children (as part of FCF-REACT), which is developing the 'Guidelines for the Reunification and Reintegration of Children from Residential Care'. While the former will facilitate MoSVY's role in overseeing the process for any RCIs that intend to close, transition or support the reintegration process of children, it references the 'Guidelines for the Reunification and Reintegration of Children from Residential Care' as the document to provide more detailed guidance on the reintegration process.
7. **The capacity of government officials and agencies working with abandoned children and children with disabilities in alternative care has been strengthened to provide a better quality of care, to support reintegration with families and communities, and to prevent institutionalization.** In collaboration with ISS Australia and with support from UNICEF, the Plan to Enhance Alternative Care for Children with Disabilities was developed. To implement the plan, 13 people were trained as national trainers. These trainers had provided further trainings to caretakers from RCIs so that they can better look after children

with disabilities, with 130 such caretakers already trained. Aspects on how to enhance alternative care for children with disabilities have also been integrated in the draft guideline procedures for kinship care, foster care and adoption, and will be integrated in the implementation handbook. Municipal officials, especially from Phnom Penh, have changed their approach to looking after children living and working on the streets. Instead of sending them to rehabilitation centres, they are now being referred to child protection service providers such as 3PC NGO partners, providing better services for abandoned children.

8. **Capacity at the sub-national and local level has been enhanced to prevent unnecessary separation, protect children deprived of parental care, and support the reintegration of children from residential care.** Various training, workshops and orientations were conducted to build the capacity of relevant stakeholders at various levels. Relevant training was provided to about 100 people from provincial and district WCCCs and district offices of Social Affairs, Veterans and Youth Rehabilitation from the five priority provinces. To better equip CCWC members, a handbook on the implementation of the Action Plan for Improving Child Care was developed and disseminated. Almost 2,000 commune staff from all the 516 commune/sangkat or district/khan/municipalities of the five priority provinces were trained on the use of this CCWC handbook, which will benefit children in these communes. These training events and various tools, such as the CCWC handbook, child protection practice sheets and the action plan itself, are useful reference tools available to officials doing reintegration and child protection related work in Cambodia.
9. **For the first time, MoSVY can track children who are being reintegrated through an online database, and the building blocks for a national child protection information management system (CPIMS) are in place. MoSVY, with technical support from the Open Institute, developed two digital tools:** a child tracking tool to enter data on children undergoing reintegration (the data has now been transferred into Primero database), and an inspection app, which is recording the total number of children living in residential care. This has built an evidence base on children in alternative care and gives MoSVY a significant advantage to provide better support to these children. Additionally, MoSVY has been working closely with UNICEF on the development and operationalization of a CPIMS for Cambodia over the last three years. Key progress has been the mapping of existing child protection information systems in Cambodia, high-level endorsement of the child protection monitoring framework and development of the CPIMS central dashboard, and the launch of Primero, a digital case management system to respond to child protection issues.
10. **The strategy for Cambodia PROTECT, a multi-ministerial national behavioural change campaign to prevent and respond to violence against children and unnecessary family separation has been developed.** The strategy for the Cambodia PROTECT Partnership is being implemented. MoSVY has started the 'Strong Family' campaign to end violence against children and unnecessary family separation, and has also been developing materials for the campaign. These include radio spots, TV spots and short message services (SMS).

11. **Parents and communities are being provided with better positive parenting knowledge and skills to enable them to create a nurturing and thriving environment for children.**

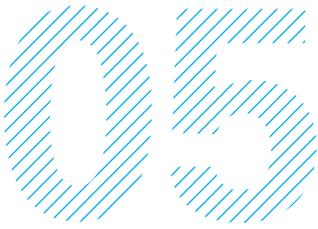
The Positive Parenting Strategy, along with the Level 1 Training Toolkit containing six modules and targeting the general community, and the Level 2 Toolkit containing 12 modules and targeting parents and caregivers, have been developed and approved by the Ministry of Women's Affairs. Level 1 and Level 2 parenting sessions are currently being rolled out at the community level, including to parents whose children have been supported for reintegration from RCIs. They have reportedly changed their negative coping practices and applied the positive parenting skills they learned.



LESSONS LEARNED FROM THE IMPLEMENTATION OF THE ACTION PLAN

1. With the right mix of policy, legislative reform and programmatic interventions, it is possible to better regulate the alternative care sector. Experience shows the need for sufficient checks and balances to ensure a smoother transition and effective and safe reintegration of children leaving residential care, especially reintegration caused by self-closure of RCIs without involving the government.
2. The impact of the sub-decree and action plan for improving child care was larger than expected, with 59 per cent of children leaving residential care against the 30 per cent target (see Table 2), although only about 12 per cent were through the process managed by DoSVY and 3PC partners. FCF-REACT also supported the reintegration of some cases. With clear and strong messaging from the top, complemented by grassroots level interventions, the policy implementation can achieve significant results. If enough resources such as social workers and checks are in place early on, children leaving without proper case management processes can be better managed while achieving a greater scale with quality. More time for preparation before the launch of such policies and plans would be helpful if similar processes are to be replicated elsewhere.
3. Effective reintegration of children leaving residential care was more difficult to achieve. It is important to ensure that all children in residential care have a case plan that is progressively supported for their reintegration into family-based care in future, and for permanency planning.
4. As important as high-level commitment and engagement at the national level is, operational leadership at the provincial level (such as from the focal points and WCCCs) was a success factor.

5. Social workers are the backbone of a functioning child protection system. The roll-out of ambitious plans, such as the Action Plan for Improving Child Care, needs more trained social workers at the grassroots level. On average, one social worker worked with about 13 children undergoing reintegration per year. This could be a useful guide for future planning.
6. RCIs showed themselves to be partners in the whole transition process, although not as early as desired, and not all of them. More focused collaboration, such as through individual support to RCIs, would have ensured a smoother process.
7. The timeframe for the operationalization of ambitious plans, such as the Action Plan for Improving Child Care should be longer, with sufficient time allocated for the planning phase.
8. Data management is a critical component for implementing policies and plans, both to monitor progress and generate evidence, and to ensure that the best interests of the child are upheld. While Cambodia invested successfully in this process, the lack of children's individual records with a central government agency before the implementation of the plan and sub-decree hindered the process of tracking some children who were living in RCIs that decided to self-close without involving the government.
9. Case management of children undergoing reintegration is complex and requires a range of services available throughout the process. Due to a lack of social services and systematic referral processes in developing countries such as Cambodia, sufficient preparation and links with relevant service providers not necessarily in child protection are key to ensuring successful reintegration.



RECOMMENDATIONS

The following key actions will be implemented as a priority:

Strategic Action 1: The implementation of the Sub-Decree on the Management of Child Care Centres	<ul style="list-style-type: none">a. As per Article 4, work with the Ministry of Cults and Religion and the Ministry of Education, Youth and Sport (MoEYS) to monitor residential care facilities under their controlb. As per Article 6, ensure all RCIs have authorization from MoSVYc. Continue working with UNICEF and relevant partners to develop a database for all children in alternative care, based on which case management plans will be developed for each childd. Take immediate action towards RCIs that do not meet the minimum standards of alternative care and inspect RCIs that have not yet been inspectede. Take action against RCIs opening without informing MoSVY and also those placing children in RCIs without relevant permissionf. In partnership with other stakeholders, trace all children returning from RCIs without informing MoSVY and DoSVYg. Follow-up with all RCIs where there has been a reduction of children and identify all children that left RCIs since late 2015, verify their well-being and safety, and support their reintegration when needed
Strategic Action 2: Fostering and Adoption Framework	<ul style="list-style-type: none">a. Implement fully the capacity development plan for strengthening kinship care, fostering and adoption, including inter-country adoption

Strategic Action 3: Transfer of functions to sub-national level	a. Promote effective implementation of Sub-Decree 34, and documentation of the process and lessons learned
Strategic Action 4: Simplification and digitization of the inspection process	a. Continue to review and improve the quality of the digital system
Strategic Action 5: Social workers	a. Find support for the deployment of more social workers to undertake case management covering a broader range of child protection concerns
Strategic Action 6: Programme guidelines and standard operating procedures	a. Approve the Guideline on the Procedures for the Closure of RCIs, De-institutionalization and Reintegration, and roll it out
Strategic Action 7: National capacity building	<p>a. Build capacity of relevant stakeholders on the new guidelines and plans on alternative care (such as on kinship care, foster care and adoption, children with disabilities)</p> <p>b. Find support to ensure government and non-government funding to implement the planned activities</p>
Strategic Action 8: Sub-national capacity building	a. Build the capacity of relevant stakeholders on the new guidelines and plans on alternative care (such as on kinship care, foster care and adoption, children with disabilities)
Strategic Action 9: Information management system	<p>a. Operationalize Primero for managing cases of children coming into contact with the child protection system (starting with government mechanisms) with a broader range of child protection concerns, and build connections with other systems such as OSCaR</p> <p>b. Expand the inspection app to cover monitoring of other service providers, including all alternative care services</p> <p>c. Roll out the CPIMS</p>
Strategic Action 10: Behaviour change campaign (Cambodia PROTECT)	a. Implement relevant communication strategies (Cambodia PROTECT)
Strategic Action 11: Positive parenting	a. Find support to integrate positive parenting as part of regular government programming in relevant ministries

