

Proposal to develop an International Classification of Alternative Care for Children

Expert Group on International Classification, 24 to 27 October 2023

Draft submitted for discussion

Background

The [United Nations Convention on the Rights of the Child](#) (CRC) calls on governments and other stakeholders to ensure the development of every child to the maximum extent possible and recognizes that every child should grow up in a family environment. To enhance the implementation of the CRC, the United Nations General Assembly adopted the Resolution on [Guidelines for the Alternative Care of Children](#) in 2009. The 2009 Alternative Care Guidelines set out the following main goals and objectives for child welfare and protection policies:

1. Prevention of unnecessary separation of children from their families and family networks.
2. If a child needs to be placed in alternative care: provision of supportive and protective care settings in a family-like environment, or in limited circumstances, a residential setting if ‘appropriate, necessary and constructive’ and ‘in the child’s best interests’.
3. For children in alternative care: work on safely reuniting and reintegrating the children with their families or family networks.

These objectives are based on the ample evidence and wide recognition of the immediate and long-term physical, psychological, emotional, and social harm and damage caused by family separation and unsuitable alternative care, especially if care is provided in institutions. In line with these obligations and policy commitments, many countries are making efforts to prevent family separation (where possible) and the institutionalization of children, reduce the number of children living in institutional care or to reunite children with their families (if in the child’s best interests).

Today, most children without parental care are living in family-based alternative care, such as kinship care, foster care, or other forms of family-based or family-type care. However, there are still hundreds of thousands of children in non-family settings such as residential care institutions. In certain countries, children in institutional care remain under parental care, or they may find themselves in residential care institutions that are not part of the country’s formal alternative care system.

Despite the existing obligations, policies and reform efforts, children in alternative care are frequently missing in official statistics and national and international indicator frameworks. The availability, quality, and comparability of data and indicators on children in alternative care have been studied:

- By the Conference of European Statisticians (CES): [2022 Guidance on Statistics on Children: Spotlight on children exposed to violence, in alternative care, and with disabilities](#)
- By Eurochild and UNICEF in their joint [DataCare initiative](#)
- By the European Commission during the preparatory action for a [European Child Guarantee: Feasibility Study for a Child Guarantee Target Group Discussion Paper on Children in Alternative Care](#) and by the Social Protection Committee Indicator Sub-Group mandated by the European Commission to develop an EU-wide monitoring framework for the European Child Guarantee

The results of these initiatives show that most countries collect some data on children in alternative care, largely statistics on stock and flow disaggregated by type of alternative care (residential, family-based) and by sex and age. However, the findings also clearly demonstrate that while some efforts have been made to standardize the measurement of alternative care for children across countries, different definitions and categorizations are used by many countries in administrative data systems and in surveys, which hampers the international consistency and comparability of statistics on this group of the population of children. Among the difficulties confronted in measuring alternative care for children are differences in acceptance of different types of care facilities as residential care at the country level, the distinction between residential institutional care and residential care provided in small-group homes, as well as the distinction between different categories of family-based care.

The CES guidelines conclude with a recommendation for countries to adopt standardized definitions and classifications for alternative care, for the two main types of alternative care (residential and family-based care), and for sub-types of family-based care and of residential care (e.g., institutional care). However, as the CES guidelines underscore, there currently exist no internationally accepted standard definitions or classifications for statistics on children in alternative care. The definition of alternative care and of the different types of care (e.g., residential care and family-based care) provided in the 2009 Alternative Care Guidelines do not serve the purpose of a statistical definition or classification.

Purpose

An International Classification of Alternative Care for Children would address the differences in the way that the two main types of alternative care for children, namely residential and family-based care, are defined through the introduction of standard elements of residential care and family-based care. The development would respond to a fundamental need for internationally agreed operational concepts, definitions and principles to ensure a standardized and consistent approach to collecting and classifying statistical data on alternative care for children.

The classification would also include an illustrative list of the types of facilities providing residential care for children, and of the various types of arrangements constituting family-based and family-type care. This list would aim to be as comprehensive as possible, while remaining open to including categories that may emerge in the future. It would further help to quickly characterize a facility and care arrangement, can be used in research for sampling, data analysis, or both, and be incorporated in policy for purposes of resource allocation and system differentiation.

The classification would be applicable to all types of data on alternative care for children, including administrative records as well as data collected in dedicated surveys on children in alternative care or specifically on children in institutions, or household surveys or censuses gathering demographic data on children living in formal or informal family-based care arrangements (e.g., foster care, kinship care).

The aims of a classification would be:

At the international level, to:

- Measure in a consistent and comprehensive way the various types and categories of alternative care for children, irrespective of differences in legislation across countries.
- Enhance comparability of statistics among countries.

At the national level, to:

- Be used as a model to provide structures and organize statistical data on alternative care for children across different data sources (i.e., administrative records and statistical surveys).
- Enhance consistency and comparability within and across sectors within countries. In some countries children are receiving alternative care in institutions run by different sectors, such as social welfare, health and

education, which collect and report data separately from each other, contributing to the multiplicity of definitions, interpretations and classifications rather than to their standardization.

- Provide the basis for disaggregating data on alternative care for children, including the minimum set of variables to be collected across data sources.
- Help raise the capacities of national statistical offices and line ministries to improve data quality on alternative care for children.
- Create data that consider issues of human rights and that will inform policy making, planning and programming and contribute to enhancing the capacity of national governments to develop, implement, monitor and evaluate better public policies and programmes to prevent unnecessary family separation and, if needed, provide suitable temporary alternative care for children, including for those who are more likely than other children to end up in institutions, deinstitutionalize children in institutions, and ensure safe transitions for all care leavers.

Process

To draft this classification, UNICEF will form a task force composed of representatives from national statistical offices and government entities, as well as academia, civil society organizations and international organizations. The task force will produce a first draft that will then be shared for technical review among key experts and revised accordingly. The advanced draft will then undergo further review through expert meetings, an online country consultation process and a multi-country testing. The final draft will then be submitted to the Expert Group on International Statistical Classifications for review. The process is expected to be completed by early 2025.