



Child Protection Document for Case Management in the Humanitarian Context

Child Protection Document for Case Management in the Humanitarian Context



This manual was drafted by:

Prof. Assoc. Irida Agolli, Local Expert

This publication is part of the project "Refugees, particularly children and women, have access to qualitative prevention and response services against abuse, violence, and neglect".

With the financial support of Unicef, implemented by Nisma Arsis, in partnership with Terre des hommes and Plan and Go.

Migrant children – whether accompanied (by family members, trusted adults, or a group of teenagers and young adults they have joined along the way) or unaccompanied or separated from family and friends – are considered vulnerable. This vulnerability can also be situational – stemming from their dependence on irregular migration routes, smugglers, etc., – and/or inherent in their status as children.

Unaccompanied or separated children are particularly vulnerable and the challenges they face require special responses. It is difficult to obtain accurate global figures regarding the number of children travelling independently, but their number is increasing. Many unaccompanied or separated children do not register with the authorities, either because they are unable or afraid to do so or because they have been advised by family, peers or smugglers to continue the movement to another destination. Still others are not allowed to contact the authorities, as they are controlled by traffickers and destined for sexual exploitation, work or other purposes.

The survival of unaccompanied and separated children may be threatened in armed conflict or other disasters. These children are more likely to have their basic rights violated and to be at risk of abuse, exploitation or recruitment into the armed forces. All children have the right to protection and care under a wide range of international, regional and national instruments. Of special importance for separated children are:

- the right to a name, legal identity and birth registration;
- the right to physical and legal protection;
- the right not to be separated from parents;
- the right to supplies for their basic living;
- the right to care and assistance appropriate for their age and developmental needs;
- the right to participate in decisions about their future.

The primary responsibility to ensure the survival and well-being of children rests with parents, family and community. National and local authorities are responsible for ensuring that children's rights are respected. Responsible institutions and all responsible actors must make efforts in urgent cases to protect family unity and avoid child-family separation.

This document is written for all actors working in the field of child protection, and presents a structured approach to the identification and support of particularly vulnerable refugee/migrant children (unaccompanied or separated children). The purpose of the document is to ensure that all stakeholders have the same understanding of the risks children face in emergencies and to ensure that children receive appropriate support in all situations where it is required.

Definitions according to Law No. 18/2017 “On the rights and protection of the child”

“Agency” means the State Agency for the Rights and Protection of the Child.

“Child” is any person under 18 years of age. If the age of the person may not be determined accurately, but there are reasons to believe that the person is a child, they shall be considered a child in the sense of this law, until the age is determined according to the law in force.

“Unaccompanied child” is the child separated by both parents or other relatives and who is not being cared of by an adult person, according to this law.

“Child in need of protection” is the person under 18 years of age, irrespective of having the capacity to act, according to the legislation in force, who may be a victim of abuse, neglect, exploitation, discrimination, violence or any criminal activity, and also the individual under the age of criminal responsibility, who is alleged to have committed or accused of the commission of a criminal offence, and the children in conflict with the law.

“Child protection” is prevention of and response to violence, abuse, exploitation and neglect of the child, including kidnapping, sexual abuse, trafficking and child labour.

“Corporal punishment” is any form of punishment in which physical force is used and intended to cause pain or discomfort to the child, by any person who is legally responsible for the child. Corporal punishment includes the following forms: smacking, torturing, shaking, pushing, burning, slapping, pinching, scratching, biting, scolding, pulling the hair, forcing an action, using substances that cause pain or discomfort as well as any other similar act.

“Child neglect” is the omission, whether or not intentional, by a person who is responsible for the upbringing, care or education of the child, as a consequence of which the life, physical and mental well-being and development of the child may be at risk.

Unaccompanied child: “is the child separated by both parents or other relatives and who is not being cared of by an adult person, according to this law.”¹

Separated children: “Separated from both parents or their guardian, but not necessarily other relatives. Therefore, these may include children accompanied by other adult family members.”²

The term ***“best interests of the child”*** broadly describes the welfare of a child. Such well-being is determined by a number of individual circumstances (such as gender, age, maturity level and their experiences) and other factors (such as the presence or absence of parents, the quality of the relationship between the child and the family/caregiver, and other risks). There are three aspects to the concept of best interest. They are:³

¹ Field Handbook on Unaccompanied and Separated Children. Inter-agency Working Group on Unaccompanied and Separated Children. Alliance for Child Protection in Humanitarian Action. 2017

² Field Handbook on Unaccompanied and Separated Children. Inter-agency Working Group on Unaccompanied and Separated Children. Alliance for Child Protection in Humanitarian Action. 2017

³ The Alliance for Child Protection in Humanitarian Action, 2019. Minimum Standards for Child Protection in Humanitarian Action.

- The fundamental right of the child: children have the right to have their best interests assessed and taken as primary consideration;
- A legal principle: if a legal provision is open to more than one interpretation, the interpretation that most effectively serves the best interests of the child should be chosen;
- Procedural rule: whenever a decision will affect a child, a group of children or children in general, the decision-making process must (a) assess the potential impact of the decision on the child/children in question and (b) show that the right of children taking their best interests as primary consideration is explicitly taken into consideration.

Law No. 18/2017 has tried to define the meaning of the best interest of the child, which means the right of the child to have a healthy physical, mental, moral, spiritual and social development, as well as to enjoy a family and social life appropriate for the child. In the implementation of this principle, the following are taken into account: a) the child's needs for physical and psychological development, education and health, safety and stability as well as growth/belonging to a family; b) the opinion of the child, depending on his/her age and ability to understand; c) the history of the child, taking into account the special situations of abuse, neglect, exploitation or other forms of violence against the child, as well as the possible risk that similar situations will occur in the future; ç) the ability of parents or persons who take care of the child's well-being to respond to the child's needs; d) continuity of personal relationships between the child and persons with whom he/she has kin, social and/or spiritual ties.

A Best Interests Assessment (BIA)⁴ is an assessment made by the staff taking action in relation to children, unless a BID is required, designed to ensure that such action gives primary consideration to the best interests of the child. The assessment can be done alone or in consultation with others by the staff with the required expertise and requires the participation of the child.

Best interest determination (BID)⁵ describes the formal process with strict procedural safeguards designed to determine the best interests of the child for particularly important decisions affecting the child. It should facilitate adequate participation of children without discrimination, involve decision makers with relevant areas of expertise and balance all relevant factors in order to evaluate the best alternative.

The CRC also provides a broader framework to consider in the process of determining the best interest. The following articles of the CRC are particularly important :⁶

Article 9: Unaccompanied and separated children

1. (...) that a child shall not be separated from his or her parents against their will, except when competent authorities subject to judicial review determine, (...), that such separation is necessary for the best interests of the child. Such determination may be necessary in a particular case such as one involving abuse or neglect of the child by the parents, or one where the parents are living separately and a decision must be made as to the child's place of residence.
2. (...) all interested parties shall be given an opportunity to participate in the proceedings and make their views known.
3. States Parties shall respect the right of the child who is separated from one or both parents to maintain personal relations and direct contact with both parents on a regular basis, except if it is contrary to the child's best interests.

⁴ UNCHR (2018). GUIDELINES ON ASSESSING AND DETERMINING THE BEST INTERESTS OF THE CHILD

⁵ UNCHR (2018). GUIDELINES ON ASSESSING AND DETERMINING THE BEST INTERESTS OF THE CHILD

⁶ UN General Assembly, Convention on the Rights of the Child, G.A. res. 44/25, annex, 44 U.N. GAOR Supp. (No. 49) at 167, U.N. Doc. A/44/49 (1989).

4. Where such separation results from any action initiated by a State Party, such as the detention, imprisonment, exile, deportation or death (...) of one or both parents or of the child, that State Party shall, upon request, provide the parents, the child or, if appropriate, another member of the family with the essential information concerning the whereabouts of the absent member(s) of the family unless the provision of the information would be detrimental to the well-being of the child (...).

Guiding principles

Principles of children's rights in relation to unaccompanied, separated children.⁷

Family unity – or integrity of the family – entitles all children to a right to a family, and families to a right to care for their children. Unaccompanied and separated children must be provided with services aimed at reuniting them with their parents or primary legal or customary caregivers as quickly as possible, if this is in their best interests.

The best interests of the child constitutes the basic standard for guiding decisions and actions affecting individual children, whether by national or international organizations, courts of law, administrative authorities or legislative bodies.

The right to life, survival and development of the child entitles all children, including unaccompanied and separated children, to have their lives protected and for them to grow and develop healthily, including with access to the resources necessary to achieve their maximum human potential.

Participation and respect for the views of the child underscores that all boys and girls should be able to express their views, and that these views should be respected and given due weight in relation to the child's age and maturity. Children must be kept informed and, as far as possible, involved in decision-making and plans concerning their placement, care, tracing and reunification. Programmes should actively engage children in the prevention of and responses to family separation.

Non-discrimination, a basic tenet of international human rights and humanitarian law, stipulates that the protection and guarantees of international law must be granted to all, regardless of nationality, ethnicity, gender, age, ability or other status. This includes, in particular, girls and their specific needs, as provided for in the Convention on the Rights of the Child, the Geneva Conventions and their Additional Protocols.

⁷ Field Handbook on Unaccompanied and Separated Children. Inter-agency Working Group on Unaccompanied and Separated Children. Alliance for Child Protection in Humanitarian Action. 2017

Confidentiality, informed consent for unaccompanied and separated children

Confidentiality

Confidentiality must be a primary element when working with unaccompanied and separated children. Confidentiality is important to keep children safe, to protect their dignity and well-being and to establish and maintain trust. This means, for example, not writing a child's name on the outside of a folder or on his/her picture, or unnecessarily discussing a child's situation with those who do not need to know for identification, documentation, tracking, reunification or protection purposes. However, confidentiality does not mean never discussing the case. For example, protection workers may need to discuss cases with professionals, or other caseworkers.

Most of the time, agreement or consent is obtained from a child/guardian to share information with others. However, in some cases, information is shared without agreement; indeed, respecting the child's best interests may sometimes mean overriding their desire to keep information confidential. In such circumstances, "limited confidentiality" applies. "Limited confidentiality" refers to situations in which there may be legal or other obligations that override the individual's right to confidentiality. Limited confidentiality applies when:

- There are concerns for the safety and welfare of a child/young person that require information to be shared (for example, with relevant service providers).
- A criminal offense has been committed and the law requires it to be reported to the police or other authorities (under mandatory reporting laws).

Institutions working with unaccompanied and separated children should be aware of any mandatory reporting requirements in their context and of the level of legal protection they and their staff members enjoy in that country (immunity from legal processes). "Where there are concerns that some actors may not be able to maintain confidentiality, or if reporting may endanger them or the child, decisions must be made on a case-by-case basis and must be guided above all by the best interests of the child."

When informed consent is obtained, each institution's confidentiality laws and limits, including mandatory reporting requirements, should be properly explained to the child/guardian.

Informed consent for unaccompanied and separated children

Before proceeding with documentation, case management and any other action related to care and protection (e.g. referrals), it is necessary to obtain “informed consent” from the child.

Informed consent: “The voluntary agreement of an individual who has the capacity to consent and who exercises the free power of choice. In order to give “informed consent” the individual must be able to understand and make a decision about their situation. Informed consent may be sought from a child or the child's guardian⁸ according to the child's age and maturity level.”

“Informed consent⁹ is the expressed willingness to participate in services. For younger children, who by definition are too young to give informed consent but old enough to understand and agree to participate in services, the child's “informed consent” is required.”

Consent, or if consent is not possible, one of the alternative legal bases, may be needed from the child and/or guardian at different stages of the case management process for different actions or decisions. For example, consent must be obtained for permission to conduct an interview, for permission to share information for service delivery purposes, etc. In addition, consent will also be required in relation to various services provided to unaccompanied and separated children - for example, for reunification or for registration in a particular activity.

1. Consent to the processing of personal data

Scenario A: The child is able to give consent

The right to the protection of personal data is part of the fundamental rights to protect the private life (including family life, home and correspondence) of an individual against interference by others. Among other things, the right to data protection requires that a clear legal basis be established during the collection and processing of personal data.

Consent is the preferred legal basis for processing personal data (such as registering a person, exchanging or transferring personal information to a third party, etc.) whenever the recipient is able to provide a freely given, specific indication and informed wishes. Consent may be given either through a written, oral or other statement or by a clear affirmative action by the beneficiary signifying his/her consent for his/her personal data to be processed. It is important that in making this decision, the beneficiary is able to fully consider the risks and benefits of the processing procedure.

In order to determine whether the individual concerned is capable of giving consent, consideration should be given to the various potential elements of vulnerability that may affect him/her. Age is one of them. There is no hard-and-fast “legal age of consent”. Different countries may have different rules on this topic (in most cases there are no such rules). More importantly, children's maturity level varies from context to context and from child to child. In some contexts, beneficiaries may not be aware of their exact date of birth or may not have accurate information about their age.

⁸ (Child Protection Working Group, Minimum Standards for Child Protection in Humanitarian Action, 2012, Standard 5: 'Information Management', p. 66, 67.)

⁹ International Rescue Committee and UNICEF, Caring for Child Survivors of Sexual Abuse: Guidelines for health and psychosocial service providers in humanitarian settings, 2012, p. 16.

The child protection worker should seek informed consent by explaining in plain, age-appropriate language why the information is being sought and what it will be used for, including how it will be shared. "Informed" means that the child truly understands the importance and risks involved in any action that may be taken and that his/her decision is made based on full information. Likewise, institutions should undertake a risk analysis of what it means for the staff to take action with children's informed consent.

In addition, the consent must be documented and specify at least the following points:

- Purpose of collection (for example, tracking, referrals to services, etc.)
- Extent of consent (if there are restrictions on data processing or sharing, etc.).

Scenario B: The child is unable to give consent

If a child is unlikely to be able to give such consent, particularly where the child is too young or the decision is too grave for the child to give consent, then institutions can proceed in one of two ways:

a. Process data in the best/vital interest and/or for important reasons of public interest (this case applies to national and international organizations in the performance of their respective mandate, when this mandate is recognized by law).

This would include:

- In the case of vital interest, when there is information that in the absence of action, the beneficiary may be at risk of serious physical or moral damage.
- In the case of the highest interest, the objective is to consider what is most favourable to the welfare of the child to prevent any negative consequences that may result from the processing of the child's personal data.
- In the case of important situations of public interest, being clear that the specific data processing is within the mandate given to the international organization according to the legal instruments in force.
- In any case, clear information must be given to the beneficiary regarding the proposed data processing procedure.
- Ensuring that the beneficiary has the right to object.
- Ensuring that data processing is in the best interests of the individual.

b. Process data based on a guardian's consent.

A guardian is the person who has the authority to decide for a child under national law (a parent, a person designated by law or a relative).

This would include:

- Providing full information to the guardian and signing the consent.
- Ensure that the child is clearly informed and his/her views are taken into account.
- Ensuring that the processing is in the best interests of the child.

However, this should only happen when it is in the best interests of the child to inform/obtain consent from the guardian. Regardless of consent given by a guardian, information cannot be shared when it is not in the best interests of the child.

2) If consent is refused

A. If children refuse consent

Some children may not be willing to give consent because they are confused, anxious, afraid, suspicious, or for other reasons. When children refuse consent to tracking, gently explore their reasons and support them in making a decision that is in their best interests, making sure they understand the process and purpose of the data processing. If consent is still not given, a comprehensive assessment must be carried out by the child protection worker (PMF) to identify whether data processing is in the vital/best interests of the child.

B. If guardians refuse consent

Sometimes guardians may refuse to give consent on behalf of a child if they do not understand why information or actions about the child are needed or if access is not culturally appropriate. Guardians may also try to withhold information about the child, especially if they are abusing or exploiting the child. To address such situations, the staff must again clearly explain why the information is being collected or the actions taken, the purpose for which the information will be used and the potential benefits to the child. Similarly, explain the consequences of not giving consent, for example, to the health or welfare of a child. Depending on the situation, it may be necessary to seek mediation from community leaders or representatives of religious institutions. In all situations, the best interests of the child must be paramount. If consent is still not obtained, a comprehensive assessment by the PMF of the case must be carried out to identify whether data processing is in the vital/best interests of the child.

Prioritization

Where there are large caseloads of unaccompanied and separated children and limited resources, it may be necessary for senior staff and those interviewing children to prioritize action. Using an agreed prioritization system, both internally and across relevant organisations, can help manage caseloads and ensure that tracking is carried out effectively and efficiently.

In refugee settings, an efficient way to prioritize is to ensure that child protection personnel are present at registration points and that registration staff are trained to identify unaccompanied and separated children. When unaccompanied, separated children are identified, they can be referred to child protection workers, who can conduct a rapid best interest assessment to screen and prioritize the child.

Prioritization involves finding information about the child's immediate circumstances during identification and documentation in order to determine urgent actions. Asking a number of simple questions is often sufficient, although in some cases this information may not become apparent until the child is documented. The purpose of collecting this information is to allow the caseworker to decide which children have a high chance of rapid reunification or a high level of vulnerability.

Child protection case management and the best interest procedure in refugee settings¹⁰

- Child protection case management is “a way of organizing and carrying out work to address the needs of an individual child (and their family) in an appropriate, systematic and timely manner, through direct support and/or or referrals.” The best interest procedure is the child protection case management framework.
- Refugee protection case management is an integral part of UNHCR's operations worldwide and covers registration, determination of refugee status, identification of durable solutions or follow-up of protection concerns raised by refugees. In refugee settings, the best interest procedure will always be an integral part of the wider refugee case management process.
- The application of the best interest procedure is not a separate activity. Instead, it should be seen and implemented as part of a broader child protection program that represents a comprehensive approach to protecting children from abuse, neglect, exploitation and violence, and ensuring non-discriminatory access to services and solutions.
- The application of the best interest procedure should be based on coordinated and comprehensive services for children at risk. This means taking a multi-sectoral and multi-stakeholder approach to child protection programming, where the best interest procedure is one component of a larger child protection strategy.

Durable solutions are those that ensure that unaccompanied or separated children are able to grow up in their country of origin or habitual residence, in the host country or in a third country, in an environment that meets their needs and fulfils their rights as defined by the Convention on the Rights of the Child and does not put children at risk of persecution or serious harm.

Solutions should not assume that age is the only risk factor in the case of a vulnerable migrant child. Simply allowing a child to remain in a state until he/she turns 18, potentially either because he/she does not have a passport to confirm his/her citizenship or because the state has been unable to trace the family or previous guardian, it is not a meaningful solution either for the state or for the child. This may lead to the child experiencing prolonged detention and/or being homeless, missing or vulnerable to trafficking networks when he/she turns 18 and is no longer entitled to support and housing or leave to stay in the host country as a child. Furthermore, states should not postpone decisions on children's right to international protection or conclusions in the BID process until unaccompanied or separated children become adults. Any delay not necessitated by the individual circumstances of an unaccompanied or separated child is likely to exacerbate the child's anxiety about his/her future and, consequently, may lead to psychological and emotional harm.

Case management is a key tool in child protection work. It provides the framework for assessing, planning and managing the protection needs of children at risk in a structured and systematic way. Not all children will need individual follow-up and case management. However, immediate and long-term interventions for children identified at risk require a decision-making system that is supported by accountability and consideration of the child's best interests.

¹⁰UNCHR (2018). GUIDELINES ON ASSESSING AND DETERMINING THE BEST INTERESTS OF THE CHILD

The case management process requires a caseworker to identify and, on a case-by-case basis, take action on issues affecting a child or family. Structured case management is a central function of any child protection or social welfare system, whether in emergency or non-emergency settings, including governmental and non-governmental structures.

Tracing family members and reuniting unaccompanied, separated children can be a long and complex process, often involving a number of actors. At the same time, it may be necessary to address protection issues in addition to identification, documentation, tracing and reunification activities for that child, including the provision and monitoring of appropriate care, health or psychosocial support. Case management enables all interventions and information related to the identification, documentation, tracing, reunification and protection of a child to be coordinated and managed without losing sight of the long-term goal of family reunification.

1. Identification of children at risk and children in need of further assessment and support

Unaccompanied minors sometimes migrate and arrive without any form of documentation or identification. An important and initial step is to assess the individual's age. If the individual is under 18 years of age, he/she is classified as a minor and protection will be provided taking into account the best interests of the child. If the minor has documentation that establishes his/her age, it may be used, but only if the document(s) are deemed reliable. Additionally, a child may be asked to provide his/her age, but it should be noted that children, in certain circumstances (for example, when their objective or purpose for migration is to seek work), may be less honest about their age. In these circumstances, it may be in the best interest of the child to:

- have further conversations with the child to ensure that he/she is indeed under 18; and/or
- carry out an age assessment to make sure the child is under 18 years of age. This includes a visit to a doctor or clinic where tests can be done to estimate the child's age.

Preliminary identification is a procedure whereby refugee/migrant children at risk of further harm who need support and referral for further assessment with a view to protecting their best interests are rapidly detected and identified.

When does preliminary identification start?

Preliminary identification begins immediately with the arrival of a new group of refugees/migrants in the territory of Albania, so it is a constant task of child protection workers. It can be done at the border crossing point, refugee/migrant reception centre or other meeting point for refugees/migrants, or other places where the child is.

Who is responsible for preliminary identification?

Frontline workers may perform various tasks that bring them into contact with refugees/migrants. It is not necessary that these individuals have knowledge, skills and experience in working with children.

They can be:

- Police officers performing preliminary identification tasks during their regular job of registering refugees/migrants, ensuring security in reception centres and performing regular tasks within their mandate;
- Staff trained to work with refugee/migrant children employed or engaged as collaborators or volunteers by international and national civil society organizations (CSOs) specialized in providing support to refugee/migrant children and working with children in general;
- Staff engaged by international and national CSOs providing various forms of support to refugees/migrants (e.g., distributing clothes, providing food, facilitating telephone contact of refugees/migrants with their families and loved ones, etc.);
- Professionals employed in the social protection system

What preliminary identification steps should be taken?

Two key steps are defined in the preliminary identification. The first is **observation**, and the second is **rapid screening**. Referral procedures to be undertaken are defined for both steps.

Step 1: Observation

The first step in preliminary identification is to observe a group, family or unaccompanied child. The purpose of this step is to recognize, within minutes, children who are at higher risk compared to other refugee/migrant children. Observation refers to the process of observation, based on designated observation areas, without verbal or physical contact with the refugee/migrant child or the person(s) in his/her vicinity during the observation. For the purposes of this document, observation takes the form of a structured observation, the areas of which should be familiar to front-line workers. If he/she finds data/information that matches some of the defined fields, records them in the appropriate form (Annex 1 - Form for the implementation of preliminary identification indicators).

Step 2: Rapid screening

Rapid screening is the second step of preliminary identification. Rapid screening is an assessment undertaken to ascertain with a higher level of certainty whether the child belongs to one of the particularly vulnerable groups of refugee/migrant children, that is to know the risk to which the child is exposed. It is undertaken when the frontline worker is not sure, based on observation alone, whether the child belongs to a particularly vulnerable group that needs further assessment and support. The rapid screening is carried out by asking some basic questions necessary to know if the child is one of the vulnerable categories at risk. After the screening, the frontline worker registers the child in the vulnerable category to which the child belongs according to his/her assessment in Annex 1 of the Form and takes actions for further referral of the child. He/she informs the child and the adults who are with him/her about the procedures and facilitates the contact between the child and the people who will work with him/her further on.

If you have identified a child, you will need to take immediate action to address concerns related to protection, safety or health. The first step should always be assessment, including immediate protection concerns and precautionary measures. You may then need to address urgent safeguarding concerns through immediate intervention or referral, also starting the process of documenting the child for family tracing/identification. This should include referral to relevant services or organisations/institutions.

The identification process can also reveal other protection issues and context-specific risks for children. Unaccompanied, separated children, especially refugees, migrants and asylum seekers, may be affected by the following threats, including: arrest, neglect or discrimination within their care

environment, child labour, sexual exploitation, abuse or violence, recruitment by armed forces or armed groups, risk of recruitment, previously trafficked or at risk of being trafficked, forced early marriage and lack of documentation and loss of identity.

These risks are an indication of the need for further evaluation and follow-up. In addition, immediate responses that may be required include:

Immediate care and protection

- Removing a child to a safe and secret location, if necessary. Where trafficked children are cared for, their location should never be made public.
- Identification of children believed to be trafficked. This is very important to ensure that they are provided with appropriate support and that their condition does not worsen; trafficked children are victims of serious crimes and special security measures and procedures are needed.
- Protect survivors of sexual violence from further harm caused by inappropriate or insensitive interventions and ensure that they are interviewed only by those responsible for conducting such interviews, respecting their dignity and rights.
- Organize emergency medical screening and treatment, including child-friendly sexual and reproductive health care and referral to partners who are able to provide specialized services and support to survivors of sexual violence.
- Keep children safe from further harm, including ensuring that measures are in place to prevent sexual exploitation and abuse (for example, checking and training carers on how to keep children safe and accepting that survivors of sexual abuse/violence have a high risk of re-maltreatment).

Identification of separated and unaccompanied children

Sometimes only unaccompanied children are identified, as staff may believe that separated children are traditionally cared for by their relatives and identifying separated children disrupts traditional forms of care. However, it should be noted that separated children may be at risk of unequal treatment compared to other children in the family: they may be subject to abuse, neglect, violence and/or exploitation or may wish to be reunited with their parents. It is therefore important to conduct a best interest assessment of the child to determine if they need case management and referral to services.

Continuous information campaigns at different levels are needed to identify real separated and unaccompanied children and to avoid false registration. It is essential to clearly explain the criteria that determine which children are unaccompanied or separated and should be documented as such. Registration of unaccompanied and separated children may be seen as an opportunity for financial or material gain. Some parents may deliberately direct their children to register as unaccompanied, separated or orphaned children in the hope of receiving extra food, material support or taking advantage of relocation options. More holistic child protection programs that target children at risk more broadly (rather than focusing only on unaccompanied and separated refugee children) can help prevent false cases of unaccompanied and separated children.

In general, unaccompanied and separated boys are more easily identified than girls. Therefore, data on unaccompanied and separated children should be carefully analyzed to ensure that, for example, the identification mechanism used captures both girls and boys who are unaccompanied or separated. Specific groups of unaccompanied, separated children that are easily missed in the identification process include:

- Unaccompanied or separated girls: they may be “invisible” when accepted by the extended family or a foster family (e.g., by providing domestic services to the family) and may not be identified as unaccompanied or separated from the community;
- Unaccompanied, separated children under 5 years old;
- Married with unaccompanied, separated children;

- Unaccompanied or separated children in institutional care;
- Refugee or displaced children who live and work on the streets (these children usually have parents or relatives, but for one reason or another they do not live with their family);
- Unaccompanied and separated children living in host communities.

2. Case referral

According to Decision No. 111, dated 6.3.2019, “On the procedures and rules for the return and repatriation of the child”, point 10, employees of the Border and Migration Department, employees of the State Police or of the structures responsible for asylum or refugees, within 12 hours from the finding or notification that in the territory of the Republic of Albania an unaccompanied child appears or remains, refer the case to the child protection worker (hereinafter, PMF) in whose territory the child was found, officially informing, in any case, the Agency for the Child's Generalities and Nationality, if they are known, the exact location of the child, as well as any other data that shows the way of treatment and his/her condition. They make an immediate verification of the child's age and, until the age is precisely determined according to the legislation in force, he/she is presumed to be a child and treated as such.

Frontline worker during case referral:

- Informs the child and the person(s) responsible for the child about possible support and organizations/institutions that will provide for the child;
- Provides basic support depending on the need (food, clothing, hygiene, communication, etc.);
- Accompanies the child and the responsible person to the organization/institution that provides support.

According to Decision No. 111, dated 6.3.2019, “On the procedures and rules for the return and repatriation of the child”, point 11, in the case of stateless children, the authority responsible for asylum and refugees, the Borders and Migration Department and the State Police make all possible efforts to find the habitual residence of the unaccompanied child. For this category, as part of the determination of the best interest of the child, all possibilities for granting a residence permit on humanitarian grounds will be considered if other conditions are not met.

3. Initial assessment based on the best interest of the child

The initial assessment of the child is a procedure where concrete risks to the child's safety and development and his/her support needs are ascertained, and he/she is referred for further assessment and support. This is the first step in which the best interests of the child are assessed.

The aim of the initial best interest assessment is to ensure that the child is provided with the necessary support by relevant professionals and care workers, in the shortest possible time and in accordance with the level of risk and the needs of the child.

The child protection worker who conducts the initial assessment:

- ascertains the initial level of risk for the child;
- ascertains the initial needs of the child for support;

The PMF, in whose territory the child is located, makes the initial assessment of the case, through the verification of his/her generalities, place of residence and citizenship, the state of the treatment being given to him/her, as well as prepares a detailed informative report on the reasons of unaccompanied entry and stay in the territory of the Republic of Albania. This report is prepared within 48 (forty-eight) hours from the moment of reporting the case and forwarded to the agency, also reflecting the opinion of the child regarding his/her return or not. The PMF follows the steps for the appointment from the beginning of a legal guardian for the unaccompanied child, according to the legislation in force. The standard format of the case reference and the report prepared by the PMF is approved by order of the director of the agency.¹¹

The evaluation of the child's best interest begins with the identification phase, the completion of the documentation at the first moment that a foreign child has been met in the territory of Albania as a refugee, migrant or applicant. This phase of the best interest assessment procedure means the prevention of any form of risk for the child and the more detailed identification of the child's developmental needs, as well as the preparation for further referral for specific, professional services, in the most optimal time frame without risking at all times the well-being of the child and the specific capacities and needs of each child individually.

The professional who performs the assessment of the best interest at the initial stage determines:

- the level of risk to which the child is exposed;
- the security needs;
- the health needs;
- the development needs;
- refers further to specialized services for assessment and assistance.

The assessment and determination of the level of risk for the child are carried out simultaneously with the provision of the initial help necessary for the child. This ensures higher reliability and, most importantly, the timely fulfilment of the child's basic and emotional needs, thereby reducing the negative effects of any previous harmful experiences the child may have had. This also respects the fundamental rights of the child.

The basic needs of refugee/migrant children as defined by UNHCR are:

- security and emotional stability,
- individual and consistent care from at least one adult, if possible with a similar linguistic and cultural background,
- continuity of existing relationships with adults and children,
- continuity of social, educational ties and cultural and religious practices,
- help in overcoming individual problems,
- an environment that enables stability and minimizes the possibility of further stress, especially for unaccompanied minors,
- continuity in maintaining community and cultural ties,
- sustainable nutrition.

¹¹ Decision No. 111, dated 6.3.2019, "On the procedures and rules for the return and repatriation of the child"

In assessing the child's risk, it should be kept in mind that the primary goal of all actions is the well-being of the child and the reduction of harm to the child. In this regard, no assessment is possible and no assessment will provide the relevant data desired, if it is not carried out in the safest possible situation for the child, if it does not enable the child's rights to be respected and the child's basic needs to be met.

Children with a higher level of risk are considered:

- Children under 14 years of age;
- Unaccompanied children who have been separated from their parents/guardians during the move or have lost them during the move;
- Children travelling in a group unaccompanied by a responsible adult;
- Children victims of torture who have experienced or witnessed traumatic events;
- Children victims of domestic violence or neglect;
- Children victims of human trafficking;
- Children victims of human smuggling;
- Children with disabilities;
- Girls;
- Children born during the trip and newborns.

Gaining the child's trust and cooperation and providing emergency support if needed

In this step, the PMF:

- works to establish contact with the child and gain the child's basic trust through reassurance and alleviation of the child's anxiety. At the same time, the PMF gives the child basic information about who he/she is talking to, where he/she is at the moment, what the next steps will be, etc.;
- works to obtain the informed consent of the child for the further procedure, determining the method of obtaining consent in accordance with the age of the child;
- checks that the child's basic needs are met and provides the necessary emergency support if necessary, e.g., food, water, shower, rest, sleep, etc.

According to Decision No. 111, dated 6.3.2019, "On the procedures and rules for the return and repatriation of the child", point 13, obtaining information from the child is done with the help of a psychologist or an adult who knows the nature of the child well or enjoys his/her trust, and in the language he/she understands, through the provision of an interpreter, in accordance with his/her age and ability to understand. The agency announces the complete list of translators and psychologists, who are available to the PMF throughout the territory of the Republic of Albania

Conducting the assessment

In this step, the PMF assesses the risk to the child and determines the level of risk.

- Evaluates high and medium risk assessment indicators (see risk indicators, Annex 2).
- Interviews the child and applies appropriate assessment instruments and methods. If the child is very restless during the assessment, the assessment is stopped and the child is allowed to rest. During this interview, the field worker tries to obtain other necessary data about the child: data about the family, protective factors available to the child, his/her self-defence skills and other important data about the child in question.

- Informs the child about the findings in a manner understandable by the child and, together with him/her, formulates the conclusions of the assessment and agrees on further activities and introduction to other professionals who should be involved in the assessment and support of the child.
 - Gives the child psychological first aid.
- **High risk** to the child is determined when there is a high probability that the child will be seriously harmed, abused or exploited if he/she remains in the current circumstances without emergency protection. Within the developed indicators, high risk is defined through two groups of indicators: high risk indicators for all children aged 0-18 and indicators of specific high risk factors for children aged 0-14.
 - **Medium risk** for the child is determined when it is observed that the child has behavioural changes that indicate continuous stress and/or there is a possibility of injury to the child or insufficient protection by the parent/guardian/responsible adult in the future period. Inadequate protection can exacerbate a child's negative experiences. There is no evidence that the child is in imminent danger of injury or death. There is concern about the possibility of greater harm to the child if protective measures are not taken.
 - **Low risk** is considered when the child exhibits adaptive behaviour to the risks of migration and long travel. There is protective behaviour on the part of the parent/guardian/responsible adult. There is no concern about the possibility of further harming the child during the journey ahead.

In-depth assessment

An in-depth assessment is an assessment where information is gathered on various aspects of the best interest, along with a more in-depth risk assessment if necessary after the initial assessment.

In-depth assessment is a more complex procedure consisting of different assessment activities that can address different aspects of the child's situation (health, personality, resilience, etc.). In-depth assessment is an activity that is carried out based on the decisions of the PMF. The decision to carry out an in-depth assessment can be made by a professional independently or by agreement reached within a team formed for the child in question. In certain cases, the in-depth assessment may be carried out by different professionals. In order to make valid decisions based on in-depth assessment, it is necessary to collect data from all professionals involved in the evaluation. The conclusions and opinions of all participants in the assessment form the basis on which the case is reviewed during a team meeting and decisions made for the child.

Assessing the best interest in the context of migration requires adapting the criteria for assessing harm to the child to take into account the specific consequences of migration for the child's safety. In order to improve the assessment of the best interest, the indicators presented below are defined and are mandatory for the PMF. They can also be used by other professionals.

Indicators for the assessment of abuse and neglect (Annex 3)

These indicators are organized into eight assessment areas. These are the child abuse and neglect factors that apply to the protection of children from abuse and neglect in Albania. They are more comprehensive and in-depth than the above risk indicators and are presented by types of neglect and abuse. The structure of the indicators is adapted to the conditions of refugees/migration. So, they include indicators of the risk of human trafficking difficulties in the journey and, as a separate group, the area of behavioural disorders and mental difficulties that may signal abuse or neglect.

Indicators for assessing children's resilience

Child resilience indicators are organized into seven assessment areas (Annex 4). They are based on the theoretical concept of a positive approach to the child, in which the well-being of the child and orientation to his/her personal strengths/resilience to overcome difficulties is one of the basic postulates of the approach. These indicators are not defined in terms of age, but must be interpreted in relation to the age of each particular child. Therefore, a good knowledge of the child's developmental capacities, taking into account the child's age, is necessary for their implementation.

Indicators for assessing the protective attitude of the main caregiver

These indicators are divided into 11 assessment areas that deal with key aspects of supportive parenting and enable the protection of children in situations of risk (Annex 5). They are based on a positive approach and theory of parenting, as well as the concept of resilience. In a refugee/immigration situation, the presence of these indicators in the parent-child relationship can reduce the risks for the child during the journey.

Best Interest Assessment (BIA)¹²

Individual work with children at risk, including unaccompanied and separated children, should be based on an assessment of protection needs with recommendations for interventions and referrals. UNHCR's assessment tool for the protection of individual children is called the Best Interest Assessment (BIA). BIA is essential before any action affecting a child is taken, unless a BID is required. As such, a BIA should be UNHCR's standard or default child protection assessment. Other child protection agencies may refer to this process differently, e.g., "An assessment of child protection". Overall, a BIA should be seen as an essential element of case management and overall child protection work. It supports child protection actors in any decision or action taken on behalf of a child in accordance with Article 3 of the CRC.

A best interest assessment should be carried out as soon as a child at risk is identified. Identification of a child at risk can occur upon arrival, but more often occurs during resettlement through UNHCR or partners, or through community-based protection mechanisms. While a BIA does not require the strict procedural safeguards of a BID, the staff with the necessary expertise, skills and knowledge in child protection should conduct a BIA. A BIA includes interviews with the child and his/her caregivers and in most cases includes home visits. The views and wishes of the child should be taken into account. Assessment and recommendations should be documented to facilitate monitoring and follow-up of the child and all interventions.

UNHCR's BIA template form can be used for this or other forms of case management. A BIA generally results in an assessment of the child's situation and recommendations for safeguarding and care interventions. A BIA may result in a recommendation that a BID is required or recommended. Even if it is clear that a full BID will be required but will be put on hold, for example, to allow time for family tracing, a BIA may be the first step. In such cases, a well-done BIA is a good basis for the full BID and a means of monitoring progress in the child's situation.

¹² UNHCR (2018). GUIDELINES ON ASSESSING AND DETERMINING THE BEST INTERESTS OF THE CHILD

In conclusion, a BIA is required before any action affecting a child is taken, except in situations where a full BID is required. For example, a BIA should be undertaken in (but not limited to) the following situations:

- As a child protection assessment for children at risk (e.g., children subject to sexual violence, children in hazardous work, etc.).
- Before placing a child in alternative care, e.g., a foster family.
- Before family tracing.
- Before family reunification (in some situations a BID is required).
- Measures to address a situation where a child is denied access to education by his/her guardian.
- When a child is considered for a permanent settlement with only one parent.

In the context of permanent solutions, a BIA is required when a child is being considered for resettlement with only one parent. In these cases, the outcome of the best interest assessment must also accompany the submission of the relocation. The BIA process ensures that the best interests of the child are considered before relocation.

The BIA is a child protection tool for managing and implementing defined activities that are in the best interests of children at risk. It ensures that the individual needs of the child and their caregivers are met through a systematic and coordinated process. The purpose of the BIA is to assess individual cases and plan and intervene in order to provide care and protection in a consistent and structured manner for the child. Similarly, a well-managed BIA also ensures that the quality of the intervention is consistent across cases. To achieve this, BIA requires strong leadership, teamwork and good coordination. It also requires documenting all aspects of the case in a physical and/or electronic file.

Not all children need individual follow-up and case management. But for those children identified as at risk or in need of help, an accountable decision-making system ensures that all stakeholders are considered and engaged in finding immediate and long-term interventions and solutions.

The outcome of the BIA is a detailed assessment of the child's protection situation (as well as his/her and the family's strengths and capacities) and a set of recommendations for appropriate protection and care interventions. However, the BIA may also result in a recommendation that a BID is required or recommended. Even if it is clear that a full BID will be required in the following steps, for example, to allow time for family tracing, a BIA may be the first step. In such cases, a well-done BIA is a good basis for the full BID and a means of monitoring progress in the child's situation.

BID

Best interest determination (BID) describes the formal process with strict procedural safeguards designed to determine the child's best interests for particularly important decisions affecting him/her. It should facilitate adequate participation of children and involve decision makers in relevant areas of expertise who can identify and balance all relevant factors to assess the best option. The process must be documented. UNHCR uses this procedure for particularly important decisions affecting the child, which require more stringent procedural safeguards to identify his/her best interests. Why is BID an important safeguard for children, their families/carers and communities?

- It provides a formal process with safeguards for making decisions that are likely to have a substantial impact on children's lives.
- Ensures that children's views and opinions are given due weight according to their age, maturity and developing abilities.
- Provides a more comprehensive assessment of children at risk that addresses the full spectrum of the child's situation, needs and vulnerabilities and considers short and long-term impacts.
- Facilitates case management through the development of a care plan with better monitoring of children at risk.
- Facilitates better quality care for children at risk as it involves people with different expertise in child protection.

As a joint enterprise it also serves to assign roles and responsibilities and thus increases the accountability of the various actors involved in child protection.

The BID guidelines clearly state when a BID is required. The following situations require UNHCR and/or partners to undertake a BID for actions affecting children under their jurisdiction:

- Temporary care arrangements for unaccompanied or separated children in exceptional situations in cases of (possible) exposure to abuse, neglect, exploitation or violence within a foster family or other care arrangement; in cases where the care arrangement is not suitable for the child, e.g., due to differences in cultural or ethnic background.
- Identifying sustainable solutions for unaccompanied and separated children: voluntary repatriation; integration or local displacement.
- The possible separation of a child from his/her parents (or the person holding the right of custody) against their will if the competent authorities are unable or unwilling to take action. In cases of (possible) exposure to abuse, neglect, exploitation or domestic violence.
- Identifying durable solutions or decisions on care arrangements, in cases where the custody situation remains unresolved and national authorities are unwilling or unable to adjudicate custody.
- In cases of divorce/separation of parents - and the parents do not agree with which parent the child should stay.

IMPORTANT: UNHCR's decisions in the above cases are limited to determining the best interest of the child. BID is not a legal determination of custody.

- In complex cases, before family reunification.

A BID can be undertaken even if it is not formally requested and, in a situation where a BIA is considered insufficient, a BID can also be undertaken as an effective child protection tool, for example:

- When certain decisions or actions may have a significant and long-term impact on a child's life;
- When a parent or guardian of a girl or boy is unable or unwilling to fulfil the best interests of the child;
- In complex protection cases, for example, if there are conflicting factors and rights that complicate the assessment of the best interests of the child;
- In situations involving polygamous families, as most resettlement countries accept only one spouse, given their national legislation prohibiting polygamy. To avoid the separation of children from one parent, a BID can be undertaken to protect the children's right to stay with both parents.

In general, a BID should be conducted for unaccompanied and separated children as soon as possible and no later than two years after a child is identified. It is important to note that this does not mean that the child remains without protection and assistance pending completion of the full BID. Children at risk need BID as soon as possible and require regular monitoring and follow-up to ensure their protection and care. There may be situations, particularly of very young children, for which a two-year timeframe is too long, such as in the case of custody arrangements, separation from parents or other complex matters of child protection. A case-by-case approach to children requiring BID and follow-up is essential.

Also, a BID should not be put on hold until prospects for a sustainable solution emerge. Because the outcome of family tracing is a key factor in determining the most appropriate durable solution for unaccompanied and separated children, a reasonable amount of time should be allowed for tracing. Family tracing should begin immediately after the child is identified as unaccompanied or separated. A reasonable length of time for tracing will depend on a number of factors, such as the age of the child, previous tracing experience for similar profiles, the urgency of the case, the quality of information available on the family and access to areas of origin. It is essential to document all tracking attempts made in the child's individual file.

Determining best interests in practice

A BID addresses key questions, including:

- Where is it best for the child to live according to the best interest?
- With whom is it better for the child to live according to the best interest?
- Who is better placed to have parental and/or legal responsibility for the child in the future?
- How does the child feel about the identified and proposed options?
- What resources will need to be used and what services are provided to support the solution recommended in the BID?

Preparatory actions and prerequisites

Where it is determined that a formal BID is needed, certain conditions must be created and preparatory actions taken, such as ensuring that the child:

- Is given access to the territory of the state (as a child at risk);
- Is identified as an unaccompanied or separated child;
- Is registered and equipped with all necessary documentation;
- Is referred to competent child protection services;
- Safe accommodation and appropriate support is provided by such services (and not detained);
- Equipped with a temporary residence permit;
- Appointment of a guardian;
- Adequate health and educational services are provided;
- Assistance is provided to trace and establish contact with family members, if such contact has been lost and if re-establishing contact is (considered) in the best interest of the child and will not endanger the child's family.

The PMF is responsible for conducting the evaluation process, determining the best interest of the child, making decisions about the modalities of fulfilling the best interest and continuing the implementation of the agreed activities. Determining the best interest of the child is an ongoing process that lasts as long as it needs the commitment of the social care institution where the child will be placed.

The main features of determining the best interest

It is recommended that the BID be designed to consider a range of solutions and recommend the one that has the most positive impact on the child concerned, in the light of relevant legal and other considerations. It is further recommended that the BID:

- Be holistic, look at all circumstances and ensure that a picture of the child's overall circumstances is created, including what is known and not known, and what is required to explore "options" and identify possible outcomes;
- Be multidisciplinary (Participants must have relevant expertise and be able to identify and balance all relevant factors in order to recommend the optimal option for the child. Such experience and knowledge is essential, as BID participants will be required to predict outcomes and consequences. They can do so accurately only if they have all the required information);
- Ensures children's participation through child-friendly procedures and appropriate information and support from both the guardian and the child's legal representative or advisor;
- Be informed of the Convention on the Rights of the Child, i.e., be considered in the light of a specific protection/immigration regime, but also generally consider rights under the Convention;
- Ideally, engage in a determination process that is independent and has all the appropriate process safeguards in place;
- Demonstrate and document that the best interest of the child were the primary consideration;
- Be rigorous, flexible, transparent and responsible;
- Be performed at the right time;
- Consider short-term, medium-term and long-term options

According to Decision No. 111, dated 6.3.2019, "On the procedures and rules for the return and repatriation of the child", point 14, the management of cases for unaccompanied foreign children, located in the Republic of Albania, is done according to the rules provided in the legislation in force. In any case, the PMF, in whose territory the child is located, takes all the steps for the provision of emergency services and the establishment of an emergency protection measure and then refers the case to the municipality or administrative unit where the social care institution where the child will be placed is located.

Conducting a child assessment includes the following steps: information gathering, information analysis and in-depth assessment, decision making, development of individual plans, monitoring and evaluation.

Information gathering and information analysis

Information gathering is the key process where relevant information is provided for the determination of the best interest. In this part of decision-making, the information that has already been provided through the identification of children and vulnerable children who need further assessment and support, as well as through the initial assessment of the best interest, is compiled.

Analysis of the collected information is an essential part of the decision-making process. The analysis of the information process begins with the arrival of the PMF on the site. Based on this analysis, the PMF, when necessary, makes decisions for an in-depth assessment of the best interest. During the determination of the best interest, the analysis of the collected information is repeated continuously.

Individual plan

An individual case plan is an effective tool and process through which a series of follow-up actions are developed and approved to address child protection needs. Case planning should be consultative

and involve the child and, where appropriate, the child's family/guardian. Based on the BIA, the case plan outlines targeted interventions, such as foster care placement, tracking, family mediation and support, and referral to appropriate services. The case plan should define which actor or agency is responsible for any action related to the child's protection needs, the referral services the child (and his or her guardian) needs, and the timelines for implementation, which will facilitate monitoring. The case plan should indicate when progress will be reviewed and by whom. The options available for case plans depend on the engagement of a range of service providers and the roles and responsibilities of actors.

Based on the analysis of the collected information and consideration of possible alternatives, the PMF makes decisions based on the best interest of the child. Best interest decision-making requires a fine balancing of the interrelationships of all the factors that influence the decision on the best interest of the child. This should be a highly individualized procedure in which decisions about the best interest of the child are made in accordance with the characteristics of the child and his/her situation. In a refugee/migration situation, there are several key decisions for the best interest of the child that provide the basis for further child protection processes. In addition to decisions on the best interest, decisions are also made on measures, services and interventions aimed at fulfilling the best interest. It is through these decisions that the determination and fulfilment of the best interests of the child is individualized.

According to Decision No. 111, dated 6.3.2019, "On the procedures and rules for the return and repatriation of the child", point 14, the individual plan for the protection of the child must include the examination of the risk of child trafficking or ensuring the registration by the Border and Migration Department of the request for asylum and the relevant reference to the authority responsible for asylum and refugees or even both, if the case is. The PMF, the case manager, sends the agency a detailed report on the case, which also reflects the child's opinion regarding his/her return or not. The individual plan should identify some goals for the child, some actions to achieve them and the person responsible for each action and a time frame. Actions can be direct service provision by a PMF or referrals to other services according to the child's needs.

In the case of unaccompanied asylum-seeking children, they will be accommodated in the National Reception Centre for Asylum Seekers, while in the case of unaccompanied children, who are both asylum seekers and victims or potential victims of trafficking, they will be placed in the National Reception Centre for Victims of Trafficking, where the procedures for determining refugee status will continue¹³.

A comprehensive plan to address the child's needs should document how the child, family, community, and other agencies will contribute. It should include details of all actions to be implemented and timelines for follow-up.

The plan can address:

- Family tracing and reunification (as needed)
- Temporary or alternative care arrangements for children who are not currently in safe and appropriate care
- Access to psychosocial support and mental health
- Access to education and recreational activities
- Material assistance
- Living/economic support for extremely vulnerable families
- Support, advice and guidance for current or potential carers

¹³ Decision No. 111, dated 6.3.2019, "On the procedures and rules for the return and repatriation of the child"

Unaccompanied children are more vulnerable to abuse, neglect and exploitation. Consider additional interventions in accordance with the guidelines given for these types of damage.

The agency, after receiving official knowledge of the case, through the diplomatic service of the child's country of origin, the country where his/her family is located, the country from which he/she came or the country where he/she has the residence, informs the responsible authorities of that country about the location of the child and the reasons for his/her unaccompanied entry and stay. The Agency requests the responsible authorities of that State to, within a reasonable time, make an in-depth assessment and provide detailed information about the child, especially about the parents or legal guardian of the child, as well as aspects related to the safety of the child, his/her integration in the country of origin, living conditions after possible return to the country of origin, as well as his/her opportunities to maintain identity, nationality and family ties¹⁴.

The report submitted by the competent authorities of the country of origin is immediately forwarded to the authority that notified the identification of the child, the PMF, the social care institution where the unaccompanied child is staying, as well as the institution that is handling the legal requests submitted by the unaccompanied child. The report is made available to the legal guardian assigned to the child for the period of stay in Albania. Exceptionally, in the case of an unaccompanied child who has submitted an application for asylum, the information according to point 16 of this decision (in-depth assessment of the child and the family of origin), is required only after the decision on non-acceptance/rejection or revocation of international protection status has become final¹⁵.

Ongoing protection and evaluation

The implementation of these activities is determined by the situation on the ground and the possibility of providing the necessary services and forms of support. In the case of each specific child, continuity of services and assessment is ensured through collaboration and information sharing between stakeholders involved in providing support for the child.

Reunification and reintegration are processes that require ongoing support and regular monitoring even after physical reunification has taken place. Sometimes reunification is not in the best interest of the child and alternative care must be sought as an interim measure. A child in alternative care is vulnerable to abuse and should be visited regularly for ongoing needs assessment and follow-up at least once a month. The PMF should provide additional support for children in alternative care such as sleeping materials, educational materials, mediation for parent/guardian conflicts, etc., assistance, parental support and material assistance to foster parents or guardians.

The agency, after reviewing the report submitted by the competent authorities of the country of origin, as well as the report sent by the PMF, responsible for the case management, presents in written form the opinion to the responsible authorities that are handling the child's requests about the possibility of his/her stay or not in Albania, taking into consideration the best interest of the child¹⁶.

¹⁴ Decision No. 111, dated 6.3.2019, "On the procedures and rules for the return and repatriation of the child"

¹⁵ Decision No. 111, dated 6.3.2019, "On the procedures and rules for the return and repatriation of the child"

¹⁶ Decision No. 111, dated 6.3.2019, "On the procedures and rules for the return and repatriation of the child"

The structure at the ministry responsible for asylum and refugees, as well as the local authority responsible for the border and migration, during their decision-making on the application for asylum, the refugee status or to benefit from the right to stay in Albania, take into consideration, to the possible extent, the opinion presented by the agency, as well as other information received from the responsible authorities of the country of origin, following their requests, according to the rules provided in the legislation in force¹⁷.

The decision on whether or not to return the child cannot be made in any case without first presenting the reasoned opinion of the agency. This opinion must be taken into consideration by the local authority responsible for the border and migration, except in cases where there are well-argued and legitimate reasons that make its implementation impossible, which include, but are not limited to, the risk to national security or public order or endangering the child's life. The decision on whether or not to return the child is made within 7 (seven) days of receiving the reasoned opinion from the agency.¹⁸

If the local authority responsible for the border and migration assesses that the unaccompanied child should be returned, then it issues the order of removal and return of the unaccompanied child, which must be justified and in any case must determine the maximum period within which it must be applied. An unaccompanied child can be subject to return and removal from the Albanian territory, according to the provisions of the law on foreigners, only if the application for asylum, residence permit or the decision of the refugee status has been revoked or not accepted.¹⁹

The local authority responsible for the border and migration immediately notifies the agency and the PMF that has followed the implementation of the individual child protection plan for the order of removal and return of the unaccompanied child. The PMF, within 3 (three) days from the day of recognition with the order of removal and return of the child, with the help of a psychologist or an adult, informs the child, in the language he/she understands, in accordance with his/her age and ability to understand, for the order of his/her departure and return.²⁰

Procedural safeguards are in place for unaccompanied children, including the appointment of a legal guardian, which ensures that migrant children have access to the same child protection and welfare provisions as all other children in the state's territory. These safeguards ensure that the child's best interests are respected and help to ensure that the child has the physical, psychological and emotional stability to participate in the best interest and status determination process. To ensure that the best interest of children are treated as a primary consideration, children should also be provided with a professional interpreter, ideally trained to interpret for children, a guardian or a professional exercising a similar role, and a kid-friendly interview. These steps are taken to ensure that children can exercise their right to participate, to file a complaint and appeal, as applicable under national law. The appointment of a legal guardian is important because, being under the age of 18, children are generally not legally competent to make their own decisions about the services provided or to assess the legal and practical consequences of the processes in which they are required to participate. In the case of migrant children travelling with their parents or a recognized guardian, the parent or guardian must be recognized as competent to make such decisions on behalf of the child, unless the relevant child protection authorities have determined that it is not in the best interest of the child and have undertaken the necessary processes under national law to remove the child from the care of the parent/guardian. In the case of unaccompanied or separated children, or migrant children who have been removed from the care of a parent or guardian, this guarantees the appointment of a guardian and a legal representative and/or other persons who can support and ensure the best interest of the child as soon as possible.

¹⁷ Vendimit Nr. 111, datë 6.3.2019 "Për procedurat dhe rregullat për kthimin e riatdhesimin e fëmijës"

¹⁸ Vendimit Nr. 111, datë 6.3.2019 "Për procedurat dhe rregullat për kthimin e riatdhesimin e fëmijës"

¹⁹ Vendimit Nr. 111, datë 6.3.2019 "Për procedurat dhe rregullat për kthimin e riatdhesimin e fëmijës"

²⁰ Vendimit Nr. 111, datë 6.3.2019 "Për procedurat dhe rregullat për kthimin e riatdhesimin e fëmijës"

Every legal guardian must have sufficient expertise in the area of child care to be able to ascertain whether the best interest of the child are being protected and whether his/her legal, social, health, psychological, material and educational needs are being met properly. As such, a guardian must have the necessary training and experience in child protection and child welfare, and, ideally, specific knowledge of international human rights law relating to unaccompanied or separated children.

Role and possible duties of legal guardians

Legal guardians should help children participate in the process in the best interest. They must act in the best interest of the child and play a number of roles throughout the process, for example:

- Support and advise the child based on a relationship of trust;
- Facilitate the child's participation;
- Monitor and coordinate the child's interaction with other professionals;
- Use their expertise to advise other professionals involved with the child;
- Ensure that the child's health, education, housing and support needs are met;
- Ensure that the child has legal representation by appropriately trained and experienced professionals;
- Ensure that the child has access to the procedures to determine his/her needs for international protection if he/she wishes to apply for it or if it is proposed as a result of the process planning meeting;
- Obtain the necessary expert advice on behalf of the child;
- Early counselling of the child about the possibility of restoring family contacts through family tracing and its possible consequences, if the child is no longer in contact with the family;
- Act on behalf of the child in relation to status determination decisions and BID;
- Help the child to appeal or complain about any decision that appears to be illegal and/or unreasonable, in accordance with the established rules and procedures.

The unaccompanied child, through the designated legal guardian, has the right to administrative and judicial appeal, according to the legislation in force. He/she receives free legal aid from the state, if he/she so requests, according to the rules provided by the legislation in force. The removal order is not executed until the appeal process is completed and the final decision is made, unless otherwise specified in the law on foreigners. The responsible authorities, based on the child's specific circumstances, such as length of stay, attendance at school or other issues of a social or family nature, may order an extension of the period for carrying out the return procedure²¹.

From the moment of issuing the order for the removal of the unaccompanied child and his/her return, the local authority responsible for the border and migration prepares the plan for the return of the child within 3 (three) days, as well as cooperates with the responsible authorities of the country where the child will be returned, to determine conclusively, as follows :²²

- a) the way of return and the most suitable route for transporting the child;
- b) the time of return, which includes the possible schedule of departure from the territory of Albania and arrival at the place of return;
- c) the persons responsible for accompanying and delivering the child, as well as the necessary documentation that needs to be prepared for his/her delivery;
- ç) points of contact between the authorities, in order to facilitate the procedure of return and handover of the child;

²¹ Decision No. 111, dated 6.3.2019, "On the procedures and rules for the return and repatriation of the child"

²² Decision No. 111, dated 6.3.2019, "On the procedures and rules for the return and repatriation of the child"

- d) the need to take precautionary measures to guarantee the rights of the child, which may lead to detaining the child only as a last resort;
- dh) the possibility of covering the relevant costs of the return and delivery procedure.

The child's return plan includes, but is not limited to, the following ²³:

- a) Rules for the preparation of the child's return, including the manner of his/her transportation from the place of residence to the border crossing point;
- b) Guaranteeing the food and hygiene of the child during the entire trip until the moment of delivery to the responsible authorities of the country where he/she will return;
- c) The person responsible for accompanying the child from his/her place of residence until he/she is handed over to the responsible authorities of the country where he/she will return;
- ç) Duties and responsibilities of the person responsible for accompanying the child;
- d) Responsibilities of all the responsible authorities involved in the child's return procedure, in order to enable his/her appropriate return;
- dh) The way of crossing the border and the rules for handing over the child;
- e) The necessary documentation for the return of the child.

A copy of the child's return plan is sent to the agency. The PMF, with the help of a psychologist or an adult, informs the child in the language he/she understands and in accordance with his/her age and ability to understand the child's return plan, the general social and economic situation, as well as the services that will be provided in the country of origin.

The local authority responsible for the border and migration notifies the authority responsible for the protection of children in the country where the child will be returned, about the child's return plan, in order to take measures to ensure the protection and guarantee of the child's rights. The local authority responsible for border and migration immediately takes measures to provide the child with a valid identification document, if the child does not have one, as well as with valid travel documents. In determining the method of return and the most suitable route for transporting the child, the best interest of the child and the possibility of ensuring the easiest, fastest and most appropriate return of the child are taken into account, in accordance with the age and the possibility to cope with the return without any difficulty, guaranteeing the dignity, honour and personality of the child ²⁴.

The child is accompanied by his/her legal guardian during the journey until he/she is handed over to the responsible authorities. If this is impossible, the child is accompanied by a psychologist or an adult who knows the nature of the child well or enjoys his/her trust. The delivery of the child to the responsible authorities of the country of return is regularly documented, through the report of the delivery of the child, which describes in detail the progress of the journey and the responsible persons who are taking delivery of the child. The record is signed in three copies by the responsible persons who have taken over the child and the person responsible for accompanying him/her. A copy of the report is sent to the agency ²⁵.

The expenses for the return of the child and the guarantee of rights until the moment of handover, in case they are not covered by the place where the child will be returned or by the child's family, are borne by the approved budgets of the responsible institutions. In accordance with the principle of reciprocity or applicable international agreements, binding for the Republic of Albania, reimbursement of expenses may be requested from the country where the child returns or from his/her family ²⁶.

²³ Decision No. 111, dated 6.3.2019, "On the procedures and rules for the return and repatriation of the child"

²⁴ Decision No. 111, dated 6.3.2019, "On the procedures and rules for the return and repatriation of the child"

²⁵ Decision No. 111, dated 6.3.2019, "On the procedures and rules for the return and repatriation of the child"

²⁶ Decision No. 111, dated 6.3.2019, "On the procedures and rules for the return and repatriation of the child"

Registration, Documentation and Data Management

After the identification, registration takes place with the main data of the child compiled and registered. For example, the child's name, age, sex, father's and mother's name and address are included in the registration data. The purpose of the registration is to record important information, primarily to help preserve the child's identity. Registration is followed by the documentation process. The purpose of the documentation is to record further information to meet the specific needs of the child. Documentation of the best interest assessments and individual care plans are also important. The documentation will enable, for example, tracing, reunification, and implementation of immediate and long-term protection measures, tracking and BID.

Documentation should be completed as soon as possible after the child is identified, both to minimize the possibility of children forgetting certain information and to ensure timely follow-up of identified needs. All relevant information about the child and his or her family should be documented: current address and tracking information, separation history, child's wishes, identified child protection issues and next steps for follow-up based on interviews with the child, other family members and the community. Because the documentation process is an important element of case management/BID, it is advisable to use standard forms. Documentation is not a one-time event, but rather part of a sequential process that continues until the child is reunited with the family or a sustainable solution is identified through the BID process. For each case of a child at risk or an unaccompanied and separated child, a file should be opened containing the documentation (physical, electronic or both). This individual file should be accurately updated and reviewed regularly, and tracking of outcomes and changes in the child's life should be included. All personnel who have access to the documentation must respect the principle of confidentiality, in the best interest of the child. Ideally, once the case has been documented, the information should be entered into a database to record and track the data and facilitate the case management.

²⁶ Vendimit Nr. 111, datë 6.3.2019 “Për procedurat dhe rregullat për kthimin e riatdhesimin e fëmijës”

Annex 1 - Form for the implementation of preliminary identification indicators

Child's Name		Age	
State, country of origin			
Name/Surname of field worker	Date	Time	Place

Indicators for preliminary identification through structured observation			
1	The health of the child or the adult caring for the child is at risk	7	The child looks worried, nervous
2	Physical safety of the child at risk	8	The girl/woman is pregnant or has a child/toddler
3	Basic needs of the child at risk	9	The child/adult accompanying the child is disabled
4	No one cares for the child/the child is alone	10	A larger group of compatriots do not have adequate contact with the child
5	The child is in a group of children without adults or with few adults	11	The child asks for help
6	An adult's attitude towards the child is not consistent with the protective role of an adult	12	An adult reports that the child is in danger

Applied procedures		
1	Referral for medical care	All cases of high health risk
2	Referral to field social worker, child protection worker	All children up to 18 years old
3	Additional data collection with a rapid screening	All cases are considered safe

Other comments from the observation

Signature

Indicators related to preliminary identification based on rapid screening			
1	A child unaccompanied by a parent/guardian/adult	4	A child separated from the group
2	A child separated from family/guardian	5	A child who is in a specific travel situation that increases the risk to the child
3	A child travelling in a group unaccompanied by a responsible adult	6	A child asking for help

Annex 2 - Risk assessment indicators

High risk indicators for children aged 0-18 years

I	The child attempted suicide	
II	The child's health is at risk	
	1	The child's parent/guardian provides information about the child's chronic illness, but there is no documentation of it.
	2	The child does not have the medication he/she says he/she needs to take regularly
	3	The parent/guardian refuses the child's medical treatment
III	The child's behaviour deviates significantly from usual behaviour	
	1	The child has a blank or frozen look.
	2	The child who appears to be of school age answers the question in a dull, monotone voice, using monosyllabic words and showing no emotion.
	3	The child's play is dominated by situations and activities of a sexual nature.
	4	The child shows an aversion to physical touch and contact and withdraws.
	5	The child shows extremely high anxiety when other children cry.
	6	The child is extremely neat, clean and dressed inappropriately for travel conditions.
	7	Extreme behaviour – excessive display of emotions, high aggression or withdrawal.
	8	The child sits down and gets up with difficulty, says that he/she feels pain when sitting down and standing up.
	9	Girl under 16 who is pregnant.
IV	The child has visible signs of physical injuries	
	1	The baby has bruises.
	2	The child has multiple bruises in the form of fingerprints
	3	The child has bruises on his/her neck
	4	Visible hematomas on the child's scalp
	5	The child has visible burns that have clear contours and retain the specific shape of the object with which they were caused.
	6	The child has a visible wound/scar in the form of a bite
	7	The child gives evasive answers to safety-related questions
	8	The child has head injuries/scars

V	The child says he/she is being abused	
	1	The child specifies who abused him/her and how
	2	The child confirms non-verbally that he/she has been violated
VI	The parent treats their child inappropriately	
	1	The parent/responsible person threatens the child or threatens that he/she will hurt other family members.
	2	The parent/responsible person severely isolates the child from other children or information is obtained that the child has been isolated before and has had no contact with his peers or the environment.
	3	The parent/responsible person appears to encourage the child to behave inappropriately (encourages the child to engage in prostitution, begging, stealing and aggressive behaviour).
	4	The parent ignores the child and appears cold to the child.
VII	The child exhibits dangerous behaviour	
	1	The child takes alcohol/drugs.
	2	The child hurts himself/herself or says he/she does so and/or has indicators of doing so.
	3	The child is often in the company of various adults with whom he/she is inappropriately intimate.
	4	Temper tantrums: the child reacts violently for no reason to even minimal displeasure and screams, breaks things and throws toys away.
VIII	The child shows signs of psychological trauma	
	1	The child has nightmares, isolates himself from others, and has visible nervousness and unusual behaviour.
	2	The child talks about the traumatic experiences he/she had as if they happened to someone else.
	3	The child talks about the experiences of losing family members and close people.
	4	The child reacts to ordinary everyday events with marked fear and withdrawal and appears to be reliving what happened, flinching at a sudden sound.
IX	The child is controlled and exploited by a person who is not his/her parent/guardian	
	1	The child is travelling with a person who is not a family member and who acts as if he/she owns the child, without emotional intimacy.
	2	The child reacts with pronounced fear and panic to the possibility of being prevented from leaving and tries to avoid contact with an agent.
	3	The child states that another person forces him/her to do things he/she does not want to do (offer sexual services, steal, beg, etc.) as compensation for the protection and help this person offers him/her during the trip.
	4	The child avoids answering the question about his/her relationship with the person travelling with.
	5	The child has valuables with him/her and doesn't know how to explain where he/she got the money to buy them.
X	The group unaccompanied by a responsible adult with whom the child is travelling does not provide safety for the child	
	1	In the group, there is no correlation between the members.
	2	The child can no longer describe in detail what the members of the group he/she travels with are like.
	3	The child gives confused answers about how he/she joined the group.
	4	The older members of the group state that the child has recently joined them and that they do not care for him/her.
	5	Group members do not pay attention to the child's attempts to join a group activity.

	5	The group members seem to push the child away.
	6	Group members do not provide help to the child when needed (money, protection, phone, etc.).
XI	Reasons for leaving the country that particularly increase the risk to security during travel	
	1	Forced marriage of a girl.
	2	Forced recruitment.
	3	Conflicts of war.
	4	An adult who helped organize the trip betrayed the child's trust.
	5	The child/youth is illiterate, does not know how to use the telephone, etc.
	6	The child says he/she was sold by his/her family or another person.
	7	The boy is singled out for a particular kind of sexual exploitation.
	8	The child says that he/she was kidnapped during the trip.

High risk indicators for children aged 0-14 years

I	The basic needs of the child are neglected	
	1	The child is messy, dirty, muddy, infested with lice, has scabies; a small child has a rash.
	2	The child is tired, weak, hungry, wet, and cold or heat exhausted.
	3	The parent/responsible person supervises the child inconsistently, is tired, shows signs of disorientation, and forgets the child.
	4	The child does not receive appropriate help.
	5	The toddler or baby stays very still and shows no reaction.
	6	The newborn baby is blue.
II	Violent behaviour in families/groups travelling together	
	1	The mother or the child declares that the mother is suffering from family/group violence.
	2	Family members provide information about the existence of mental illness or addiction in the family.
III	Parents give inconsistent and illogical explanations for the child's injuries	
	1	The explanation given by the parent/responsible person for the origin of the child's injury obviously does not correspond to the form and type of injury/wound or the child's age.
	2	Parents give different and conflicting explanations for the injury and the explanations do not seem convincing.
IV	The child has had traumatic experiences during his/her journey	
	1	The child states that he/she has been exposed to bombing or direct armed conflict.
	2	The child states that he/she was shot during the trip
	3	The child declares that during the trip he/she was arrested, detained, physically abused and/or injured with firearms by the police of other countries.
	4	The child declares that his parent/close person was killed before starting the trip or during the trip.
	5	The child is travelling in extreme weather conditions and has survived a storm/shipwreck and slept outdoors.

Annex 3 - Indicators for assessment of abuse and neglect

I	The child is severely neglected	
	1	The child is extremely tired, weak, hungry, wet, freezing, or heat exhausted.
	2	The parent/responsible person does not supervise the child sufficiently, which may result in a serious risk to the child's safety and health.
	3	The parent/responsible person does not notice that the child needs clothing and shoes according to the weather conditions and refuses the help offered.
	4	The child wears clothes soiled with feces, urine, the child smells, the parent/responsible person does not react even though he/she has conditions to ensure the hygiene of the child in the reception centre.
	5	The child declares that the parent/responsible adult has not given him enough food and water for a long time; the child is forced to manage it himself.
	6	The child states that the responsible parent/adult does not pay attention in situations when he/she cries, asks for help or attention, or is very scared.
	7	The parent/responsible person shows no willingness to provide the child with the necessary aids (glasses, wheelchair, crutches, walking aids, etc.) and does not seem to accept that it is necessary for the child to have them.
	8	The child is chronically ill and the parent/responsible person does not have the necessary medicines and refuses to visit the doctor.
	9	The child is seriously ill and the parent/responsible person is ill.
II	The child suffers physical abuse	
	1	The child is under 9 months old and has bruises.
III	The child has multiple bruises in the form of fingerprints	
	1	There are bruises on the child's neck, face, ears, upper arms, legs and thighs.
	2	There are hematomas on the child's scalp, face and body.
	3	The child has burns, especially on the hands and feet (lower part) or on the upper part of the feet, in the specific form of the object with which they were caused.
	4	The child has a bite wound.
	5	The child has head injuries.
	6	The explanation of how the injury occurred is inconsistent with the type of injury.
	7	The child/parent's account of the injury is unclear.
	8	The child/parent's account of the origin of the child's recent injury varies depending on to whom is told.
	9	The parents give conflicting accounts of how the injury occurred.
	10	The parents are trying to protect the person who caused the child's injuries.
	11	The person responsible for the child has no information about how the child's injuries occurred before the start of the trip, but confirms that some of the injuries were present at the time he/she started caring for the child.
	12	The person responsible for the child gives inconsistent explanations for the origin of the child's injuries during the trip and the account of how the child was injured is unclear and inconsistent with the nature of the injuries.
IV	The child suffers from sexual abuse	
	1	The child shows fear of physical intimacy.
	2	The child shows fear of touching the genitals.
	3	The child says he/she is afraid of closed doors, baths, the darkness and some people.
	4	The child's behaviour is sexualized and incompatible with the child's age.

	5	The young child shows an unusual interest in genitalia, sexually explicit drawings, and masturbation.
	6	The child exhibits compulsive behaviour, frequent changing and washing of underwear, excessive bathing.
	7	The child is prone to prostitution and debauchery.
	8	The child's play is dominated by content of a sexual nature.
	9	The child feels pain when sitting down and standing up.
	10	A girl under 14 is pregnant.
V	The child suffers from emotional abuse	
	1	The parent/responsible person pushes and humiliates the child.
	2	The parent/responsible person threatens the child with violence, terrorizes the child and threatens to hurt the child or other persons the child cares for.
	3	The parent/responsible person isolates the child from peers and drastically limits the child's freedom to communicate with peers and other people, even before the trip begins.
	4	The parent/responsible person violates the child's personal boundaries.
	5	The parent/adult ignores the child and is emotionally unavailable to the child.
	6	The parent/responsible person seems to neglect the educational, mental and health needs of the child, not only in the migration situation, but in general in his/her attitude towards the child.
VI	The child's behaviour indicates the consequences of abuse/neglect	
	1	The child takes the responsibility of the adults and takes care of the younger children and expresses a lot of concern.
	2	The child is unable to focus on a single activity; he/she constantly changes toys, starts drawing and then stops drawing and turns to something else.
	3	The child has a blank or frozen look.
	4	The child who appears to be of school age answers questions in a dull, monotone voice, using monosyllables and showing no emotion.
	5	The child shows extremely high anxiety when other children cry.
	6	The child is very neat, clean and overdressed for travel conditions; the child's behaviour is acceptable.
	7	Information is received that the child has a problem with concentration and reduced interest in activities in which he/she participated earlier.
	8	Extreme behaviour: excessive display of emotions, high aggression or withdrawal.
	9	The child has a prolonged sleep disorder, enuresis.
	10	The child exhibits sudden and unexplained mood swings and depression.
	11	The child shows extreme fear and caution even in a relatively safe situation, which was evident even before the start of the trip.
	12	The child has a habit disorder, which was present even before the start of the trip.
	13	The child shows fear of the parent/guardian, does not want to be with them or does so with extreme reluctance.
	14	Extreme separation anxiety.
VII	The child has mental difficulties and behavioural disorders	
	1	The child has phobias, hypochondria, obsessive and compulsive actions.
	2	The child attempted suicide.
	3	Antisocial and delinquent behaviour is present.
	4	Anorexia and bulimia are present.
	5	Depression is present.
	6	The child takes alcohol and drugs.
	7	The child hurts himself or claims to do so.

	8	The child is often in the company of various adults with whom he/she exhibits inappropriately intimate behaviour.
	9	Tantrums: the child reacts violently for no reason or with minimal displeasure and screams, breaks things and throws toys away.
	10	The child has nightmares, isolates himself from others, and has obvious tics and unusual behaviour.
	11	The child speaks in a calm voice about the traumatic experiences he/she has had, as if it happened to someone else.
	12	The child reacts to common everyday events with marked fear and withdrawal and appears to be reliving what happened to him/her.
VIII The child has traumatic experiences due to the travel conditions		
	1	The child states that he/she has been exposed to bombings or direct armed conflicts.
	2	The child states that he/she was shot during the trip.
	3	The child declares that during the trip he/she was arrested, detained and/or physically abused by the police of other countries.
	4	The child declares that his parent/close person was killed before starting the trip or during the trip.
	5	The child is travelling in extreme weather conditions and has survived a storm/shipwreck.
	6	The child states that he/she has an obligation to the family to reach the destination as soon as possible, is very anxious and does not want to spend more time than necessary on the trip.
	7	The child has witnessed/seen brutal violence, kidnapping or child abuse.
	8	The child speaks in a calm voice and without emotional reaction about his/her parents and siblings who have remained behind in the country of origin.
IX The child is in a possible situation of human trafficking		
	1	The child is travelling with a person who is not a family member and who treats the child as if he/she owns him/her, without emotional intimacy.
	2	The child exhibits marked fear and panic regarding the possibility of being prevented from leaving and the inability to establish contact with a security officer.
	3	The child states that another person forces him/her to do things he/she does not want to do (offer sexual services, steal, beg, etc.) as compensation for the protection and help this person gives him/her during the trip.
	4	The child avoids answering the question about his/her relationship with the person with whom he/she is travelling with.
	5	The child has valuables with him/her, and is unable to explain where he/she found the money to buy them.
	6	The child knows words related to sexual activities in another language.
	7	Another person monitors the child's contacts with his/her peers and other people.
	8	Another person forces the child to work, supervises the child's work; the child's work is inappropriate for his/her age and abilities.
	9	The child is extremely intimate with a person who is not a member of his/her family and shows obedience to this person, even more than to his/her parents and family.
	10	It appears that another person takes an interest in the child's work or abuses the child for his/her own purposes.
	11	The child states that another person is threatening to hurt him/her or his/her family if the child does not comply with that person's demands.
	12	The child declares that another person has his/her documents and earned money.
	13	The child has an agent who arranges his/her travel.

Annex 4 - Child's resilience indicators

I	The child shows a safe attachment to his/her caregiver	
	1	The child freely explores, leaves and returns to the presence of his/her caregiver.
	2	The child freely and spontaneously addresses his/her caregiver and seems confident that a response will be received.
	3	The child freely contacts others, looks directly and relaxed at his/her environment and other people in the presence of his/her caregiver.
	4	The child freely expresses his/her feelings and shows that he/she expects answers to them.
	5	The child freely asks questions and asks for what is currently interesting to him/her or what he/she needs.
	6	The child seems calm, content and happy.
	5	The child seeks out his/her primary caregiver in a situation of uncertainty or danger and appears to feel safe and secure in his/her company.
II	The child has good communication skills	
	1	The child exhibits behaviour that is socially open, cooperative, and friendly.
	2	The child can recognize his/her emotions and needs and express them so that the parties to the conversation understand them.
	3	The child is able to recognize the feelings and needs of other parties.
	4	The child can show empathy for others.
	5	The child can focus “here and now” on communication.
	6	The child knows how to encourage others to participate in a conversation.
	7	The child knows how to coordinate verbal and non-verbal expression.
	8	The child clearly expresses his/her attitude, feelings, needs and expectations.
	9	The child recognizes the needs and expectations of other parties and responds to them.
III	The child has the ability to cope with change	
	1	The child is able to accept changes and perceives new experiences as constructive, although they may be painful.
	2	The child perceives new experiences as a challenge.
	3	The child has a sense of coherence – he/she perceives problems as understandable, meaningful and solvable.
	4	The child sees himself as included and connected to others.
	5	The child exhibits behaviours and skills by which he/she can regulate his/her response to events (his/her emotions, cognition, and pain).
	6	The child tries to adapt situations to himself and his experience to the extent possible.
	7	The child tries to change his/her reactions and acquire new skills in order to be able to “cope” with a new situation.
	8	The child is independent in making decisions for himself, implementing these decisions and supervising their execution.
	9	The child is able to maintain his/her mental health despite the difficulties.
	10	The child is able to move forward regardless of the problems in his/her life
IV	The child has good problem-solving skills	
	1	The child can distinguish between important and unimportant things in a specific situation and identify the problem.
	2	The child can recognize and express his/her needs.
	3	The child can take responsibility.

	4	The child can recognize the alternatives presented to him/her.
	5	The child can choose between the alternatives available to him.
	6	The child can assess the impact of the actions taken on further events.
	7	The child can think independently of the opinions of others and make practical and good decisions.
	8	The child asks questions related to his/her situation.
	9	The child can cooperate with others in the problem-solving process.
	10	The child is also able to implement the solution found.
V	The child has positive self-esteem	
	1	The child trusts himself/herself and his/her judgment about events and feels he/she can participate competently.
	2	The child has an internal sense of control, a perception that he/she is independent of others.
	3	The child can control his/her impulses.
	4	The child sees himself as a positive person with human values.
	5	The child believes that he/she can independently solve problems and perform basic activities of daily survival.
	6	The child believes in positive outcomes of the situation regardless of his/her difficult circumstances.
VI	The child has a positive perception of his/her identity	
	1	The child has a well-developed self-awareness.
	2	The child is able to connect his/her perception to the past, present and future.
	3	The child has clear boundaries between himself/herself and his/her family/other groups to which he/she belongs and perceives himself/herself as separate and different from others.
	4	The child perceives himself as unique and special.
	5	The child sees himself as a valuable person worthy of love and respect.
	6	The child can find a balance between what is happening and his/her abilities.
	7	The child accepts that part of himself that is defined by the culture and beliefs of the people, area and family from which he/she comes.
	8	The child is able to maintain its basic characteristics and take steps to adapt and survive in changed circumstances.
VII	The child has the ability to use adults for help and support	
	1	The child knows how to ask for help from adults when he/she realizes that he/she needs help in a certain situation.
	2	The child has several adults on whom he can rely and who are his/her role models with whom he/she identifies.

Annex 5 - Indicators for the assessment of the protective attitude of the main caregiver

VIII	The parent has a good relationship with the child	
	1	The parent really appreciates and respects the child, without any parental manipulation and interference.
	2	The parent involves the child in the process of making decisions about the child.
	3	The parent knows how to set appropriate limits for the child.
	4	The parent encourages the child to learn and develop.
IX	The parent has a positive view of the child	
	1	The parent sees and perceives the child positively and sends a clear message to the child that he/she is admirable.
X	The parent develops parental optimism	
	1	The parent has a relatively stable, general tendency and a positive approach and is attentive to situations where there are significant risks.
	2	The parent has hope that everything will be okay.
XI	The parent understands the child's needs	
	1	The parent knows how to recognize the child's needs and respond to them.
	2	The parent knows how to harmonize the child's needs with his/her own needs.
XII	The parent is responsible and consistent in his/her care	
	1	The parent consistently displays positivity, kindness, warmth and sensitivity to the child and is always emotionally available to the child.
	2	The parent constantly supports the child's reasoning and understands and perceives the child's own behaviour.
	3	The parent adequately supervises and protects the child in/from dangerous situations.
	4	The parent takes care of the child's health, development, education and socialization.
XIII	The parent demonstrates effective parenting	
	1	The parent successfully directs the child's behaviour.
	2	The parent successfully develops the child's independence.
	3	The parent successfully develops the child's morals and social skills.
	4	The parent encourages the child to develop his/her potential.
	5	The parent guides the child towards achievement and his/her sense of success.
	6	The parent develops the child's work habits and encourages him/her to be educated.
XIV	The parent and family have well developed resilience	
	1	The parent shows initiative in solving new problems and situations.
	2	The parent and family try to reframe what is happening in a rational and acceptable way.
	3	The parent accepts what he/she cannot change.
	4	The parent tries to manage situations where he/she can influence.
	5	The parent tries to establish order, balance and harmony even in extremely difficult situations.
	6	The parent tries to contribute to the community even in situations of crisis and great challenges.
	7	The parent tries to strengthen and develop the positive strengths of the family even in high-risk situations.
	8	The parent and other family members share the care of the child.

XV	The parent accepts help and responsibility	
	1	The parent realizes that he/she needs help.
	2	The parent is ready to ask for help when needed and knows how to accept it.
	3	The parent seeks the necessary information for the new circumstances.
	4	The parent seeks support from other people and the community.
	5	The parent takes responsibility for decisions concerning the child and his/her family.
XVI	The parent is open to discussing difficult issues	
XVII	The parent is capable of self-regulation	
	1	The parent trusts his/her judgment, relies on it in performing the parental role, and is independent in making parental decisions.
	2	The parent has knowledge and skills and is flexible in developing the child's trust in him/her.
	3	The parent believes that he/she can overcome the problems that arise in directing the child's behaviour.
	4	The parent believes in his/her abilities to independently carry out the activities necessary to achieve his/her goal in raising the child.
	5	The parent develops self-control in performing the parental role.
	6	The parent develops problem-solving and emotional control skills.
	7	The parent knows how to commit to the goals he/she sets in the child's development.
	8	The parent independently chooses the ways to make changes in his/her parental role.
	9	The parent knows how to evaluate his/her performance as a parent.
XVIII	The parent has an active role in supporting his/her child	
	1	The parent actively supports his/her child by delegating responsibility to the child for the child's choices and actions.
	2	The parent talks with the child about all matters related to the child and together with the child examine situations and events, delegating the responsibility for decision-making to the child.
	3	The parent cooperates with institutions and organizations to provide development and protection to the child.
	4	The parent has good cooperation with the professionals.

Annex 6 - Example of the best interest assessment (BIA) form ²⁷

Identification and follow-up of children at risk	
Biographical data	
Child's name (+ nickname)	File/Progress Log #
Date of birth/age	Related cases
Place of birth	Child identified by (officer/agency)
Place of origin	Nationality
Gender • Female • Male	
Name of biological father	Purpose of BIA
Name of biological mother	Name of current guardian
Current address	
Contact details	
Special needs	
Name of service provider/referral	• High priority • Priority • Normal

Assessor's name	Date of the interview/home visit
E-mail	Tel. #
Agency/Institution	Signature
Does the child (or guardian if appropriate) give informed consent for the interview? • YES • NO	

I. General information

Ethnicity	
Religion	
Spoken languages	
Level of education	

²⁷ UNCHR, 2011. Field Handbook for the Implementation of UNHCR BID Guidelines

Mother	
Mother's name	
When did you last see your mother?	
Where?	
Where do you think your mother is now?	
Does she have a phone number?	

Father	
Father's name	
When did you last see your father?	
Where?	
Where do you think your father is now?	
Does he have a phone number?	

Siblings		
Name	Age/Sex	Current location

II. Separation story

Suggested questions: How did you get separated from your family? (Indicate the time, place of separation, as well as the reasons for separation.) Why did you leave your country? How did you travel to (name of country of asylum)? (Indicate the mode and route of travel, the names of the persons who helped and their relationship with the unaccompanied/separated child); When did you arrive in (name of asylum country)? Do you have any relatives or friends in (name of asylum country)? If yes, give name, relationship and contact details (if any). Is there anything else you would like to share about your trip?

III. Assessment of protection and care needs

Lifestyle and care
Suggested questions: Who do you currently live with? (Indicate names, ages, gender). Is there an adult (name/location in the country of asylum) who cares for you? If yes, enter name, relationship, contact information. How did you find this place to stay? How is your relationship with your carer and/or housemates? What are your activities (jobs) at home? What are the activities (jobs) of the other children in the family? Do you feel you are treated the same as other children? Do you like staying with this family? Are you happy here?
Safety
Suggested questions: Do you feel safe in this place? If not, what are the reasons/did any incident occur (if yes, describe)? Can you describe where you are staying? Note the number of rooms, conditions and how many people live in the place, etc.
Health and access to medical care
Suggested questions: Are you feeling healthy? If not, please explain the type of illness/how you feel physically. Do you have access to medical care? If not, explain why?
Access to food
Suggested questions: Do you get food rations? If so, how much and when? Do you think you have enough food? If not, please explain. What did you eat yesterday?

Water and hygiene

Suggested questions: Do you have access to clean water? Are there adequate hygiene facilities where you live? Is there any danger to you?

Education

Suggested questions: Do you currently attend school or any educational activity? Please describe (name of school/training course, grade, frequency, etc.). If not, explain why not. Did you go to school before the separation? Do you like going to school? If so, what do you like best about school? If not, explain the reasons. Do the other children at home go to school?

Daily activities of the child

Suggested questions: Do you play with other children? If so, what do you do and where? How many hours a day? Are you currently working to earn money? If so, what do you do? How many hours a day? What do you do with the money you earn?

Protection and Psychosocial Wellbeing

Suggested questions: Where do you go to discuss problems or ask for help? Do you get support from your community? From whom and what kind of support? If not, please explain. Do you feel safe from harm? Do you have any special concerns? Do you sleep well? Do you have nightmares? If yes, how often?

Tracing

Suggested questions: Would you like us to help you find some of your family members? If so, note who the child would like to track/find and any information the child has about the whereabouts of relatives. If not, what are the reasons you don't want to find your parents? Is tracking/tracing of family members taking place? If so, from which institution? Have you been informed of the results? Are there additional needs?

Other

Suggested questions: Is there any other information you would like to share with me today?

IV. Home visits

Suggested questions: Note the name, age and gender of the persons present at home at the time of the visit. Who currently lives with you in this house? (Note names, ages, gender). How long have you lived here? Who prepares the food? How often do you eat? What kinds/types of foods do you eat? Where do you sleep in this house? How do you spend your time? What do you like to do? How do you feel when you live in this house? Are you happy here?

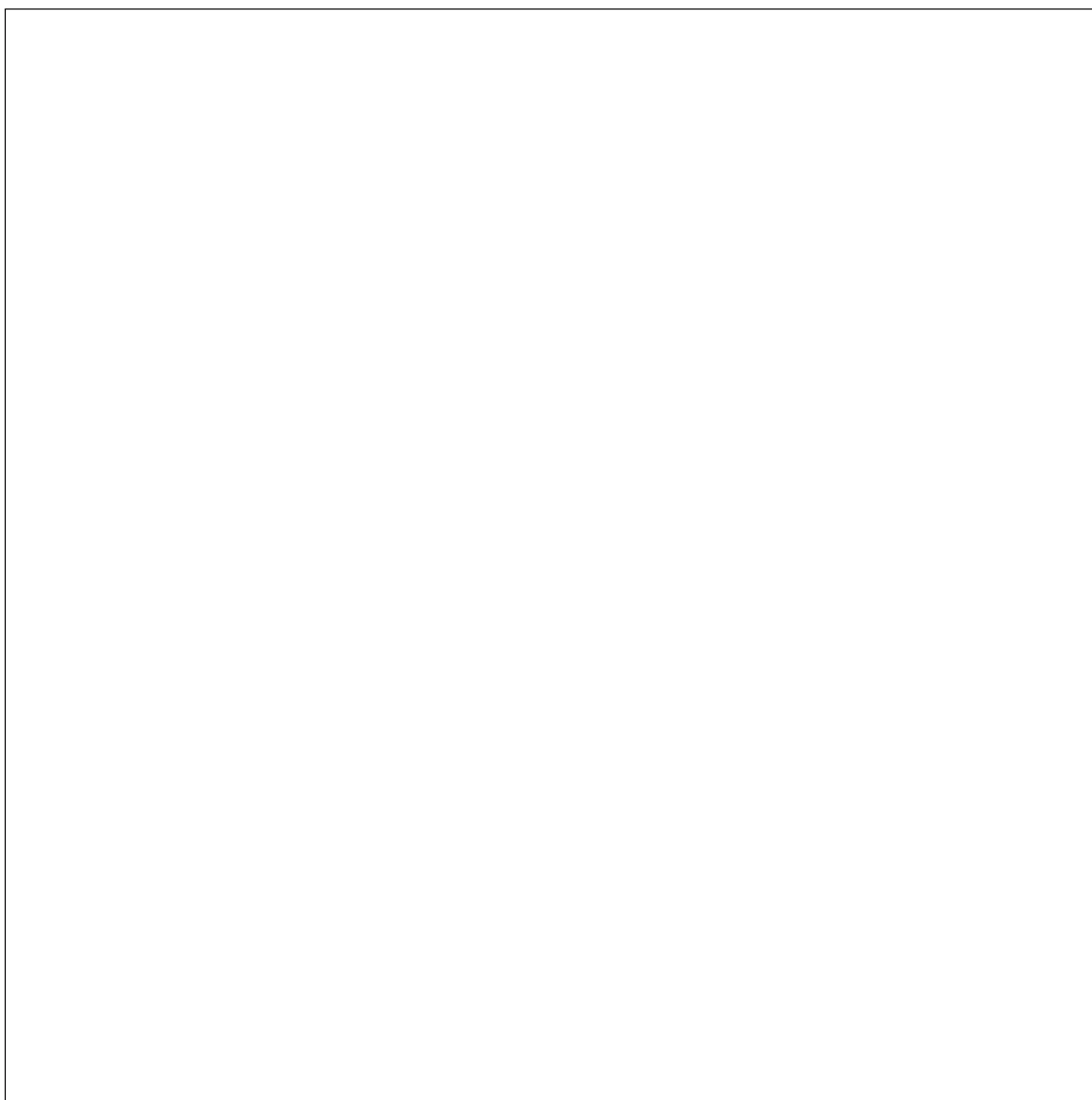
V. Information completed by the assessor

Suggested questions: Does the child look healthy? If not, explain. Does the child have problems with food? Are there (urgent) medical needs? If so, please explain. Does the child have enough clothes? Please describe your impressions of the house. Does the child seem scared/withdrawn/unhappy (to be rated/completed by assessors, please provide details)? Are there (urgent) protection needs or risks that need to be addressed (give details)?

VI. Verification interview with adult guardian/foster family (only if applicable)

Name of guardian	
Age	Gender
Ethnicity	Relation with the child
What is the name of the child's mother?	What is the name of the child's father?
<p>Suggested questions: Where did the child live before? (Name of province, village). How the child was separated from his/her family? What information do you have about the child and his/her life? When did you first meet the child? How long has the child lived with you? How did the child come to live with you? Are you in contact with the child's parents or other relatives? If so, please provide contact information. How is your relationship with the child? Are you able to continue to care for him/her? Is the child healthy? Is there any other information you would like to share with me today?</p>	

VII. Child's drawing²⁸



²⁸ In this part children who are separated can draw a family tree or their former home. They can show different rooms of the house and who lives in which room. Such drawings help highlight family relationships and other useful tracing information. The child can also draw her or his village, neighbourhood or their old town and draw important buildings such as their school or mosque.

VIII. Summary and recommendations

Case summary + identified needs + observations

Recommended Actions/Reference	
<ul style="list-style-type: none"> • Safe haven • Determination of refugee status • Protection • Medical assistance • Alternative care • Psychosocial support • Counselling • Food • Water/Hygiene • Education • Sheltering • Recreative/community activities • Regular house visits 	Other specific assistance (specify)
	Need for a BID • Priority • Normal

IX. Action plan (prioritize)

Needed action	Responsible Service Provider	Action conducted + Date	Status/situation

Veprimi i kërkuar	Ofruesi i shërbimit Përgjegjës	Veprimi i kryer + Data	Statusi/gjendja

Date of next home visit	Date of review of this case
Signature of child protection professional	Signature of observation professional
Date	Date

Annex 7 - Report of the Determination of the Best Interest (BID) ²⁹

Section 1: Overview

Camp/Location	Related cases
BID File No.	Case referred by
Registry number	
Child Status	Purpose of BID
Unaccompanied	Reliable solution
Separated	Care offering
Orphan	Separation
Other	Other
	None of the above

Priority of the case (mention the reasons)

Urgent	Specify
Normal	
Special needs of the child	

Basic bio-data of the child (refer to the registration form)

	When necessary, indicate whether the information is an assessment
Full name	
Nickname	
Age	
Gender	
Date of birth	
Place of birth	
Date of arrival in the country	
Date of arrival at current location	
Nationality	
Ethnicity	
Religion	
Current address	
Registered address	
Current guardian	
Related cases	
Related BIDs	
Father's name	
Mother's name	
Siblings	

Tracing

Started on	Status/situation
------------	------------------

Interviews

Interviewed person	Number of interviews	Date of interviews

	Name	Organization/Institution
Interviewer		
Reviewing Officer		
Translator		

Documentation attached
1.
2.
3.
4.

Section 2: Options and recommendations

<p>Part I – Brief summary information on the case</p> <p>Please briefly summarize key issues, such as current care, information on parents and family, and options under consideration.</p>
--

Part II – Pre-flight/separation history**Part III – Current situation**

Please describe the child's current living situation, including: current care, living conditions, safety, relationship with foster parents/siblings/guardians/other family members; community networks, education and school attendance; assessment of the child's age and maturity, physical and mental health and any specific needs assessment. Please indicate who was contacted and who provided information, e.g., child, family, people close to the child, guardians, teachers, neighbours, social workers/NGO staff.

Part IV – Available options and analysis

Please indicate all available options and associated mechanisms and analysis of each. Please refer to all factors to recommend what is in the child's best interest, under the following headings: Child's views, Family and close relationships, Safe environment, Development and needs of persons who have provided information, e.g., the child, family, people close to the child, guardians, teachers, neighbours, and social workers/NGO staff.

Final recommendation

Please provide the final recommendation and reasons.

Assessor's name	
Assessor's signature	Date

Reviewer's name	
Reviewer's comments on the report	
Reviewer's signature	Date

Session 3: Panel decision

This section must be completed and signed at BID panel sessions. The signed page must then be scanned to protect the information contained, attached to sections 1 and 2 of the form and converted into a PDF document.

Panel

Approves the recommendations
Postpones the decision (please explain why)
Does not approve the recommendations (please explain why and give the recommendation of the panel)
Re-opens the case (please explain why and who asked to re-open the case)
Closes the case

Full reasons behind the decision

--

Further actions required (check and specify)

<input type="checkbox"/> None	<input type="checkbox"/> Refer the child for <ul style="list-style-type: none"> • Alternative care • Protective measures • Education assistance • Psycho-social assistance • Material support • Medical assistance
<input type="checkbox"/> Offer counselling to the <ul style="list-style-type: none"> • Child • Biological parents • Foster parents 	
<input type="checkbox"/> Initiate official tracking	
<input type="checkbox"/> Other (explain)	

Comments

[illegible]

Signatures of the members of the panel

Name	Organization	Signature
Date		

³⁰ BID implementation occurs in a number of different contexts around the world. The BID Guidelines emphasize the primary responsibility of governments for determining the best interest. However, if the relevant state authorities are unable or unwilling to determine best interest procedures, or if the children concerned do not have access to national BID procedures, UNHCR (together with partners) should ensure for this function to be fulfilled for children in need. UNHCR's BID Guidelines set out the standards and procedures needed to conduct the BID process. The key steps of the BID process are:

³⁰ UNCHR, 2011. Field Handbook for the Implementation of UNHCR BID Guidelines

- Appoint a BID supervisor (within UNHCR or a preferred partner agency).
- Identify suitable partners with relevant expertise for child protection.
- Identify BID panel members and set-up a BID panel.
- Establish standard operating procedures (SOP) for BID, developed together with partners.
- Provide training on child protection and the BID process to BID panel members and other staff.
- Assess existing staff capacity and hire caseworkers and child protection staff as needed, possibly through partnership agreements.
- Provide information on the BID process to community groups and children.
- Establish or strengthen existing child protection program, including mechanisms for identifying children at risk, referral mechanisms, case management system, etc.

