



Ministry of Gender, Labour
and Social Development



CASE MANAGEMENT TRAINING MANUAL

A Resource for Trainers in Child Protection
Casework in Uganda



Save the Children



May 2016

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FOREWORD

The Ministry of Gender, Labour and Social Development has prioritised capacity enhancement for the social welfare workforce to ably respond to the growing cases of child abuse in the country. Since 2012, Government through the SUNRISE OVC Project has been partnering with Makerere University Department of Social Work and Social Administration to train frontline social welfare workforce at local government level and community volunteers in 80 districts.

With the launch of the Uganda Child Helpline as a government facility for reporting and responding to child abuse cases in 2014, the need for standards in casework on all reported cases was identified as a new capacity development issue. Consequently, a handbook on child protection case management has been developed in partnership with Uganda Child Rights NGO Network to address this capacity need.

This Training Manual on child protection case management is a complementary resource to the Case Management Handbook. The Training Manual is presented in a simple, self-guiding format to serve as a resource for trainers and facilitators in child protection casework. It provides a linkage between child focused casework with factual information on child growth, child development and child protection systems offering foundational knowledge required of any effective child protection caseworker.

The Ministry recognises the critical role of informal child protection systems as the natural first line of contact with children in need of care and protection. The Ministry further recognizes the inherent capacity limitations of the informal child protection systems. This manual, therefore, comes in handy as a resource for trainers, individuals and groups working with children at all levels. The Ministry therefore, calls upon all trainers in child protection to make reference to this valuable training resource.

Wilson Muruli Mukasa (MP)
Minister of Gender, Labour and Social Development

ACKNOWLEDGEMENTS

This resource is the product of concerted efforts by both government and civil society child protection actors. Propelled by the appreciation of the need to standardise child protection case management through equipping case workers and individuals who handle child protection cases to do so more effectively, the Ministry of Gender Labour and Social Development (MGLSD) working in collaboration with the Uganda Child Rights NGO Network rallied a number of individuals and organisations to invest valuable time, resources and expertise to support the development of this Training Manual

Special gratitude goes to our partners Uganda Child Rights NGO Network, UNICEF Uganda office and Save the Children for the technical and financial support towards development of this Training Manual. Special appreciation is also extended to the National Child Protection Working Group comprised of government and civil society child protection actors at national level, for their technical input into the drafts generated during the process. To the district based stakeholders especially caseworkers who provided practice insights that informed the development of the Training Manual content and the validation workshop participants whose comments helped to refine the final product, you are all much acknowledged.

Last but not least, I thank Development Links Consult, the consultancy firm that technically spearheaded the entire process of developing this manual.

**Permanent Secretary
Ministry of Gender, Labour and Social Development**

ABBREVIATIONS

ACRWC	African Charter on the Rights and Welfare of the Child
CBO	Community Based Organization
CDO	Community Development Officer
CFPU	Child and Family Protection Unit
CSO	Civil Society Organization
DPP	Director of Public Prosecution
FBO	Faith Based Organization
FCC	Family and Children's Court
IDP	Internally Displaced Person
LC	Local Council
MGLSD	Ministry of Gender, Labour and Social Development
MoES	Ministry of Education and Sports
MoH	Ministry of Health
MoIA	Ministry of Internal Affairs
MOJCA	Ministry of Justice and Constitutional Affairs
NCC	National Council for Children
PSWO	Probation and Social Welfare Officer
PWD(s)	Persons with Disabilities
RSA	Resident State Attorney
UDHS	Uganda Demographic and Health Survey
UPF	Uganda Police Force
UCRNN	Uganda Child Rights NGO Network
UNCRC	United Nations Convention on the Rights of the Child
UNICEF	United Nations Children's Fund
UBOS	Uganda Bureau of Statistics
URSB	Uganda Registration Services Bureau
VHT	Village Health Team
VCCM	Village Child Case Management

GLOSSARY

Child Protection:	The prevention of and response to abuse, neglect, exploitation, and violence against children.
Child Protection System:	A set of laws, policies, regulations and services in all social sectors (especially social welfare, education, health, security and justice) that prevent and respond to abuse, neglect, exploitation, and violence against children.
Case Management:	It is a way of organizing and carrying out work to address an individual child's [and their family's] needs in an appropriate, systematic and timely manner, through direct support and or referral (Global Protection Cluster, 2014).
Caseworker:	Is the worker employed by a government or non-profit agency or other organization with the primary responsibility for assuring that a child receives appropriate services starting from case identification to case closure.
Case Manager/Supervisor:	Is the worker employed by a government or non-profit agency or other organization to provide oversight over the services of the agency Caseworkers.
Case Referral:	This is the process of formally requesting for services for a child or their family from another agency through an established procedure and/or form.
Case Transfer:	This is the formal handover of a case from one agency to another for effective management.
Custody:	The legal and practical relationship between a parent/ guardian and his or her child. This can include; the right of the parent to make decisions in the best interest of the child, the parent's duty to care for the child and the right to visit the child.
Informed consent:	This is the voluntary agreement of an individual who has the legal capacity to give consent. Parents are typically responsible for giving consent for their children to receive services.
Informed assent:	It is the expressed willingness of a child to participate in services. For younger children who are too young to give informed consent, but who are old enough to understand and agree to participate in services, the child's "informed assent" is sought.
Statutory Actor:	Institutions and individuals with a statutory mandate for child care and protection
Non Statutory Actor:	Other stakeholders with a complementary child protection role to those mandated by law to care for and protect children.
Client:	A child to whom child protection case management services are offered
Child survivor:	A child that has suffered a violation of their protection right
Offender:	A person who violates the protection rights of a child.

SECTION A

INTRODUCTION TO THE MANUAL

1. BACKGROUND TO THE COMPILATION OF THE MANUAL

The Government of Uganda, working with development partners and civil society organisations, has made remarkable strides in protecting children from abuse, violence and exploitation. Having ratified the United Nations Convention on the Rights of the Child in 1990 and the African Charter on the Rights and Welfare of the Child in 1994, the government has since undertaken several legislative, policy and programmatic initiatives to protect all children, especially vulnerable groups, from abuse, neglect and exploitation.

In 2005, the Uganda Child Helpline (UCHL) was initiated as a toll free telephone service to provide a national mechanism for reporting and managing cases of child protection violations across the country. While the UCHL is expected to increase reporting of child rights violations, its contribution to improved case management in Uganda is dependent on the quality of the case management response at both the national and sub national level.

Yet, while several training resources on child protection exist in Uganda, there is no single training resource addressing case management in child protection. This Training Manual therefore has been developed to fill the existing knowledge gap in case management with children in need of protection services to complement the “Handbook for Management of Child protection Cases in Uganda (GoU-UNICEF-UCRNN, 2016).

The Handbook is a User’s Manual with the key steps and principles for effective case management. Both resources have been developed through a partnership involving the Ministry of Gender, Labour and Social Development (MGLSD), United Nations Children’s Fund (UNICEF)-Uganda and Uganda Child Rights NGO Network (UCRNN).

The preparation of this Manual involved several inter-linked processes. It has drawn a lot from the experiences of child protection Caseworkers in Uganda, global good practice in the management of child protection cases and the Handbook for Management of Child protection cases.

The process of developing the Training Manual started with an extensive review of literature on various policies, guidelines, strategies, legislation and training documents in the area of child protection and social casework. Subsequently, consultations were undertaken with the relevant stakeholders at the district and national level. These included MGLSD officials, PSWOs and NGOs involved in child protection work.

In the final stages, the draft Manual was peer reviewed by child protection and training resource specialists before a national validation workshop involving participants from the National Child Protection Working Group (NCPWG). The list of participants in the validation workshop is appended to this Guide (Appendix 6).

2. PURPOSE OF THIS MANUAL

The Manual has been developed to provide a common reference resource for Trainers and facilitators who train and mentor child protection Caseworkers. The Manual will help Trainers in case management to pass on the requisite knowledge on key elements, principles and standards in case management with children in need of protection services. The Training Manual assembles essential knowledge areas required of a competent child protection Caseworker.

3. INTENDED USERS OF THE MANUAL

The Manual is a key resource for Trainers/Facilitators operating in organisations or entities with a mandate in child protection. Such institutions may include; Police training schools, Paralegal service institutions, Teacher training colleges, Health Tutor colleges, Ministries, Departments and Agencies of Government, local governments, and duly registered civil society organizations. The Trainers are expected to use the Manual to effectively train child protection Caseworkers within their reach.

As a quality assurance mechanism, institutions interested in offering case management training using this Manual should consult the Department of Youth and Children at the Ministry of Gender, Labour and Social Development to advise on the selection of Trainers. The Trainers should meet the following seven requirements:

1. Should have at least a Degree in a social development field
2. Should have at least five years' practical experience in social welfare work
3. Demonstrated work experience in casework with children in need of protection
4. Basic knowledge of child growth and development
5. Good knowledge of the legal and policy framework on children's rights and child protection
6. An experienced Trainer, with adult facilitation skills
7. No criminal record of violating children's rights

The targeted trainees are Frontline social welfare work force personnel and other personnel in institutions with a child protection mandate. These may include, but are not limited to:

- ✓ Probation and Social Welfare Officers
- ✓ Community Development Officers
- ✓ Social workers
- ✓ Counsellors
- ✓ Police officers
- ✓ Teachers and other Educators
- ✓ Court prosecutors
- ✓ Health workers
- ✓ Judicial officers
- ✓ Staff of Non-governmental Organizations
- ✓ Members of Local Councils (LCs)
- ✓ Staff of registered Children and Babies Homes
- ✓ Members of Community and Faith Based Organizations
- ✓ Members of cultural institutions
- ✓ Members of private sector enterprises
- ✓ Members of voluntary community based child protection structures, such as Child Protection Committees, para-social workers, paralegals, Village Health Teams, FIT persons and peer educators.

4. STRUCTURE OF THE MANUAL

The main training content is organised into two Sections (B and C) and four Modules. The content in section B covers the foundation knowledge for casework to ensure Caseworkers understand the fundamentals of childcare and protection. The first Module in this section covers childhood and the protective environment, and the stages of child growth and development. The second Module focuses on the relevant national legal framework and explores the child protection right as distinct from other rights.

The content in Section C focuses on child protection case management, which is the core focus of this Manual. The first Module in Section C explains the essential elements of case management standards as well as the core competences, skills set and values for child protection Casework. The last Module addresses information management and measuring success in case management with children.

The content in each Module has been subdivided into Sessions. All Sessions have an outline of key words and learning outcomes. Each Session comprises a set of training aspects laid out in a standard format as a guide to the Trainers.

5. TRAINING METHODS PROPOSED IN THE MANUAL

The training methods provided in this Manual (as outlined in Table 1) are suitable for training of adults.

TABLE 1: Training methods proposed in the Manual

Plenary Discussion	Verbal exchange of ideas between facilitators and participants – usually undertaken as a brainstorm or after working on a common assignment in groups with responses written on a flip chart. To gain maximum results, the plenary should be limited to one topic addressing pre-defined issues/ questions. The feedback Session should be facilitated by a moderator knowledgeable about the issue under discussion.
Work in Pairs and Work in Groups	Participants discuss in pairs or groups. Working in pairs can be used in instances where there is insufficient time for group work but you want to generate discussion among participants or prefer to break up the discussion into sub topics. Group work is ideal in discussing complex issues that require diverse perspectives.
Personal Reflection	Personal reflection can be used to generate ideas for brainstorming Sessions. It also helps participants to contextualise issues. Participants can write ideas on manila cards and put them up on a wall or hand them to the Trainer to display. It is useful when reflecting on sensitive topics, but has to be accompanied by psycho social support services for individuals who fail to contain emotions during the reflection.
Gallery Walk	Involves participants moving around a training room to compose answers to questions, display their work, or read and reflect upon the answers given by other participants. A gallery walk is an engaging active learning technique that allows for the participation of the whole group and helps re-energize participants. In a gallery walk, participants are able to learn how others approached an activity, ask questions, and refine their own ideas based on the learning. During the gallery walk, the Trainer can assess participants' understanding of the topic. Participants should always be engaged in the work they are reviewing as they walk around e.g. by adding something to others' work or looking for similarities/differences among their peers' work and responses.

Case study	The group is presented with information on a real or realistic situation either through a presentation or documented piece of work. They discuss and analyse the issues therein, and relate the issues to the topic of interest.
Role Plays	Participants act out a commonly encountered situation, making them picture what they would do in that situation. It should stimulate discussions on what is and what is not acceptable. This gives them first-hand experience of how it would feel to be in that situation, even if they are not in the same situation.
Games	A mix of play and learning using visual aids
Storytelling	Relaying information of a legend or a witnessed situation that has relevance to the topic of discussion
Community mapping	Identifying key features and resources of a particular location through drawing of sketches and use of symbols on a local map.
Picture interpretation	Still photos or images that represent an issue of interest are interpreted by the participants.
Debate	Discussion of a topical issue with a deliberate plan to justify one's position based on facts
Lecture	Passing on information through talking about key issues around the subject of focus
Discussions	Open sharing of opinions and experiences about an issue

6. HOW TO USE THE MANUAL



This Manual is a complementary resource to the Child Protection Case Management Handbook, 2016. The selection of training areas has been informed by the content in the Case management Handbook that requires training room experience. Therefore, users of this Manual **MUST** read the Handbook in detail and **USE** it during the training Sessions.

To make the best use of the Manual, the Trainers need to first acquaint themselves with its content and style. The Manual content is broad enough and can be adapted for various categories of trainees based on the results of the pre-training needs assessment and participants' expectations. A sample of a pre-training needs assessment tool is provided in Appendix 1.

The content of the first two Modules has been designed for refresher training as it does not cover the required foundational knowledge in detail. Further training in foundational topics is therefore recommended for trainees who have had no prior training in these topics. The GoU - National Child protection curriculum accredited by Makerere University is one such foundational training that all Caseworkers with children need to undergo.

It is important to arrange separate training events for Caseworkers and Case managers (casework supervisors). This helps in creating an environment conducive for free expression and management of group dynamics. The training should last at most 10 days (for beginner Caseworkers) and five days for Caseworkers who require skills upgrade. Overall, the Trainers should keep the content as simple and context specific as possible. Where necessary, the Trainers should further simplify the content to suit the target group.

It is also important for the Trainers to undertake further reading on the training topics as the information provided in this Manual is not exhaustive. The recommended resources are the Penal Code Act (Cap 120) and the Children Act (Cap 59) in addition to the list of resource materials provided in the Appendices of this Manual.



7. TIPS FOR TRAINERS PLANNING FOR A TRAINING EVENT

The Trainers should directly or through the training organisers utilise the following tips:



Participants:

The Trainers should send the training programme to participants at least a week in advance to enable them to know the content to be covered and any pre-training preparation (such as advance reading) they need to make.



Training materials:

The set of materials required for each training Session is listed in the outline for each topic and these are guided by the proposed training methods. These suggestions are not exhaustive and so the Trainers should use other context and culturally appropriate training methods and materials within their reach.



Venue:

The venue should be checked and set up a day before the training. All equipment should be tested. There are different ways of setting up the training room, depending on the intended learning environment and the nature of the participants. Consider fresh air; light; ease of movement; sight lines from different angles; and the display of materials while planning the venue set-up.



Co-Trainer:

A co-facilitator is a MUST in delivering this training, due to its length and facilitation style (a combination of experiential learning and participatory approaches). One Trainer may not necessarily have the mastery of all the Modules and alteration of Trainers exposes participants to new facilitation methods. It is a good practice for Trainers to meet before - hand to plan Sessions, divide Sessions or topics and to have joint reflection at the end of each training day.



Managing sensitive topics:

The Trainer should avoid starting a Session with sensitive topics which are likely to cause emotional discomfort among the participants. In addition, the Trainers have a duty to alert participants in advance about the sensitivity of particular topics at the start of the Session. Within the facilitating team, there should be one trained in handling disclosures to support any participants that become upset or make a disclosure during or after training. Participants should be made aware of this person and how to contact them.



Introducing the Training:

The Modules have been organised in a chronological order. It is therefore recommended that the training follows the line-up of the Modules and Sessions. In instances where the target trainees do not need much detail on foundational Modules, give an overview of the foundational content as a preamble to child protection case management.

The start of the training should have an introduction or welcome remarks from the facilitator, an ice-breaker and participant introductions, setting ground rules and any other relevant issues, based on the context. Confidentiality should be one of the rules set. This should be immediately followed by an overview of training objectives and programme.



Understanding Trainees' Knowledge levels, Attitudes and Beliefs:

Trainers are cautioned not to assume that trainees know nothing about the content in this Training Manual. This Manual targets Trainers and facilitators in child protection who meet a defined criterion as enlisted in Section A- Part 3. It is expected that Trainees will have some basic information on each of the topics. Therefore, prior to any training Session, the Trainer should first establish trainees' knowledge levels on the topics. A sample pre-training knowledge assessment form is provided in Appendix 1.

In addition, the Trainer should as much as possible get to understand trainees' attitudes and beliefs about particular training areas through preamble questions and puzzles formulated by the Trainer as deemed fit.



Training Duration:

The allocated time on each topic in this Manual is only a guide to Trainers. The Trainers should determine the appropriate duration for a training Session or a topic based on the trainees' knowledge level and the selected training methods.



Training evaluation and report:

It is important that you plan in advance how the training will be evaluated to gauge if the objectives have been achieved. Besides the pre and post-training assessment and the general training evaluation, Session specific assessment should be done before moving to the next Session. Similarly, the structure of the training report should be developed in advance and important notes written down daily to ease the preparation of a report at the end of the training. Samples of training assessment and evaluation forms and report format are provided in Appendices 1-3 of this Manual.

SECTION B:

FOUNDATIONAL KNOWLEDGE IN CHILD PROTECTION CASEWORK

SECTION SUMMARY

Reference	Topic	Objectives
MODULE 1:	CHILDHOOD, CHILDCARE AND CHILD DEVELOPMENT	
SESSION 1:	Childhood and Stages of Child Growth	
1.1	Who is a child? What characterises childhood?	To clarify what childhood means in the context of the national legal framework on children
1.2	Stages of child growth	To equip Caseworkers with basic knowledge on child development stages and protection risks by age
SESSION 2:	Children's Rights and Responsibilities	
1.3	Children's Rights	To clarify the cardinal rights of children and their interdependence
1.4	Children's Responsibilities	To improve Caseworkers' appreciation of the direct correlation between children's rights and responsibilities.
MODULE 2:	INTRODUCTION TO CHILD PROTECTION	
SESSION 1:	The legal and policy framework for the provision of child protection services	
2.1	Laws and policies on child protection	To enable an understanding of international instruments and national laws on children
2.2	Application of the law to protect children	To enable appreciation of the inherent challenges in the application of the law to protect children
2.3	Efforts to increase children's access to justice	To increase the appreciation of the current innovations in child protection case management that trainees can adopt
SESSION 2:	Child protection and child protection systems	
2.4	The right of children to protection – What does it mean in practice?	To enable a clear understanding of the protection right as distinct from other rights
2.5	Duty bearers and the rings of Responsibility in child protection	To enable a broader understanding of the child protection actors, including the roles of parents and families, and how to build protective environments for children
2.6	Community factors underlying child protection violations	To explore causal factors to child protection violations to inform prevention interventions



MODULE 1: CHILDHOOD, CHILD CARE AND CHILD DEVELOPMENT

This Module is the first point of practical application of the Trainer's guidance tips provided in Section One. It aims to provide participants with the basic knowledge on childhood, child care and development, including definition of a child, in accordance with the national legal framework. The content will therefore enable Caseworkers undertake a context specific analysis of child protection needs as well as the potential risks children face at different stages of growth and development. In this Section, we explore the meaning of childhood; the rights and responsibilities of children; the distinctiveness of child protection rights; duty bearers in the protection of children and the child protection system.

SESSION 1: UNDERSTANDING CHILDHOOD AND STAGES OF CHILD GROWTH

Key words: Child; early childcare; and child development.

Learning Outcomes:

By the end of the Session, Trainees would have:

- Understood the definition of a child, the characteristics of childhood and reflected on their own attitudes about children and childhood.
- Understood the characteristics of various stages of child growth, the type of needs and the common risks that children face at each stage of growth.



1.1 WHO IS A CHILD? WHAT CHARACTERISES CHILDHOOD?

Aim: To enable trainees have an appreciation of the different stages of child growth as well as a common understanding of the legal definition of a child.

Methods: Picture interpretation, Reflection, Gallery walk, Plenary Discussion, and lecture.

Training materials: Local Dolls, Art pieces of children, wall charts with children images, charcoal pieces, chalk, sticks, plain sandy ground, A4 size manila paper, markers, coloured pencils, pencils, masking tape.



Duration: 30 minutes



Exercise: 1) Who is a child?

Materials: Use the pictorial chart of children (on activity exercises at the end of this topic)

Procedural Guidelines

Option 1	Option 2	Option 3
Display the pictorial chart 1 to trainees	Give each trainee 1 A4 size manila card, a pencil and at least 2 coloured pencils	Divide participants in groups of 5
Through brainstorm method, ask them to identify what the children in Chart 1 are doing and why they think children are doing exactly that (leave it open for participants to explain while you note down the discussion points on a flip chart).	Ask trainees to draw a picture of a child on a manila paper	Distribute to each group at least 3 different types and sizes of locally made dolls
Guide a discussion on which of the pictures best represents a child in their opinion and why they chose the picture?	Let each trainee pin up their picture using masking tape in a particular corner of the training room	Ask each group to choose the doll that best describes a child in their opinion and to discuss the reasons for their choice.
Conclude the Session with the legal definition of a child in Uganda	Ask participants to walk around viewing pictures and then all assemble at the corner with pictures (gallery).	Through plenary, ask each group to share its choice and reasons for choice.
Lecture trainees on why all persons below the age of 18 have to be identified and treated as children. Refer to notes in the Trainer's checklist.	Ask five volunteers from among trainees to each pick one picture that best represents a child in their opinion and explain why they chose the picture.	Conclude the discussion with the legal definition of a child in Uganda
	Conclude the Session with the legal definition of a child in Uganda	Lecture trainees on why all persons below the age of 18 have to be identified and treated as children. Refer to notes in the Trainer's checklist.
	Lecture trainees on why all persons below the age of 18 have to be identified and treated as children. Refer to notes in the Trainer's checklist.	



Trainer's Information Checklist:

A child is any person below the age of 18 years. This is the definition provided in the Constitution of the Republic of Uganda (1995) and the Children Act, Cap 59. Uganda has also ratified the United Nations Convention on the Rights of the Child (UNCRC) and the African Charter on the Rights and Welfare of the Child (ACWRC) both of which consider children as persons below the age of 18 years.

Cultural expectations of childhood sometimes differ from the lived realities of childhood and the legal definition of a child in the national laws. However, everyone must respect the definition of a child irrespective of the different social and cultural perceptions of childhood.

The various laws further recognise childhood as a period in which children require appropriate care and support to develop various capabilities in the course of exercising their rights and responsibilities. Therefore, adults, to whom children depend on for their well-being, must always ensure that the environment in which a child finds themselves is safe, secure and gives them space to enjoy their childhood.

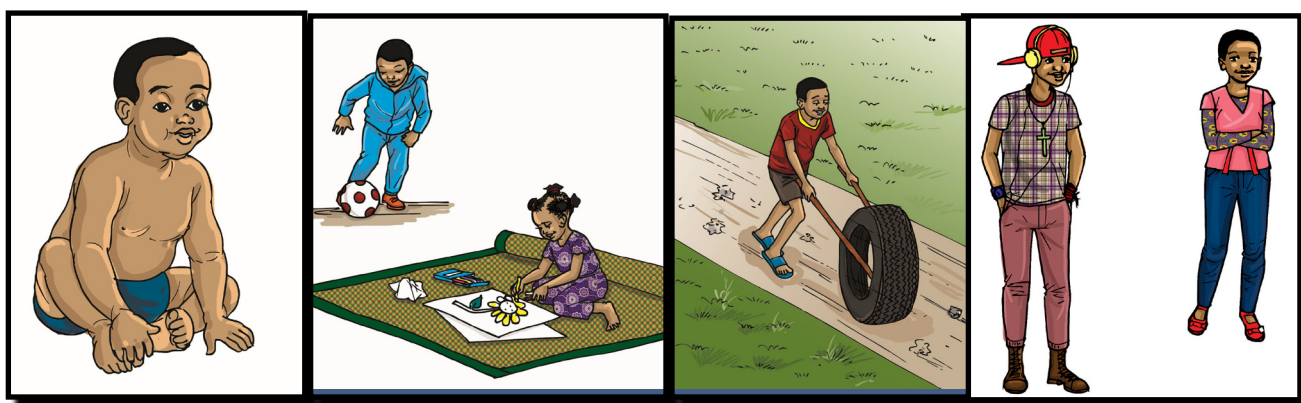
Lastly, as adults, we may not easily recollect our own experiences of childhood as time has passed. Situations also change for different generations of children and so not all our past experiences of childhood may be relevant for children in the current context. : This necessitates age appropriate involvement of children in the management of their cases e.g. being consulted by a Caseworker to determine the focus of their case plan.



Material for Activity Exercise:

A Pictorial Chart of Children

1.2 STAGES OF CHILD GROWTH



Aim: To enable trainees appreciate children's needs, characteristics, capacities and vulnerabilities in the various stages of childhood.

Methods: Case study and Panel discussion.

Training materials:



Duration: 2 hours.



Exercises: Panel discussion guided by a case study Story of Cynthia's early development

Procedural Guidelines

Identify four Panelists in advance (at least one hour before the exercise) and brief them on the exercise they will carry out on the stages of child growth. The stages of child growth are listed below:

- ✓ Infant (age 0-1 year)
 - ✓ Toddler (age 1-3 years)
 - ✓ Early childhood (age 3-6 years)
 - ✓ Middle childhood (age 7-11 years)
 - ✓ Late Childhood/ Adolescence (age 12-17 years)
- i. Write each of the stages of child growth on four separate manila cards;
 - ii. Place empty chairs in a row in front of the training room;
 - iii. Call upon the four Panelists (earlier identified) to come forward;
 - iv. Pin, using masking tape, one manila card with childhood growth stage on the chest of each Panelist
 - v. Ask each Panelist to take a seat in one of the chairs in front of the training room
 - vi. Distribute copies of The story of Cynthia's early childhood to all trainees (Refer to Cynthia's story in Activity exercises section at the end of this topic)
 - vii. Ask a volunteer from the audience to read out aloud Cynthia's story
 - viii. Invite Panelists to discuss:
 - a) How the character and needs of children in the age group they are each representing are similar to Cynthia's as depicted in the story and how their needs differ.
 - b) Common risks faced by children in the age group they are representing (The Trainer should write the Panelists' points using different colours in the blank chart on stages of child growth under Activity exercises section at the end of this topic)
 - ix. Conclude the activity by opening up a discussion to the entire trainee group to supplement the needs of children identified by the Panelists.
 - x. Wrap up the Session highlighting what could have been left out in the content on child growth in reference to the Trainer's checklist).



Trainer's Information Checklist:

Case management plans drawn without knowledge of child growth and development may not adequately address children's age specific needs and uphold their protection rights, thereby resulting in harm to the child. Knowledge of child development helps a Caseworker to determine how to involve and communicate with children, depending on their age and evolving capacity; as well as take care of foreseen protection risks of children based on their age.

The growth of a child is seen through different changes that take place in their physical body, feelings, reasoning capacity and in relating with people in their environment. Therefore, a balanced growth of a child must show positive change in five major areas:

- ✓ Physical
- ✓ Emotional



- ✓ Social
- ✓ Mental
- ✓ Spiritual

It is important that people that work with or care for children understand the different stages of growth and development that children go through in order to understand children's needs, detect abnormal development and communicate effectively with children.

Young children are best understood as social actors whose survival, well-being and development are dependent on and built around close relationships – with parents in the first instance, but also siblings, peers, neighbours and other adults in their immediate environment. Science has identified three core concepts in early development, i.e.

- Experiences build early brain development (basic architecture of the brain is constructed through a process that begins early in life and continues into adulthood. Therefore, early experiences are built into our bodies and brain for better or for worse);
- Serve and return interaction shapes brain circuitry (young children reach out for interaction through bubbling, facial expressions, gestures to which adults are to respond. This back and forth process is fundamental to the wiring in the brain);
- Toxic stress derails healthy development (toxic stress is the strong, unrelieved activation of the body's stress management system which occurs in children in the absence of protective adult support. Known long-term consequences of toxic stress include – weakening brain development, retardation in learning, mental health and behaviour.

Source: http://developingchild.harvard.edu/resources/multimedia/videos/three_core_concepts/toxic_stress/

A BLANK CHART WITH STAGES OF CHILD GROWTH

Stages of Child growth	Expected developmental characteristics	Child's care & support needs	Risk factors in absence of adequate care and protection
Birth – 1 year (Infants)			
2-6 years (Early Childhood)			
7-12 years (Middle childhood)			
13-17 years (Adolescence)			



Case study – Cynthia’s Early Childhood, (AVSI SCORE parenting skills: Facilitators Manual 2014)

At birth, Cynthia’s life consisted of sleeping more than twenty hours each day, crying when hungry or needing something, eating and eliminating waste frequently. Her skills were limited to being able to squeeze the finger of the adult attending to her; move her arms and legs in an uncontrolled way, and being able to suck or smile reflectively now and again. Cynthia will soon celebrate her first birthday. What a difference if we compare her abilities today with those she possessed during her first days of life! Now her face is full of expression and variation, showing a rich interior. She recognizes family members, smiles for specific reasons, sits without help, is ready to take her first steps, understands many words and sounds, easily feeds herself with a bottle, and can even say “daddy” or mummy.”



Question and Answer Session



What are the key developmental characteristics, needs and vulnerabilities of children during the childhood period?



Stages of child growth	Expected developmental characteristics	Child care & support needs	Risk factors in the absence of adequate care and protection
Birth – 1 year (Infants)	<ul style="list-style-type: none"> ● Sit at 6 months ● Crawl and use hands at 7 months ● Stand with support at 10 months ● Stand firm and take first steps at a year. 	<ul style="list-style-type: none"> ● Breastfeeding ● Weaning on foods rich in iron, protein, and minerals etc. ● Close child care, including full immunisation 	<ul style="list-style-type: none"> ● Stunting ● Weak immune system
2-6 years (Early Childhood)	<ul style="list-style-type: none"> ● Imitate the behaviour of adults and other children in their environment ● Eager to help with work, ask many questions and show a high degree of curiosity, ● Like playing and making friends ● Develop some level of self - confidence, ● Understand the concept of right and wrong. 	<ul style="list-style-type: none"> ● Show parental love for the child and show interest in what the child does; ● Teach the child cleanliness and positive values; ● Provide a danger free play space to avoid accidents. 	Delayed brain development (actions not correlating with age)
7-12 years (Middle childhood)	<ul style="list-style-type: none"> ● Ability to hold a conversation ● More interested in learning ● Can dance and handle things more firmly. 	<ul style="list-style-type: none"> ● Support them to drop any negative behaviour and inculcate positive values. 	Low self-esteem and poor social skills
13-17 years (Adolescence)	<ul style="list-style-type: none"> ● Major physical body changes ● Desire to be more out of family into the wider community to assert their independence, ● Become more emotionally detached from the caregivers ● The desire to experiment with sex 	<ul style="list-style-type: none"> ● Support them to communicate their feelings ● Guide and counsel on the level of material demands, sexual relationships and making informed life choices. 	Poor communication and wrong life choices



SESSION 2: CHILDREN'S RIGHTS AND RESPONSIBILITIES

Key words: Child rights, Children's Responsibilities.

Learning Outcomes:

By the end of the Session, Caseworkers are expected to have:

- Appreciated the notion that children's rights are about realising children's wellbeing.
- Understood the interdependence of children's rights.
- Understood the importance of a dual focus on children's rights and responsibilities.

1.3 CHILDREN'S RIGHTS

Aim: To enable trainees understand the cardinal rights of children as stipulated in the United Nations Convention on the Rights of the Child (UNCRC).

Methods: Story telling, Plenary discussion, Lecture.

Training materials: Chart with UNCRC Articles on children's rights; Flipcharts and markers.



Duration: 2 hours



Exercises:

RIGHTS



RESPONSIBILITIES



Procedural Guidelines

- Ask trainees to mention what comes to their mind when they hear about children's rights.
- Ask two volunteers among the trainees to share – one story of a child they know who is enjoying their rights; and one child they know whose rights are largely denied. (The Trainer should write out the rights and violations depicted in both stories on a flip chart);
- Distribute hand-outs on children's rights as extracted from the UNCRC (See Appendix 4: Child rights in the UNCRC) and collectively with participants check if there are any rights in the UNCRC that were not mentioned in the stories told above. The Trainer should write these on a separate flip chart;
- Ask the participants (in groups) to identify the most respected/observed and the least observed rights through a review of both lists, and their experience in child casework.
- Through plenary discussion, generate reasons trainees suggest for the observation and violation of the children's rights as described above.
- Lecture participants on the four categories of children's rights (Survival, Development, Protection and Participation) stating the distinctiveness as well as the interdependence of rights). Make reference to the Trainer's checklist for more information.



Trainers Information Checklist:
Use the checklist under 1.4

1.4 CHILDREN'S RESPONSIBILITIES

Aim: To highlight to the trainees the importance of amplifying children's responsibilities besides their rights in all messages.

Methods: Individual Reflection, Discussion, Puzzle & Lecture.

Training materials: Chart with children's responsibilities, flip chart, marker



Duration: 30 minutes



Exercises: Puzzle exercise on children's rights and the children's corresponding responsibilities.

Procedural Guidelines

- Ask trainees who have children in their households to raise their hands.
- Let each trainee share what responsibilities children in their households have (Trainer to write responses on a flip chart).
- Guide a discussion along the enumerated responsibilities if any of these violate children's rights.
- Explain more about children's responsibilities in reference to Trainer's information checklist and point out any other responsibilities of children not mentioned by participants.
- Engage trainees in a puzzle exercise (refer to Activity exercises part) for participants to complete it using a plenary approach by providing the corresponding rights and responsibilities missing in the table.
- Give opportunity to three volunteers to briefly share their experiences in promoting children's rights and responsibilities (emphasize successes and challenges).
- Wrap up the topic by emphasising the need to always inform children of both their rights and responsibilities.



Trainer's Information checklist:

In Session 2.1, we learnt about the needs of children through the various stages of growth and development. In this Session, we have introduced the concept of children's rights, which is often perceived differently. Despite the government's ratification of the international instruments on the rights of children, notably, UNCRC and ACRWC, children's rights remain largely contested by parents and the public.

Children's rights provide a basis for the achievement of children's wellbeing because the needs of children form the basis of universal standards essential for proper child growth and development. The rights of children build upon these needs to create entitlements that adults and government ought to meet to enable children to grow and develop to their full potential.

The rights of children as listed in the UNCRC are many, but are broadly categorized into four:

- a) The right to Survival – Survival right addresses the right to life. Specific rights under survival include access to adequate food, shelter and healthcare, including immunisation.
- b) The right to Development – Development right includes development of a child's personality, talents and abilities and also demands the provision of education, recreation, spiritual and parental guidance.
- c) The right to Protection – Protection right demands protection of children from all forms of maltreatment (violence, abuse, neglect and exploitation)
- d) The right to Participation – Participation right provides entitlement for children to voice their opinions and decisions on matters that affect their well-being.

The above rights are interdependent to guarantee the total wellbeing of a child. For instance, a child who has access to adequate healthcare, but lacks



support to access development, protection and participation rights is at risk of mental retardation, low self-esteem, poor socialisation skills, and physical, psychological and emotional harm. It is therefore important that duty bearers ensure that children enjoy their rights across all these categories.

In addition to rights, children also have responsibilities. A child's rights end where the rights of another child or adult begin. This means that the rights have limits and the child must consider the rights of other children and adults when exercising his/her rights. Rights and responsibilities go hand in hand. A child has a right to education but also has the duty to attend school; a child has a right to health but has an obligation to take care of his or her health; a child has a right to free speech but by exercising ones right to free speech, the child must respect the rights of other children and adults; above all the right to protect one's honour and dignity.

(Source <http://lasteombudsman.ee/en/childrens-rights-and-responsibilities>).



Activity Exercise:

Puzzle Exercise: Children's Rights and Responsibilities:

Children's Rights	Children's Responsibilities
Children have a right to think and believe what they want	
	Children have a responsibility to respect other people's life.
Children have a right to a clean environment	
	Children have a responsibility to behave well at all times
Children have a right to get and share information	
Children have a right to think and believe what they want	Children have a responsibility to respect other people's opinions, thoughts and beliefs.
Children have a right to a full life	Children have a responsibility to respect other people's life.
Children have a right to a clean environment	Children have a responsibility to clean and take care of their environment
Children have a right to protection from all forms of harm and cruelty	Children have a responsibility to behave well at all times
Children have a right to get and share information	Children have a responsibility to share information appropriately

Further reading on Children's Rights and Responsibilities - visit <http://www.unicef.org/pakistan/rightsleaflet.pdf>



Question and Answer:



Name at least 3 rights of children and children's corresponding responsibilities.



MODULE2: INTRODUCTION TO CHILD PROTECTION



SESSION1: NATIONAL LEGAL AND POLICY FRAMEWORK FOR THE PROVISION OF CHILD PROTECTION SERVICES

In Session 1.2 under Module 1, the legal framework on children's rights and responsibilities was briefly introduced as foundational knowledge for a child Caseworker. In this Module, however, the global and national legal instruments on child protection as a specific category of children's rights as well their contextual application is discussed in more detail. This is because it is the main focus of this Training Manual and the Case Management Handbook.

Key words: Laws, policies, mandate.

Learning Outcomes:

By the end of the Session, Caseworkers should have a clear knowledge of:

-  Child protection laws and policies in Uganda
-  The multi sectoral nature of child protection services in Uganda

2.1. LAWS AND POLICIES ON PROTECTION OF CHILDREN

Aim: To increase the trainees' knowledge of the existing legal instruments on the rights of children and right to protection in particular.

Methods: Lecture, Story telling, Group work.

Training materials:

A4 size Manila cards, markers, case studies, copies of the Compendium of children laws in Uganda.



Duration: 3 hours



Exercises:

Procedural Guidelines

- i. Ask the trainees to enumerate the key legal instruments on child rights they know (write the responses on A4 manila card – one instrument per card);
- ii. Pin up the written cards in one place and ask trainees to converge around the cards;
- iii. Ask trainees to identify from the cards what falls in the categories of international instruments, national laws and national policies;
- iv. Help rectify wrong categorisations (if any);
- v. Briefly Lecture trainees on key international instruments on the rights of Children i.e. the United Nations Convention on the rights of the Child; and the African Charter on the Rights and Welfare of the Child (Refer to the Trainer's information checklist for more details).



A story with a legal aspect:

- i. Ask trainees to indicate if they have ever handled a case which involved legal action;
- ii. Choose two among those who have ever handled such cases to briefly tell the story (but tell them to conceal the name of the child and the names of other persons involved in the case);
- iii. Then divide the participants into groups and give each group a copy of the Compendium on children's laws;
- iv. Assign one of the two stories to each group and ask them to identify the relevant laws applicable in the management of that case (They can make reference to the compendium of children's laws in Uganda);
- v. Give time for each group to share its feedback in plenary (List the laws, including the articles/sections cited. Note the feedback points and display them for all to see);
- vi. Read aloud the laws identified as per the listing displayed and mention any other laws not listed, but relevant in the management of any one of the two cases shared.



Trainer's Information checklist:

While the national law on children exists, International instruments on the rights and welfare of the child provide global direction on the scope of protection children need as society evolves. Uganda ratified the UN Convention on the rights of the child in 1990 and the African Charter on the Rights and Welfare of the Child in 1994. Other relevant international instruments on care and protection of children ratified by Uganda include: Convention on the Elimination of All Forms of Discrimination against Women (CEDAW, 1979); Optional CRC Protocol on Sale of Children, Child Prostitution and Child Pornography; Optional CRC Protocol on Involvement of Children in Armed Conflict; Convention on the Rights of Persons with Disabilities (2007); Minimum Age Convention (ILO Convention No. 138, 1973); Worst Forms of Child Labour Convention (ILO No. 182, 1999); and the African Charter on Human and People's Rights (1981).



The Children's Act and the Penal Code Act are key national child protection laws. A complete collection of children laws in Uganda exists in a compendium of children laws compiled by FIDA and UNICEF.

In addition, some policy documents and strategic investment plans for sectors with a mandate for child protection have provisions on child protection. For example, the Ministry of Health has a training Manual on the clinical management of SGBV, and the Justice, Law and Order Sector has the District Chain Linked Guidelines informing the administration of justice at the decentralized level. The Social Development Sector has the NSPPI II, which prioritizes child protection and legal support for OVC.

2.2 APPLICATION OF THE LAW TO PROTECT CHILDREN

Aim: To generate ideas from trainees on how the practical challenges in the application of child protection laws can be addressed.

Methods: Discussions and Group work.

Training materials: Manila cards, markers, and stick pad.



Duration: 1 hour



Procedural Guidelines

In plenary, ask participants to identify the main challenges they encounter in the enforcement of child protection laws.



Group work:

- i. Divide participants into two groups and ask each group to discuss 1-2 of the identified challenges and suggest practical ways of addressing the challenges;
- ii. Then in a plenary Session: Each group makes a presentation, followed by discussions aimed at building consensus on the feasible solutions to the challenges.
- iii. Wrap up the Session by highlighting some of the challenges listed in the Trainer's Information Checklist which may have not been raised by the participants. Also stress that some challenges can be easily addressed while others are more complex because they relate to gaps in the overall child protection system. Inform trainees that the child protection system in Uganda is a topical issue that will be addressed during the training.



Trainer's Information checklist:

While the application of the law to protect children is the central role of government, there are some practical challenges resulting in service gaps.

Table 3: Some challenges in implementing the law on defilement

Legal Reference	Challenges in implementing the law	Resultant gaps in child protection services
The Penal Code Amendment Act (Sec.s. 129,30,131,132, 134,140, 144)	<p>Health workers demand for medical fees for the examination of victims of defilement even when children from vulnerable households cannot afford the fees.</p> <p>Police are torn between pursuing legal redress without admissible evidence and advising survivors to drop the cases.</p> <p>Health workers are challenged whether to charge survivors so as to facilitate legal redress or advise them otherwise</p>	<p>A defilement case lodged in court without a medical report is likely not to proceed through the justice system.</p> <p>Charging survivors legal fees discourages them from pursuing legal redress</p>
	<p>The absence of universal birth registration makes it difficult to prove the age of survivors of defilement.</p> <p>Who should police hold liable for failure to provide children with birth certificates – parents or the state organ in charge of birth registration?</p>	<p>Some survivors of defilement may not get redress on the presumption that they are of age.</p> <p>Some child offenders may be treated as adults and miss the protection in the juvenile justice standards.</p>
	<p>Poor documentation of cases along the referral pathway hinders the presentation of incriminating evidence in Court.</p> <p>Who is responsible for holding child protection service providers accountable for the poor documentation of cases handled?</p>	<p>Many cases are dropped or files lost due to insufficient evidence</p>

2.3 EFFORTS TO INCREASE CHILDREN'S ACCESS TO JUSTICE IN UGANDA

Aim: To enable the trainees to appreciate the complementary role of the non-formal justice system in addressing child protection concerns.

Methods: Debate and Lecture.

Training materials: Case study on Justice for Children programme.



Duration: 1 hour



Procedural Guidelines

- i. Ask volunteers (identified at least one hour before this activity and briefed on the debate topic) to take the front seats;
- ii. Announce the debate motion – “Children who commit offences in violation of the law should be handled by the informal structures and not taken through the formal Justice system”;
- iii. Lecture participants about the relevance of the informal justice systems, their limitations, the strengths of the formal justice system and innovations to increase children’s access to Justice through the Justice for children programme in Uganda (Use the Trainer’s information checklist).



Trainer’s Information checklist:

The children that come into contact with the law include juvenile offenders, child victims and child witnesses. The number of juvenile offenders on remand, and at the national rehabilitation centre at Kampiringisa continues to grow.

The Justice for Children (J4C) program is an initiative of the Justice, Law and Order Sector aimed at improving children’s access to justice when in contact with the law. It has seven strategic focus areas as listed below:

- ✓ Justice for all children, not only children who are in conflict with the law;
- ✓ Justice for children across arenas - civil, administrative, informal and criminal (broadening from an exclusive focus on criminal justice to all arenas of justice);
- ✓ From activities to results-driven programming;
- ✓ From bilateral engagement with a single JLOS institution to a system sector wide approach;
- ✓ From emphasis on policy at national level to practice change innovations at district levels;
- ✓ Expansion from an exclusive focus on the formal into the informal justice system;
- ✓ From child and youth exclusion/marginalization to inclusion, participation and empowerment.

Emerging good practices include:

1. National level commitment to improve services to children –a focus on structures, standards and processes
2. Demonstrable increase in the volume of child-related cases entering the justice system in the pilot sites



3. Local Level innovations to manage the workload include:
 - Diversion of cases to LCs and the community
 - Blocking of days to hear children's cases
 - Weeding out cases
4. Child Diversion: Diversion of petty offences is increasing in the pilot sites, but not in proportion to the number of divertible offences;
5. Increase in awareness and practice of "zero tolerance to detention of children with adults"

Non-traditional justice partners in the child justice system include health workers, fit persons, traditional and cultural leaders, LG and CSOs.

SESSION2:

CHILD PROTECTION AND CHILD PROTECTION SYSTEMS

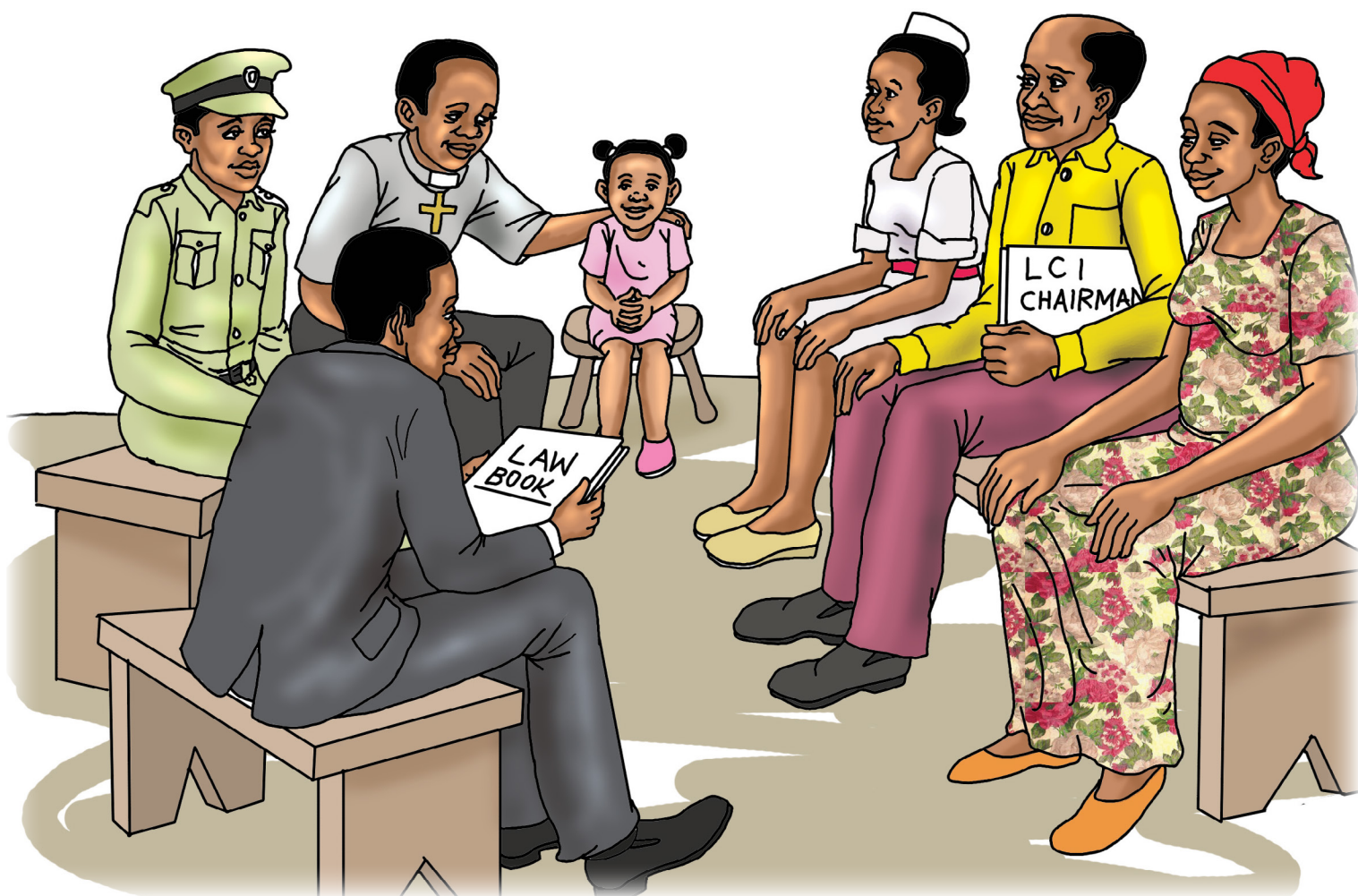
Key words:

Child protection, duty bearer, family, child protection system.

Learning Outcomes:

By the end of the Session, Caseworkers should be able to:

- ✓ Understand what child protection means in practice.
- ✓ Appreciate the inter-connectedness between children's right to protection and other child rights
- ✓ Know the roles of various duty bearers (including parents and the extended family) in child protection
- ✓ Appreciate the need for a systems approach to child protection.



2.4 THE RIGHT OF CHILDREN TO PROTECTION – WHAT DOES IT MEAN IN PRACTICE?

Aim: To enable the trainees distinguish child protection from other child rights.

Methods: Case study, Gallery walk, Group work, Lecture.

Training materials: Case study on a child with protection needs, flip chart, markers, and manila cards.



Duration: 1 hour



Exercises: Case Study - 'The untold story of a child with a disability' (See Activity Exercise)

Procedural Guidelines

- i. Distribute printed copies of the case study on 'The untold story of a child with disability';
- ii. Then ask one participant to read it out aloud while the rest listen and follow attentively;
- iii. Ask the following questions to participants –
 - a) What protection rights did John enjoy from his family members?
 - b) What protection gaps existed?
 - c) How else could have John's family guaranteed his protection right?
 - d) What actions do you think the probation officer undertook to address John's plight?
- iv. Then provide the definition of child protection and highlight the key elements of child protection as preventing abuse and restoring hope where abuse has occurred. Refer to the Trainer's information checklist for more information.

Gallery Walk:

- i. Write the word 'Children's Right to Protection' on a manila card and pin it up on the wall;
- ii. Then display manila cards of different colours on the floor with select rights of children as contained in UNCRC;
- iii. Ask participants to form a circle around the manila cards on the floor;
- iv. Remind participants about the definition of Children's right to Protection;
- v. Ask five volunteers among the participants to come forward (inside circle) and pick manila cards with protection rights and pin them up under the manila card with a writing called "the right to protection". Crosscheck to ensure all manila cards with protection rights are picked by asking the rest of the participants to confirm if no card with a protection right is still on the floor;
- vi. Then clarify why the rest of the rights on the cards remaining on the floor are not protection rights;
- vii. Then conclude by explaining how each of the rights written on the cards remaining on the floor affects children's right to protection?

Group work:

Divide participants into three groups and assign each of them one of the following questions to answer in 30 minutes:

1. What are the most common types of abuse children face in your community and how can these be reduced?
2. Imagine and write out what your community would look like if children were always protected and safe. How can communities be made to value children and better protect them from abuse?
3. What are your experiences in preventing abuse of children identified to be at risk of abuse and in working to restore hope and dignity to children that have suffered abuse?

Plenary: Groups present their work written on flip charts. Allow non group members to comment after each group's presentation.



Trainer's Information checklist:



Child protection is the prevention of and response to abuse, neglect, exploitation and violence against children (Source: Global protection cluster/ child protection, EU and USAID 2014 –Inter Agency guidelines for case management and child protection).

The right of children to protection means safety from abuse, exploitation, neglect and all forms of violence and involves preventing abuse; restoring their well-being where abuse has occurred and creating a protective environment.

Child protection rights include:

- ✓ Protection from neglect
- ✓ Protection from abuse (physical abuse - torture, corporal punishment, etc.; sexual abuse – defilement, child marriage, etc.; emotional abuse – use of abusive / threatening language etc.).
- ✓ Protection from abandonment.
- ✓ Protection from hazardous labour.
- ✓ Protection from negative cultural and religious practices – female genital mutilation.
- ✓ Protection from denial of access to basic services, such as healthcare and education.
- ✓ Protection from denial of inheritance rights from their deceased parents estate.

The inability to meet children's basic needs without any wilful intention is not a child protection issue, which requires a response. However, the denial of other child rights (survival, development, participation and any of the protection rights) can increase children's vulnerability to protection risks. For instance, children denied education are vulnerable to early marriage.



Activity Exercises;

Case Study – The untold story of a child with disability

John was born with a physical disability. He could not do anything for himself without help. As he grew up, family members were embarrassed about his looks and therefore was always tied on a tree behind the house. Not much was known about John by members of the community and government until one day when the district probation officer was moving house to house in John's Community distributing mosquito nets. While at John's home, the probation officer asked the number of family members and decided to count the physical people present to confirm the number. The probation officer realised the number of people was less by one and this prompted him to ask why they stated their number by one extra person. It was at this point that one family member held the probation officer by hand and took him behind the house where John (a disabled child) had been tied on a tree. It was at this point that casework with family members was initiated by the probation officer to rescue the child from discrimination by family members including being hidden and tied to a tree on a daily basis. (Story shared by participant during 2014 MGLSD East-Central OVC Regional Consultations for the development of the National Child Protection strategy).

2.5 DUTY BEARERS AND THE RINGS OF RESPONSIBILITY IN CHILD PROTECTION

Aim: To improve the trainees' knowledge of the individuals and structures with the duty to protect children and the level at which these operate.

Methods: Work in pairs, Role play, Debate and Lecture, Storytelling, Case study, and Discussion.

Training materials: Flip charts, markers



Duration: 2 hours



Exercises: Case study -Jane in a society that is less responsive to children's protection needs (See Activity Exercise)



Procedural Guidelines

Work in pairs:

- i. Ask trainees what they know as the roles of parents in caring for and protecting children;
- ii. Ask them to work in pairs to share why they think some parents are not adequately performing their parental roles.
- iii. Give an opportunity to each pair to share the feedback (Trainer to note responses on A4 manila cards);

Roleplay:

- i. Ask selected participants (notified and prepared before the Session) to model a creative role play depicting positive parenting;
- ii. Hold plenary Session – participants share their comments on the role play, especially if it depicted positive parenting;
- iii. Then write all the parental attributes mentioned during the plenary Session on a flipchart and with the full participation of all the participants, crosscheck if the attributes cover social care for children (affection, care, open communication line, and attention / quality time) in addition to the provision of basic needs.
- iv. Give some examples of positive parenting practices, which include:
 - ✓ Having quality time with the child
 - ✓ Guiding them in a cordial way rather than rebuking them
 - ✓ Showing interest in what the child likes
 - ✓ Praising children for the positive things they do instead of being silent
 - ✓ Giving children an opportunity to speak to you as a parent and you listen attentively
 - ✓ Taking into consideration children's views when you are taking a decision on matters that affect the child
- v. Advise trainees to consider enrolling for a positive parenting training to further enhance their knowledge about this topic.

Debate:

Identify six volunteers to debate the topic: The current family lifestyle adds no value to child care and protection; children's homes are better alternatives? (Volunteers should have been identified at least 3 hours in advance and notified of the topic and their role)

Conclude the debate by highlighting childcare and safety issues which only the family is best placed to take care of, i.e. sexual related aspects such as bad touches, clear rules about nudity, personal privacy, general safety (including use of the Internet, mobile phones, etc.).

Encourage some discussion on these issues, particularly how parents can communicate culturally sensitive information to their children in a non-offensive manner.

Further reading: "The Bad Touch," a Children's Book to Help Prevent Child Sexual Abuse, 2015 by Lilian Butele Kelle.

Lecture (by Guest Speakers)

- i. Invite, in advance, three to four government officers from different sectors with a mandate for child protection to share how their sector/ office protects children and responds to cases of abuse, neglect and exploitation; as well as challenges encountered in executing their child protection function. Target: Local Council 1 – secretary for children's affairs, Probation and Social Welfare Officer, Police –



- Child and Family protection Unit, Health Centre IV In charge);
- ii. Introduce each of the guest speakers by their title and explain that they are going to share how they protect children in their day to day work;
- iii. Give each guest speaker 15 minutes to explain their role in child protection as well as share how they execute their child protection role in reference to a specific case;
- iv. Allow questions from participants to the Guest Speakers and responses from each Guest Speaker;
- v. Appreciate the Guest Speakers and see them off.



Case study - Jane in a society that is less responsive to child protection needs

Distribute the story of Jane below to participants and ask them to read silently;

Then probe for answers to the following questions, through plenary

- Who came to Jane's rescue and why do you think they did?
- Was the response made the most appropriate in the circumstances? If not, why do you think so?
- Who else should have responded to the child's plight, but did not?
- Why do you think they did not respond and yet they ought to have responded?
- Do you think Jane's situation could have been prevented from happening at all? If yes, explain how.

A lecture on Rings of Responsibility

- i. Introduce to participants a systems approach to child protection in reference to the guest speakers sharing and Jane's story. Point out that protection risks to children increase when child protection service providers work in isolation;
- ii. Then explain the child protection rings of responsibility in reference to the Trainer's information checklist;
- iii. Wrap up the Session by emphasising the need for child protection service providers to work in collaboration, making reference to the existing child protection structures and the services they offer as well the service provision gaps.



Trainer's Information checklist:

In Uganda, child upbringing has traditionally been the responsibility of the family members and the community. Traditionally, the father provided leadership and discipline, was a bread winner and a role model in the family. The mother on the other hand provided socialization for the children, supporting and guiding the children as they grow. Immediate care and social support for children was therefore predominantly the role of mothers, a role they were able to fulfil as they were involved in farm work around their homes and the local community (MGLSD, draft family policy 2014)



However, the emergence of the decades of development [1990s+] has negatively impacted on the family role in childcare and nurture by eroding positive cultural family values and the socialization of children in the family. There are also increased rates of separation/divorce, gender based violence, female participation in the formal labour market and preference for single parents.

In urban areas, childcare is even more challenging as most often both parents go out to work leaving infants without parental care for long hours either by locking them in the house; leaving them under the care of a hired housemaid or in the neighbourhood etc. As a result, it is common in our society to hear of children starved, burnt, defiled, or stolen as a result of poor child care practices by their parents or guardians as well as an increase in the number of children growing up on the streets and in orphanages.

The GoU Babies and Children's Homes Regulations provide for institutionalisation of children as a last resort. Children's homes are meant to host only children whose families cannot be traced for reunification; and the homes must be licensed, approved and inspected by the government to ensure that the environment under which children grow is closer to what a natural family provides. Children under three years are particularly vulnerable to the harmful effects of institutionalisation because they are not able to receive the individual attention and stimulation required for their healthy development. Overall, a child nurtured in a family setting has a rich experience to draw from through the informal interactions they witness and participate in at the household and in the wider community life.

Therefore parenting tips should be extended to all families in order to curb the ever growing number of teenage children involved in criminal activities – using drugs, abusing alcohol, aggressive behaviour, stealing, suicidal tendencies etc. In addition to parenting mentorship, building and strengthening family support networks of friends and relatives is an important aspect of casework with families undergoing stressful life events that involve their children.

However, in addition to parents and family who have the primary responsibility for childcare and protection, this responsibility extends to children themselves, the government and the public. Children have an obligation to claim their rights and to exercise them responsibly, including fulfilling their respective duties. Adults of all categories, i.e., parents, community members, teachers, religious leaders, government officers, etc. are all expected to protect children at all times.

There are three broad categories of duty bearers in child protection case management, namely:

- a) **Statutory duty bearers**, who are mandated by law to provide specific child protection case management services. They include the following:
 - ✓ Local councils (including, Local Council Courts and the Secretary for children's affairs);
 - ✓ Probation and Social welfare officers;
 - ✓ Police (Child and Family Protection Units and Crime Intelligence



- and Investigations Directorate/department);
- ✓ Family and Children's Courts;
- ✓ Magistrate Courts/ High Courts;
- ✓ Health workers; and
- ✓ Labour Officers.

b) Other formal institutions

These are institutions established in line with the existing laws, but without a specific legal mandate in child protection case management. However, the case management related actions of the officers in these institutions are regulated by the statutory laws and agency specific policies.

These include: CSOs, schools, and the media houses. Other leaders and institutions (informal) that play a complementary role to the statutory actors include:

- ✓ Staff of Non-governmental organisations
- ✓ Teachers and other Educators,
- ✓ Staff of media houses
- ✓ Chief administrative officers
- ✓ Administrators of Approved Children's Homes

c) Non-formal/community based actors:

These are individuals and groups that are not registered organisations and without a specific legal mandate in child protection case management, but voluntarily offer to support children in need of care and protection. These community based actors include:

- ✓ Members of Faith based organisations
- ✓ Cultural leaders
- ✓ Opinion leaders
- ✓ Committees or groups of trained community volunteers such as Para social workers, child protection committees, Village Health Teams, FIT Persons.

All the actors put together constitute the Rings of Responsibility and each ring reinforces the other. The Rings of Responsibility start from the child, to the family, community, institution (school, church, etc.), national (country laws), and the international laws. The ring represents a system for protecting children.

Just like any other system (e.g. digestive, respiratory, reproductive), the child protection system has elements which child protection actors have to draw on in their actions for prevention and or response to child protection needs. The elements of the child protection system are policies, legislation and regulations; structures and functions; continuum of care and services; and data.

The functionality of the different actors in the ring of responsibility represents how functional or dysfunctional the child protection system is in a particular locality. There can be a breakdown in any of the rings and this affects the protection of a child. For example, family separation due to domestic violence can open up new risk factors for a child. In addition, the roles of various community members - teachers, religious leaders, police, parents, local council etc. performed in isolation can sometimes endanger children. Therefore, ensuring that the above duty bearers perform their roles in a collaborative and child sensitive approach can help foster more enduring protection for children.

2.6 COMMUNITY FACTORS UNDERLYING CHILD PROTECTION VIOLATIONS



Aim: To enable the trainees appreciate the influence of a child's community on child protection.

Methods: Personal Reflection and community mapping.

Training materials: Local community map, Open outdoor space, Charcoal, Stones, Tree Leaves, Flip chart, Markers, sweets /chocolate, Exercise books and pens.



Duration: 4 hours



Exercises: Community Mapping (See Activity Exercise)



Reflection exercise:

Read out aloud the following statements and ask Participants to confirm if the statement depicts child abuse or not by stating Yes or No.

- a) Repeatedly shouting at a child who is not performing well in class
- b) Leaving a small child at home all day
- c) Asking an eight year old child to wash utensils
- d) Hitting a child with a shoe
- e) A 10 year old gardening in a school farm
- f) Forcing a child to watch movies about sex
- g) Asking pupils to clean teachers' personal living quarters
- h) Refusing a child to enter a class for arriving late
- i) Failure to take a one year old child for immunisation
- j) Pushing a child who presents negative behaviour
- i. Guide a discussion around contested statements if they constitute child abuse or not;
- ii. Explain (if not covered in the previous discussion) why statements 'b', 'c', and 'i' constitute a violation of children's rights in an unintended way because of the caregivers' ignorance or lack of capacity. Addressing such issues requires a combination of efforts from all sectors that comprise the child protection system (the child protection system will be discussed later in this training).
- iii. Ask participants to pair up to discuss:
 - ✓ What is child abuse?
 - ✓ Who are the abusers of children?
 - ✓ How can the abuse of children be prevented?



Community Mapping with Children

- i. Brief trainees on the community mapping exercise with children as per guidance in the Activity exercises part;
- ii. Undertake the community mapping exercise;
- iii. In a plenary Session trainees should share their experiences of interacting with the children – discoveries, observations, etc. (probe participants to mention some of the things they identified that put children's life at risk in the mapped community);
- iv. Conclude the Session with a lecture on identifying risk factors to children (Refer to the Trainer's checklist for more information).



Trainer's Information checklist:

There are different forms of Child abuse – physical, emotional/psychological, sexual, etc.

In deciding whether an action is abusive, we need to look at the following:

- o The possibility that the action will cause harm
- o The intention was to cause harm
- o Omission or failure to take action to prevent abuse from occurring.

Note that besides the abuse of children by adults, there is child to child abuse. Child to child abuse is a complicated case as some children may not be able to understand the consequences of their actions in the same way as others - especially younger / less mature children. This is why the age of criminal responsibility is usually set at an age within adolescence rather than at a younger age. This is 12 years in Uganda

The opinion of the majority of frontline child protection actors at district level is that the common child protection concerns include:

1. Child neglect
2. Child labour
3. Child marriage
4. Defilement
5. Physical abuse/ torture

(Source: MGLSD, 2014. Consultations with district level child protection actors on priorities to inform the National Child Protection Strategy – Unpublished report).

The district stakeholders identified similar factors contributing to the above child protection concerns, but with each resulting in multiple lifelong negative effects on children.

Child neglect: Child neglect is any situation where parents or guardians purposely do not provide basic needs e.g. food, clothing, medical care, shelter, education for their children (Source: Child Rights and Protection Resource – 2010: Bantwana Initiative).

Causes	Effects
Polygamous marriages	Juvenile delinquency
Poverty	Child labour
Domestic violence	Early pregnancy & child marriage
Orphanhood	Malnutrition & stunted growth
Family separation/divorce	Street children
Alcohol and substance abuse	School dropout

Child Labour: Child Labour is work that is mentally, physically, socially and or morally harmful to children (Source: National Strategic Programme Plan of interventions for OVC 2011/12 – 2015/16)

Causes	Effects
Poverty	
Peer influence	School dropout
Child neglect	Juvenile delinquency
Orphan hood	Alcohol & drug abuse
Family separation/divorce	Poor performance in academics
Domestic violence	Health complications/diseases/injury
Child headed households	Poor morals

Child marriage: Early marriage is the practice of a child – a person below the age of 18 years- marrying with or without their consent.

Causes	Effects
Poverty	Complications in pregnancy & delivery
Negative cultural values	School dropout
Ignorance of the law	Family separation/divorce
Peer influence	Poverty
Domestic violence	Domestic violence
Lack of parental care	Big family size
Defilement & early pregnancies	HIV infection
Orphan hood	
Growing up in slums/near bars	

Defilement: Defilement is sexual activity with a person below the age of 18 years, with or without their consent, and involves penetration by a sexual organ (penis) however slight into the mouth, anus or vagina of a child or the unlawful use of any object or organ by a person on a child's sexual organ (penis or vagina) - Source: Uganda Christian lawyers Fraternity - Pastors and Community Leaders Rights Manual, undated].

Causes	Effects
Poverty	Early/unwanted pregnancy
Peer influence	Increased child mortality & maternal morbidity
Alcohol & drug abuse	School dropout
Exposure to pornography	Child marriage
Negative cultural beliefs regarding sex with children	Psychological trauma
Influence of foreign culture	HIV infections
Poor parenting	Stigma
Religious beliefs	Poverty
Ignorance of the law.	

Physical abuse / Torture: Physical abuse is the intentional use of force against a child that results in or has the potential to result in physical injury(Violence against Children: A decade of research and practice 2002-2012, GoU-UNICEF Report 2012)

Causes	Effects
Culture	Physical bodily harm/disability
Poverty	Street children
Stress/frustration	School dropout
Alcohol and substance abuse	Juvenile delinquency
Poor parenting styles	Death
Violence among parents	Child marriage
Broken families/step parentage	
Child labour	
Child parents	



Activity Exercise:



Community Mapping with children:

With the support of Local leadership identify in advance up to 10 children (age range 8 – 12) from the nearest local community with the support of the Local council / community leaders. Ensure that children are chosen from all types of households;

Then Explain to the children that you are interested in knowing more about their community and their experience of life in their community;

Then ask trainees and children to assemble outside and form a big circle. The Trainer comes in the middle and draws a big circle on the ground using a piece of charcoal;

The Trainer announces that the circle symbolizes the community where they are currently, and asks children to name key places where they usually go in the community;

The Trainer with support of trainees using local materials (stones, leaves, small sticks, etc.), make symbols of key community areas on the map. Probe to ensure social service points, water sources, recreation centres are located on the map;

Then in turns trainees to ask children to show on the map places they like most and the ones they least like; and

Then probe for reasons why they most or least like the place (Trainer and trainees to take note of the children's reasons, especially of unsafe places).



Question and Answer Exercise:



Who are the statutory duty bearers in child protection?

- ✓ Local councils (including, Local Council Courts and the Secretary for children's affairs);
- ✓ Probation and Social welfare officers;
- ✓ Police (Child and Family Protection Units and Crime Intelligence and Investigations Directorate/ department);
- ✓ Family and Children's Courts;
- ✓ Magistrate Courts/ High Courts
- ✓ Health workers; and
- ✓ Labour Officers.

Section Concluding Notes:

In this Section, we have examined a number of aspects on children, namely child growth and developmental characteristics and needs; protection risk factors that children face in the childhood lifecycle; the critical role of parents and family in child care and protection; the rights of children, children responsibilities in fulfilment of own rights and persons duty bound by national law to protect children. We have also explored the legal framework on child protection and its contextual application; innovations to increase children's access to Justice in Uganda; factors influencing children's protection; duty bearers and the child protection system in Uganda.

In the next Section, we shall build upon this foundational knowledge to examine how child protection violations can be effectively managed to restore the hope and the wellbeing of children that have suffered abuse.

SECTION C

CHILD PROTECTION CASE MANAGEMENT PRACTICE

SECTION SUMMARY

Reference	Topic	Objectives
MODULE 3: STEPS, PRINCIPLES AND STANDARDS IN CHILD PROTECTION CASE MANAGEMENT		
SESSION 1: Case management and the case management process		
3.1	What is case management? How different is case management from casework?	To enable a clear understanding of case management as a standard service package
3.2	Steps in case management	To equip Caseworkers with essential details on the logical management of child protection cases
SESSION 2: Principles and standards in case management		
3.3	Guiding principles in case management	To share global guiding standards in child protection case management for contextual application
3.4	Child protection Caseworker competencies	To enable an understanding of core competencies in casework and enable self-assessment on competency level by child Caseworkers.
3.5	Essential practice skills and values of a child Caseworker	To highlight essential skills and values necessary for successful casework with children
MODULE 4: INFORMATION MANAGEMENT AND MEASURING SUCCESS IN CASE WORK		
SESSION 1	Basic tools in case management	To introduce trainees to tools that aid information management in child protection case management.
SESSION 2	Documentation and Information sharing in case management	To provide guidance on the do's and don'ts in recording, storing and sharing casework information.
SESSION 3	Monitoring and Evaluating casework	To share tips for undertaking case audits and casework assessments to gauge the success levels.



MODULE 3:

STEPS, PRINCIPLES AND STANDARDS IN CHILD PROTECTION CASE MANAGEMENT

Aim of the Module: To introduce participants to the child protection case management process based on contextually relevant global case management standards.

SESSION 1: CASE MANAGEMENT AND THE CASE MANAGEMENT PROCESS

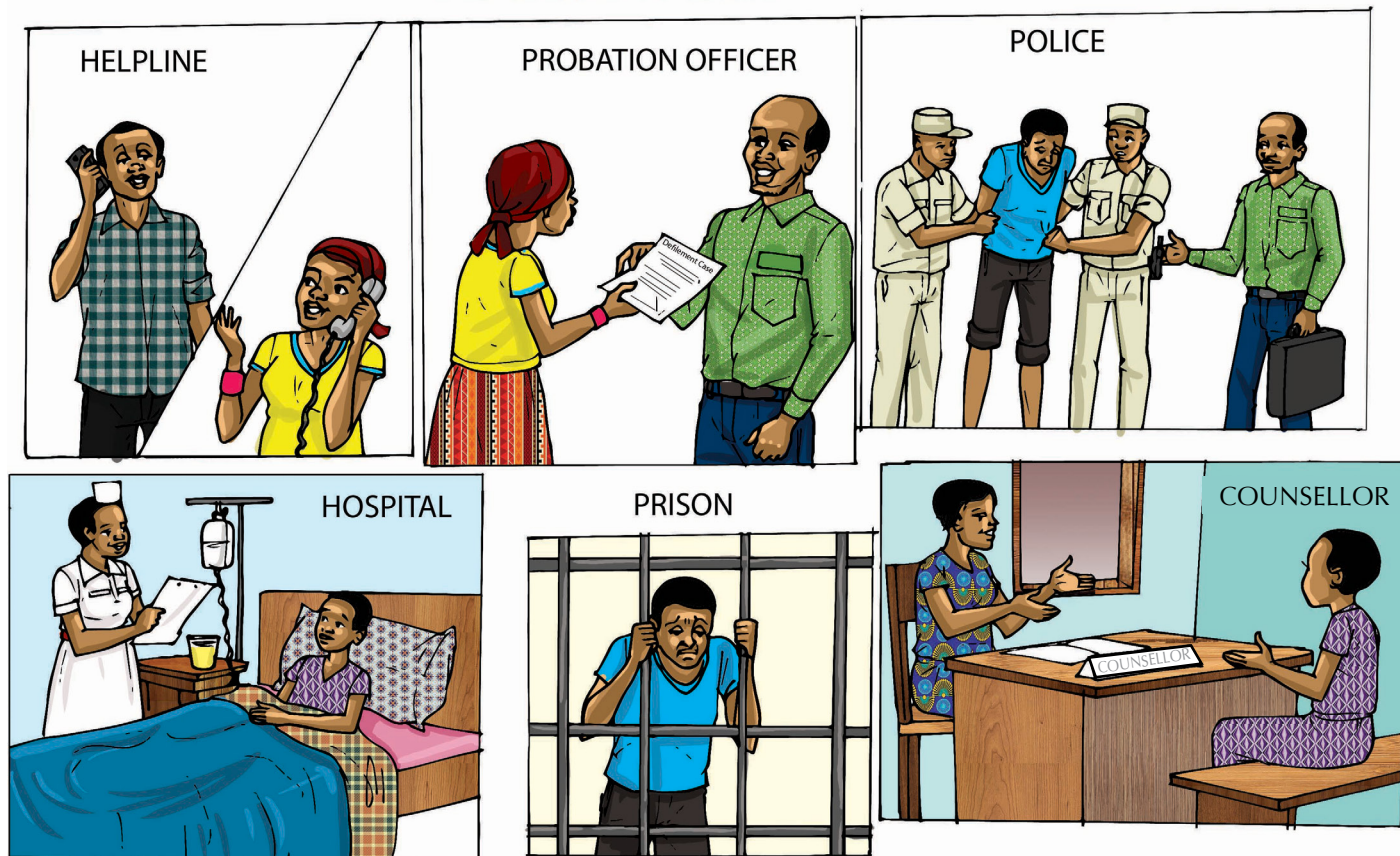
Key words: Case work and Case management.

Learning Outcomes:

By the end of the Session, Caseworkers would have:

- ✓ Understood the definitions and distinction between casework and case management
- ✓ Appreciated the logical steps in child protection case management
- ✓ Understood the key principles and standards in case management

DEFILEMENT CASE



3.1. WHAT IS CASE MANAGEMENT? HOW DIFFERENT IS CASE MANAGEMENT FROM CASE WORK?

Aim: To enable participants gain a clear understanding of case management and differentiate it from casework

Methods: Brain storm, Debate, Case study and Lecture

Training materials: Debate motion, Case study on challenges of an orphaned teenage mother, Flip charts and markers.



Duration: 3 hours



Exercises: Case study - challenges of an orphaned teenage mother (See activity exercises part)

Procedural Guidelines

Brainstorm:

- i. Get two A4 size manila cards of different colours. Write the word 'casework' on one card and the word 'case management' on the other card;
- ii. Then pin these up and ask participants to share what they understand by the two terms;
- iii. Identify common words in their responses, highlight these and relate to the definitions provided in the Trainer's checklist before sharing the definitions in the checklist;
- iv. Then read the definitions of the two concepts as provided in the Trainer's information checklist;
- v. Conclude brainstorm Session by affirming that many of them are already involved in case work and case management with children – all that is needed is to ensure that they undertake both for every child client and in addition uphold the guiding principles in case management.

Debate

- i. Identify motion debaters and brief them about the debate topic at least one hour before the debate;
- ii. Announce the debate Topic to all participants, " All child rights violations should be handled through case management";
- iii. Call out the pre-selected debaters to take their seats at the front;
- iv. Open the discussion starting with proposers of the debate topic; followed by Opposers (for 30 minutes) as you write their views on a flip chart;
- v. Invite all participants to make supplementary points to the discussion;
- vi. Wrap up Session highlighting key factors to consider when screening child protection cases during registration before determining if this is a case for which a case management file should be opened.



Case study:

- i. *Distribute the case study on the challenges of an orphaned teenage mother*
- ii. *Ask a volunteer among participants to read it aloud as the rest listen attentively;*
- iii. *Divide participants into two groups and ask each group to think of case work actions they would take in response to Jessica's plight;*
- iv. *Through a plenary Session, let each group share the actions they had identified;*

Facilitate a discussion on what would constitute casework from the actions identified by both groups and what would constitute case management from the actions listed by both groups.

Lecture:

Lecture participants about casework and case management, bringing out the distinctiveness and as well as the complementary aspects, using the Trainer's information checklist.



Trainer's Information Checklist:



Case management for children is influenced by the nature, extent and complexity of the needs of the affected child and their immediate family. The type of services required based on the assessment done will determine if case management is necessary and who has the responsibility to take on the case (source: Child wellbeing and protection – NSW Interagency guidelines). This means that not all identified and reported cases in need of services qualify to be registered for case management. Some cases require a one-time engagement with a Caseworker and the issue is sorted to a conclusion.

A 'case' is an individual or family who is being assisted in order to resolve a protection concern.

Case work can best be described through the roles of a Caseworker i.e. receives the case of child abuse, picks interest in the case and follows it up / maintains responsibility for the child's care from identification to case closure both within the informal and formal response mechanisms (Global Protection Cluster, 2014).

Case management builds upon casework and is defined as 'a process whereby an individual and or family's needs are identified and services are coordinated and managed in a systematic way' (Source: Child wellbeing and child protection – NSW Interagency Guidelines 2015).

Case management' is the procedure for managing (including planning, implementation, monitoring and evaluation) the helping process, addressing one case (e.g., a child, or a group such as siblings or the whole family) at least until the situation is better or the problem is resolved. It establishes the procedures and responsibilities of the different levels of service delivery.

The distinction between casework and case management is in terms of the linkages i.e. casework looks at an individual Caseworker's response to a child in need of services while case management looks beyond the Caseworkers action into how to build relevant linkages with other service providers within the response plan to a particular case.

Child protection case management places a child at the centre of attention, but children are not considered in isolation of their family and community. In assessing the child's situation and building a case plan, the Caseworker will interview the child and consult with the child's immediate family (where they are not responsible for the abuse) and seek their ideas on key action issues required in support of the child and what role they can play. In other words, case management is family focused, but at the same time child centred. Care must be taken to ensure that concerns are addressed systematically in consideration of the best interests of the child while building upon the child's and the family's natural resilience.

Overall, all children and their families possess the resources to help themselves and contribute positively towards finding solutions to their own problems. Caseworkers must engage children and families to play an active role in case management. The essence of case management is to empower children and their families to recognize, prevent and respond to child protection concerns themselves. Besides identifying problems and providing services, Caseworkers must therefore consider the child and family's strengths and resources, or 'protective factors', and how to build their capacity to care for themselves. Helping children to participate in decision-making is an important part of the recovery process which builds their sense of control over their lives and helps them to develop natural resilience.



Activity Exercise:

Case study- The challenges of an orphaned teenage mother (Source: The state of Uganda Population Report 2013, page 53)

Seventeen year old Jessica Anyumero walks around with a baby strapped on her back. Although she looks young, Jessica's expression suggests there is something troubling her. The mother of a nine- month old baby is a former student of Ngora parents School in Ngora district.

Jessica dropped out of school in 2012 after getting pregnant. The man responsible for the pregnancy used to lure her into having unprotected sex with small gifts and little money. The culprit was later arrested and remanded to Kumi Government Prisons on charges of defilement.....

Now a single mother, Jessica and her baby are at her mother's home. Jessica's mother is a 50 year old widow with no stable source of income. Instead Jessica helps the mother with domestic chores couples with looking after her 70 year old grandmother. Sometimes, Jessica escorts her mother to the garden. The small piece of land that Jessica's father left behind is not enough for even growing food for the family. Jessica's mother has now resorted to hiring land from neighbors to grow more food for the home and sell in case of a good harvest.

Jessica's mother had sacrificed to pay fees for her daughter hoping that Jessica would complete school and get a job to look after the family. But the pregnancy changed the family's destiny. After what she has gone through, Jessica says she wants to go back to school, study hard and become a teacher.....

3.2. STEPS IN CASE MANAGEMENT

Aim: To enable the Trainees to understand the case management steps and the inter-linkages among the steps.

Methods: Brainstorm, Reflection, Role play, Lecture

Training materials: Graphical representation of case management steps, flipcharts and markers



Duration: 2 hours



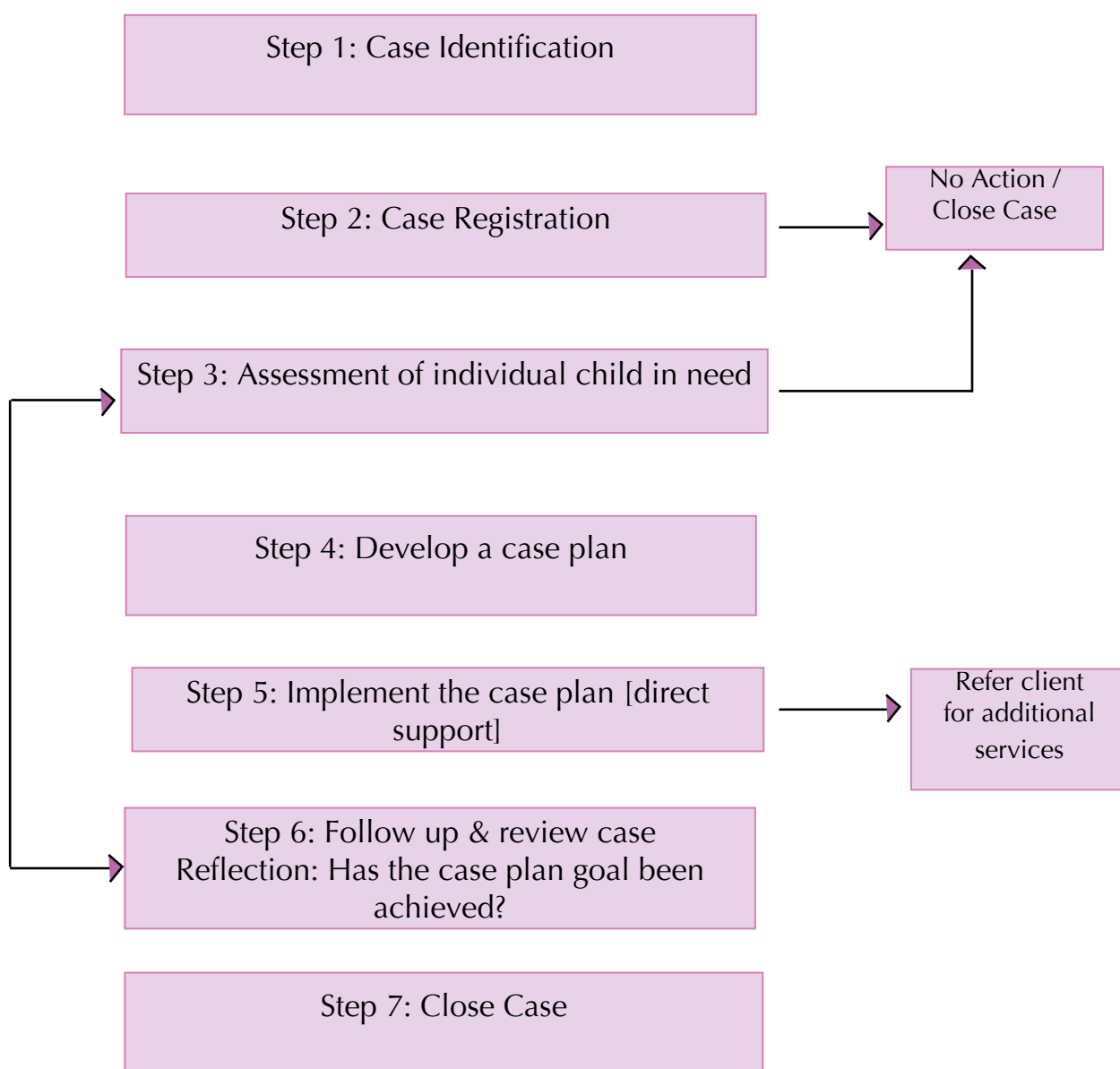
Exercises:

Procedural Guidelines

Brainstorm

- i. Display the graphical representation of case management steps (as in Figure 1 below);
- ii. Ask participants to reflect on their day to day management of child protection cases and to share the procedures they follow when handling cases (Write responses on a flip chart);
- iii. Write each of the six case management steps on manila cards & display them on a table i.e. "Identify", "Register", "Assess", "Case Planning", "Implement the Case Plan", "Follow-up and Review", "Case Closure";
- iv. Then ask seven volunteers among the participants to come forward (select individuals - multi sectoral/mix of new and experienced Caseworkers); and ask each to pick one manila card from the table bearing the case management steps;
- v. Ask them to discuss among themselves the flow of steps so they hold the manila cards and show the rest of the participants the chronological order of case management steps;
- vi. Then ask the rest of participants to confirm if the arrangement portrayed is correct. In case there are divergent views among the participants, allow for some discussion and intervene to clarify the chronology of the steps.

 **Figure 1: Steps in Case Management**



Lecture:

Distribute copies of the hand-out on case management steps (Appendix 5, extracted from Chapter Four of the Handbook for Management of Child protection cases – a Resource Guide for Multi sectoral Case management agencies in Uganda (GoU-UNICEF-UCRNN, 2016) and explain the relevance of each step. Emphasise that it is not a linear process. Specifically, draw the participants' attention to the arrow linking 'Follow-Up and Review of the Case Plan' and 'Assessment' and explain the purpose of returning to a previous step in case management.



Trainers' Information checklist:

The case management steps take a chronological order i.e.

1. Case Identification
2. Case Registration(key question: Is this a valid concern?)
3. Case Assessment(key question: Is an Intervention needed?)
4. Case planning(Key question: What support is required?)
5. Implement Case Plan
6. Follow-up and Review(Key question: Has the case plan goal been achieved?)
7. Case Closure.

Identification process:

Children requiring case management support may self-report or be identified by other duty bearers. The identification sources for children in need of case management services are numerous. Child protection cases can be identified through reports to authorities by children, family and community members (right holders and children's co-claimants). However, the Children Act does not criminalize the failure to report a case of child abuse or neglect and many factors undermine reporting of violations by children and their families. Consequently, there is a need for deliberate effort by all child protection duty bearers to proactively identify children in need of protection services and refer them to appropriate service providers.

In summary, the identification sources may include:-

- ✓ Self-referral by children and their families
- ✓ Community members and community volunteers (child protection committees, para-social workers, VHTs, FIT persons etc.)
- ✓ NGOs and other civil society organisations
- ✓ Government community development officers, notably community development officers and probation and social welfare officers
- ✓ Law enforcement institutions, notably the police
- ✓ Humanitarian agencies responding to emergencies
- ✓ School teachers
- ✓ Health workers
- ✓ Local councils

Registration:

Registration is guided by the registration criteria of an organisation or government guidelines. The registration or eligibility criteria for children in need of child protection case management services define the children the agency will register for case management services. Of critical importance before a case is registered is to establish if this is a valid protection concern' it is important to reflect on questions:-

'Does this child need help?

'Can we provide the help'?

'Does my agency register this type of case'? If not, who should we refer the child to?

The registration of children in need of case management services involves



opening a case file for a child and involves initial intake and collection of personal and family data on a child identified as a potential beneficiary of child protection services. Registration is an important step that clarifies the level of need of each child client and therefore guides prioritization in service provision to children based on the level of need. Case registration also helps Caseworkers and their agencies to focus their energy and resources on critically valid child protection concerns.

Critical information to capture at registration includes Case management history; personal details, including health and developmental deficiencies/disabilities; current care arrangements; protection concerns; the child's wishes; caregiver's opinion; and priorities for immediate action. It is good practice that a case registration process concludes with the child and/or their family giving informed consent/assent in acceptance of child protection services to be provided.



Needs assessment:

The identification of possible immediate needs of children in case management is a critical step after the registration of the case. The initial assessment should include risk assessment. Risk level assessment helps to differentiate between cases that are more or less urgent; provides room for manageable caseload; and helps in responding to protection concerns that affect large numbers of children, e.g. family separation some of whom may be more at risk than others.

Assessment should be a continuous process so that urgent issues can be spotted and responded to through implementation of the case plan. Needs assessments take care of the following issues?



Healthcare:

This is particularly relevant in cases of defilement where examination and PEP medication must be administered within a particular time frame; if the child is injured; the child is newly arriving from a war or hunger-affected area.



Safety:

In cases where serious risk factors have already been identified and where the case has been identified as either high or medium risk, this must be completed before the child leaves the registration interview. In cases of child abuse, especially if the abuse is a capital offence and happened at home, the Caseworker should ask the child (if age six or above) about their safety concerns and immediately seek the involvement of police and or probation and social welfare officers. This should be done with confidentiality – without the knowledge of the parent/caregivers and immediate family members to enable eliciting of further information that would otherwise not be obtained if they were aware. If a child refuses to speak to the Caseworker alone, and/or the child and caregiver appear upset or agitated, then the Caseworker should use his/her judgment and determine whether to proceed with the involvement of parents/ caregivers.



Care for unaccompanied children:

Children without any adult care or those assessed to be unsafe under adult care need overnight care. If they are identified late in the day, arranging this may be quite urgent. In addition, some children will not concentrate without some refreshment, especially if they have had a long journey, for instance arriving displaced populations. The Caseworker should take care of these care concerns for children with utmost urgency.

Unaccompanied/older children may not allow you to help until you have earned their trust, but you can provide essential information they may need to protect themselves, e.g. about medical care or protection services. So even if you do not see them again they can access these services. Children may need to call someone who can help them/to inform of their location. The Uganda Child helpline toll free service is a relevant service in such cases.

Non-Food Items/Clothing:

Agencies should have emergency clothing in case a child would be at greater risk without, e.g. abandoned babies and some abuse survivors. There should be clear distribution criteria to prevent misuse and should be of different colours or pattern to ease identification while minimising stigmatisation.

Legal/Justice Needs:

In cases of physical or sexual violence, Caseworkers should ask general questions to help the child and their family appreciate the need to pursue a legal justice response.

Case follow up and review:

Follow up and review of cases is important as the situation might change – or the intervention could have changed the situation. The re-assessment of a case after follow-up and review can happen if it is established that something was missing from the assessment stage, or has changed in the child's life (e.g. a change of caregiver), or where it is found that the situation is the same (so no need to re-assess) but that the plan is not working and needs to be reviewed.

For further reading on case management steps, refer to the: – National Child Protection Case Management Handbook, 2016 by MGLSD. See Chapter Four on Pathways in Child Protection Case Management.

Introduction: Standard operating procedures and professional principles are core to successful case management and performance measurement. While casework with children is undertaken by both professional and volunteer personnel, standards are necessary to assure clients of quality service.

Key words: Standards, principles

Learning Outcomes:

- ✓ Trainees knowledgeable of the core principles that determine the success of any case under a Caseworkers management
- ✓ Trainees appreciate the need for standards in case management and reflect on how best to apply the standards in their case management practice.

3.3 GUIDING PRINCIPLES TO EFFECTIVE CASE MANAGEMENT

Aim: To equip trainees with essential professional approaches to child protection case management

Methods: Brainstorm, Reflection, and Lecture

Training materials: A hand-out on the case management principles and the steps, flipcharts and markers



Duration: 2 hours



Exercises: Role play on applying case management principles while handling the major child protection concerns in Uganda

Procedural Guidelines

Brainstorm and Reflection

Ask participants to reflect on and share the guiding principles they follow while extending child protection response services to children (Write responses on a flip chart);

- i. Guide a discussion among trainees on why they apply the named principles (go through one at a time)
- ii. Distribute a Hand-out on Principles in case management (See the Extract in the Trainer's information checklist), jointly review the principles with participants and identify any principles on the hand-out that were not identified by participants during the brainstorm;
- iii. Take time to explain these particular principles and their significance in child protection case management (purposely explain the need to be sensitive to gender and disability specific needs of child clients – Refer to related information in Chapter Three under the generic case management pathway in the National case management Handbook

2016, MGLSD);

- iv. Ask participants to brainstorm on the practical challenges they meet while trying to adhere to the principles.

Role play

- i. Write each of the five major child protection concerns in Uganda (child neglect, child labour, child marriage, defilement, physical abuse/torture); on A4 manila cards and pin them up;
- ii. Ask participants to stand near the concern they are most familiar with based on their case management experience. Crosscheck to ensure each group has at least five participants;
- iii. Ask each team to prepare a 10 minute role play on how they would handle that child protection concern in a way that demonstrates case management steps and principles;
- iv. After each role play is acted, ask the rest of the participants if the case was well handled, and what could have been done better?
- v. Conclude the Session with a brief discussion among participants on the extent to which the case management process aligns with the statutory provisions and the role of all the relevant duty bearers in each case.



Trainers' Information checklist:

Principles and steps in case management have been developed over time, drawing from global good practice and proved to unconsciously shape the behaviour and interaction between a Caseworker with the child client.

Extract from Chapter Three of the National Child protection Case Management Handbook, 2016 by MGLSD. Principles in Child Protection Case Management.

Principle	Underlying practice
Do no Harm	Caseworkers should take caution to ensure that their work in no way results in deliberate or unintended negative effects on the child client. All interventions/actions/efforts in case management must minimise negative effects on child clients and their families and maximise to the greatest extent possible benefits/positive outcomes. A Caseworker has to ensure that at each step of the case management process, no harm occurs to children or their families as a result of the Caseworker's conduct, decisions, or actions taken on behalf of the child or family. Caution should also be taken to ensure that no harm occurs to children or families as a result of collecting, storing or sharing their information.
Prioritise Best Interest of the Child	Best Interest of the Child doubles as a standard and a principle in case management and therefore is fundamental in guiding all decisions concerning a child in case management. In practice, it involves child Caseworkers constantly evaluating the risks and resources of the child and their environment as well as positive and negative consequences of actions and discuss these with the child and their caregivers during decision making.

Procedural Guidelines

	It is important to note that cultural values at times conflict with the best interest of the child. Confronting such cultural values and practices without an assessment of the inherent risks can create additional risks for children, families and communities as well as for Caseworkers themselves.
Non-discrimination	This principle means ensuring that children are not discriminated against (treated poorly or denied services) because of their individual characteristics or a group they belong to (e.g. sex, age, socio-economic background, race, religion, ethnicity, disability or gender identity).
Adhere to ethical standards	Ethical considerations in case management practice help in shaping the integrity of Caseworkers and in their maintenance of professional boundaries by carefully addressing any conflict of interest that may arise in the line of duty.
Seek informed Consent and Assent	Informed consent of a client is the voluntary agreement of an individual who has the capacity to give consent, and who exercises free and informed choice. In all circumstances, consent should be sought from children and their families or caregivers prior to providing services. Whereas children by national law, cannot make independent binding decisions, it is important to provide them with the relevant information pertaining to their case in the presence of their adult caregivers who in turn assists them to further understand and appreciate the implications of the next course of action to be taken on their behalf (informed assent).
Respect Confidentiality	Confidentiality is linked to sharing information on a “need-to-know basis” and is the key in securing a child client’s confidence with the Caseworker. It means collecting, keeping, sharing and storing information on individual child cases in a safe way and according to the agreed data protection procedures.
Ensure Accountability	Accountability refers to being held responsible for one’s actions and for the results of those actions. Caseworkers and their employers are accountable to the child, the family, the community and to the State.

3.4 COMPETENCIES OF A CHILD PROTECTION CASEWORKER

- Aim:** To enable trainees to assess their competence to undertake casework, to practice some of the skills and to identify areas for further professional development.
- Methods:** Lecture, Work in pairs, Lecture, Storytelling, Game, Case study and Group work
- Training materials:** Flipchart, markers, Hand-out on Caseworker competencies.



Duration: 3 hours



Exercises: (See Activity Exercises)
 a) Listening and interviewing skills exercise
 b) Case Study - Street Life, No more

Procedural Guidelines

Lecture:

Start with a lecture on key competences required for effective child protection casework as provided in the Trainer's information checklist.

The competency areas include:

- ✓ Good knowledge of child development stages and related growth characteristics
- ✓ An understanding of the fundamentals of family centred protective services for children
- ✓ Ability to undertake case planning and family centred casework
- ✓ Legal aspects of child protection
- ✓ Psycho social support provision
- ✓ Documentation, storage and information sharing

In addition, a child protection Caseworker must have the following skills:

- ✓ Listening
- ✓ Child friendly interviewing
- ✓ Counselling
- ✓ Negotiation

Remind participants that some of the competences are already covered in the earlier Sessions, i.e. child development, protective family environment, legal aspects of child protection and case planning. This Session will be therefore concentrating on those not yet covered.

Story telling:

- i. Ask a volunteer among the participants to share a real life experience of an unprofessional interview they witnessed between a service provider and a child, clearly pointing out what makes them say it was a bad interview;
- ii. Ask the rest of the participants to reflect upon the story shared by volunteer and think about how they would feel if they were part of the scenario described in terms of:
 - a. The Caseworker (interviewer)
 - b. The child (interviewee).
- iii. Get responses on participants' feelings based on the reflections;
- iv. Ask participants to pair up and suggest some good practices that should guide communication with children so that the experience is positive and safe for the child

- v. Summarise the principles of communicating with children in reference to the Trainer's checklist.

Role-play on counselling skills

- i. Ask participants to form two groups and ask each group to make a role play on counselling a child in distress;
- ii. Let each group to present their role play;
- iii. Hold a plenary discussion to critique the counselling skills exhibited.

Lecture

Explain more about each competence area as provided in the Trainer's information checklist to enable participants determine if they possess the competence. In addition, explain the need to plan for continuous professional development in casework with children as new knowledge and innovations on child-friendly work methods keep emerging.

Case study – Street life, no more (use this to build the case for family centred case work)

- i. Distribute printed copies of the case study on "Street life, no more" (provided in the Activity Exercises) and ask participants to take five minutes to read it individually;
- ii. Generate a discussion among participants to share their personal opinion whether they would involve the family in the management of this case? And justify the opinion.
- iii. Conclude the case study activity by educating participants about the relevance of family centred casework as provided in Trainer's information checklist.



Activity Exercise:

a) Pair-work Exercise on Listening and interviewing skills

Ask participants to pair-up to practice listening skills. One person will be the listener who tries to encourage the speaker as much as possible. The other person will be the speaker, who speaks for five minutes about a problem in their day-to-day work. While the speaker is talking, participants should watch the listener to assess how well the listener is encouraging the conversation. After five minutes, they swap roles.

Then ask what each of the pairs noticed about their partner's non-verbal communication (Write a list of what they share on a flip chart, highlighting key points mentioned about listening, body language and observation).

b) Case study – Street Life, no more

Street Life, No more (Adapted from ANPPCAN- Uganda 2012 Annual Report, page 25)

I used to stay with my parents in Mityana district. When I was six years old, my father passed away. I stayed with my mother until she shifted to Bwaise, a slum area in Kawempe Division of Kampala District. In Bwaise, Life was not easy. My mother started a bar, where I was required to serve customers every evening after school.... When I reached senior two, my mother got a young boyfriend who was my age mate.....at first I and my mother's boyfriend were close friends. This did not go well with her. She suspected that I was having an affair with her boyfriend.

At 15 years, my mother subsequently chased me from her house and there I was on the street with nowhere to go. I linked up with my friends and we started staying together, going to bars singing karaoke in the night for survival. Doing karaoke was so terrible; men were using us for sex all the time. While doing Karaoke, one friend convinced me to join prostitution. After some days of thinking, I decided to give it a try and that's how I joined prostitution.



Trainer's Information Checklist:

A child protection Caseworker requires a wide range of skills, notably interviewing, listening, communication, counselling among others to deliver effective case management services.

Case management standard operating procedures require that in addition to essential skills and competencies, a Caseworker needs to observe social work principles, such as empathy, confidentiality, empowerment, respect and uphold the dignity of their client.

It is important to note that the lack of one or more of the competencies will definitely affect the quality of case management services offered. This can be worse in a situation involving rehabilitation of juvenile offenders as the limited support may turn detrimental to the extent that the child remains in the same state of distress; suffers repeated abuse or lapses into the same negative behaviour exhibited before they were recommended for a rehabilitation service.

Below are tips on specific skills that a child Caseworker needs and these are adapted from the Child Protection Case Management Training Manual for Caseworkers, Supervisors and Managers, 2014 – Global Protection Cluster / Child Protection.

Communication skills

Communication is a two-way process. It involves paying attention to the other person, being a good listener, being aware of non-verbal communication, using simple language, using open questions and making sure you are understood.


The focus of communication in case management is how to put children at ease. If the child has no positive things to talk about, you may wonder about their wellbeing, or the warmth between the child and family. Imagine what



a depressed or unloved child is like, compared to an uncomfortable child. We need to understand whether it is our presence that is making the child uncomfortable or something deeper. It is important to start the interview light-heartedly to find out if the child is joyful and able to be open in front of the adults around them. If they are not, these could be indicators of risk. A Caseworker needs to be sensitive to the child's body language as we cannot always rely on people to tell us everything that is going on. If people are harming a child they will not want us to find out what is happening. In such situations, we need to find other ways to assess the situation.

Interviewing skill:

Active listening is a critical aspect of interviewing. An example - "So, what I hear you saying is...", "It sounds like you...", "If I understand you correctly...", "You are telling me that..."

 **Open or leading questions:** - As Caseworkers we deal with children who are often in distress and in need of our support. We need to understand the people we are talking to and adapt our communication style to their needs. Asking questions in the right way helps a child to relax and communicate freely. There are Closed, Open and Leading Questions.

Sometimes we want to ask closed questions but they do not encourage the child to talk. They are conversation-enders or limit what children can say. With leading questions, children usually find it hard to answer differently to the way that is suggested even if they disagree or the situation differs. They think you do not want to hear about negative feelings. Open questions are the best form of questions as they show you are interested and actively listening to what you are being told. They help you learn more about a child's life, feelings, and what is important to them. To come up with an open question, focus on the central issue you want to ask about e.g. "how about school?" Closed and leading questions are often used in normal life, but in casework the goal is to use open questions so that the best information can be received from child/family.

When interviewing children, it is important that you keep the questions as open-ended as possible. The question "Are you with your parents?" is a leading question because it leads the child to say yes and limits the child on how much to say i.e. if the people they are with are not their parents. It is also important to avoid stereotypical comments that may be common in a particular culture but not be helpful, e.g. "you're a man, don't cry." Whereas some people find that it is helpful to use a mixture of closed questions, to find out certain facts, and open questions, to encourage free expression, caution should be exercised to ensure that you only ask one question at a time or the child will be confused.

The Caseworker needs to get detailed knowledge in communication and interviewing children in need of protection services, and specifically in the following areas.

- ✓ How communication is relevant to case management.
- ✓ Best practices in effective communication in case management.
- ✓ How to organise and manage an interview with a child.
- ✓ How to communicate with children of different age groups and



capacities.

- ✓ Distinguish between communication practices in different contexts and cultures.
- ✓ Best practices for the use of interpreters during interviews.
- ✓ A range of verbal and non-verbal communication skills.
- ✓ How to overcome common challenges in communication with children.
- ✓ How to use creative techniques when communicating with children.

Counselling skill

Children that have suffered abuse often exhibit fear (trauma) and stress as a result of the challenges they are exposed to. Such children require the support of knowledgeable Caseworkers so that the case is not mismanaged to the further detriment of the child's situation and life. Psycho- social support and counselling for such children that have gone through crisis circumstances is the critical first step to enable them let off the stress.

Children at risk and children that have experienced long periods of difficult circumstances are usually in critical need of psycho social and counselling services. Such children include:

- ✓ Children in emergency contexts - Conflict situations and Natural disasters
- ✓ Children living in absolute poverty
- ✓ Children living with HIV/AIDS
- ✓ Children living with disabilities
- ✓ Child survivors of trafficking
- ✓ Child victims of sexual exploitation
- ✓ Children on the move, including separated and unaccompanied minors, child refugees and children of asylum seekers
- ✓ Children affected by negative cultural practices, including FGM and early marriage
- ✓ Children in the worst forms of labour, such as child domestic workers, children working in agricultural farms /plantations
- ✓ Children living and/or working on the street
- ✓ Children in conflict with the law (juvenile offenders)
- ✓ Children living in institutional care (babies and children's homes)
- ✓ Children adopted through irregular, fraudulent channels

Children experience stress in different forms i.e.

- ✓ Positive stress: Meeting strangers, dealing with everyday frustrations (not getting what you want). This kind of stress is less destructive and therefore can be termed positive because once a child is assisted on how to confront such stress, its results are positive in terms of life skills (self-confidence, self-awareness and problem solving).
- ✓ Tolerable stress: death or serious illness of a loved one, a frightening injury, parental divorce.
- ✓ Toxic stress: chronic neglect, family violence, physical or sexual abuse, parental mental illness, ongoing emotional abuse.

Strong, prolonged or repeated physical or emotional stress (including forms of child abuse or children repeatedly witnessing violence in their home or community) can have a negative impact on children's development. When children experience prolonged or repeated periods of physical or emotional stress, their brains produce a stress hormone (cortisol). High levels of this hormone overtime can deteriorate the connections or circuits between brain cells and damage the way the brain functions. This is called 'Toxic Stress'.

When children are abused or exposed to violence, their brains are focused on survival and responding to threats. As a result, other parts of their brain aren't activated as frequently and won't develop as fully. The presence of an adult to whom the child is attached can help the child to regulate their stress levels. Caseworkers therefore need to pay particular attention to abused and traumatized children and support them through the recovery process.

Family centred casework:

Family centred casework and case management is aimed at strengthening the overall family functioning and reduce harm to children. The Caseworker involves the family in the case planning process for their child in need of protection services – a process through which the family's situation is assessed in terms of risks for the child as well as strengths including resources that can be utilised in the case management process.

Family centred case management can be a useful approach in preventing violation of child protection rights if dysfunctional families can be identified and early interventions are undertaken to restore them to a functional state.

**MODULE 4:****INFORMATION MANAGEMENT AND MEASURING SUCCESS IN CASEWORK**

This Module aims to guide trainees on core tools for collecting and managing information in case management; as well as methods of assessing success in casework.

SESSION1**BASIC TOOLS IN CHILD PROTECTION CASE MANAGEMENT**

Aim: To introduce trainees to core information management tools in case management

Methods: Story telling, Reflection, Group work and Lecture

Training materials: Flip chart, markers, hand-out on tools used in case management; samples of case management forms.



Duration: 3 hours



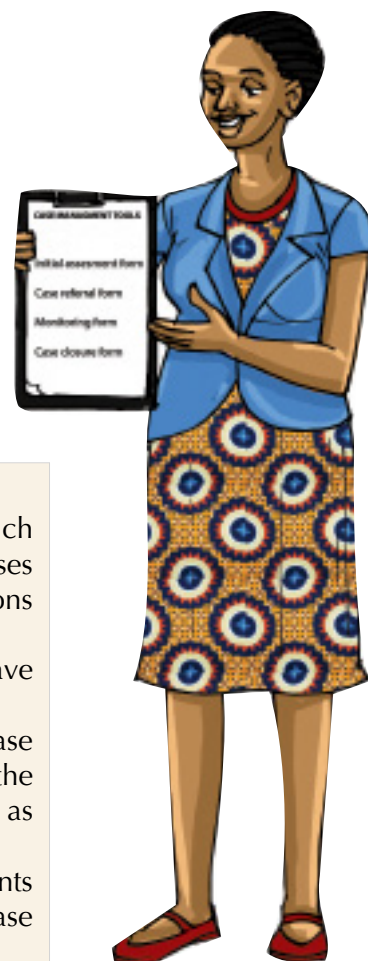
Exercises: Completing a blank case plan
a) Case planning tool

**Procedural Guidelines****Story telling**

- i. Ask participants to share information management tools which they use in their day to day management of child protection cases (The Trainer should write the responses on the above two questions on a flip chart);
- ii. Prompt trainees to share their experiences with the tools they have used.
- iii. Distribute copies of the hand-out on tools in child protection case management. Ask participants to identify which of the tools in the hand-out are missing on the flip chart (list the tools identified as 'missing' on a separate flip chart);
- iv. Guide a discussion on the 'missing tools' by probing participants to share their thoughts on how these tools could be useful in case management.

Group work (activity 1)

- i. Divide the participants into groups and give a copy of a blank case plan tool to each group;
- ii. Together with the participants read the key titles on the tool and explain the nature of information sought in each section of the tool;
- iii. Ask each group to develop a case plan in reference to the case study on the challenges of an orphaned teenage mother used in C.1.1 and how they would ensure that what is in the case plan is implemented.
- iv. Ask each group to present its case plan to the rest of the participants and allow participants to comment on it – omissions and additional suggestions for inclusion.



Group work (Activity 2)

- i. Divide participants into five groups and give each group one of the case management tools (Assessment Form, Case Plan Form, Referral Form, Follow up Form, Closure Form). Obtain the tools from Chapter Five of the Handbook for Management of Child protection cases, MGLSD 2016 (Appendices section).
- ii. Ask each group to review the tool (Form) to identify aspects that relate to their day to day casework with children and aspects in the tool they consider important, but are not part of their current practice;
- iii. Each group should share its feedback on the Form (Trainer to note aspects identified as not practiced on a flip chart).

Lecture

Wrap up the Session by outlining key tools in child case management process as provided in the Trainer's checklist and encourage participants to make use of all the tools in their day to day casework with children in need of protection.



Trainer's Information checklist:

Effective child protection case management requires the use of specific tools. The key tools include:

Assessment & Registration Form: Captures the child's personal details, case management history of child client, data confidentiality clause, the situation of the child, current care arrangements, main risk factors and identified protection concerns. If the trainees are drawn from community based structures, the Trainer should use the simplified Case Registration Form.

Case Plan Form: This guides how the interventions to address the child's protection concerns will be implemented. The form is used to generate information on issues for action, needed action, responsibility, due date and notes on progress.

Referral Form: The referral form enables the capture of the details of the agency referring the child, the case reported for which a referral is being made, child protection services already provided, details of agency where the child is being referred, feedback to the agency from which the child was referred.

Follow up Form: The follow up form seeks information on Date of follow up, purpose of follow up, attendees, key discussion points, meeting outcome.

Closure Form: The closure form requires information on reason for case closure, external verification undertaken, communication with the child and the child's family and information on child protection service agency accountability mechanism.

Monitoring and evaluation tools: These guide the review of casework at the Caseworker and Agency Level. If the trainees are drawn from community based structures, the Trainer should use the simplified Village Case Register and the Parish Case Summary Form.

SESSION2:

DOCUMENTATION AND INFORMATION SHARING IN CASE MANAGEMENT

Aim: To help trainees understand the kind of information to collect in case management, how to store it safely and which information to share, for what purpose and how.

Methods: Game

Training materials / Resource Options: Locally made small balls



Duration: 1 hour



Exercises: Passing the Ball Game

Procedural Guidelines

A Game – Passing the ball: Engage participants in a team exercise called 'pass the message'. The exercise involves demonstrating how a message one gives is usually distorted as it is passed on from one person to another.

- i. Ask the participants to stand in one straight line with space in between them;
- ii. Give the person at the start of the line a small locally made ball;
- iii. Tell trainees that you will whisper something to the first person in the line who will do the same to the next person as he passes the ball to them too. This will be repeated until the ball gets to the last person on the line.
- iv. Whisper a long and complicated sentence on a situation of a child to the first person on the line (e.g. Last week on Tuesday a seven year old girl was kidnapped, raped, and tortured for three days in a darkhouse before her rescue);
- v. When the ball reaches the last person in the line, ask the last person to say aloud what they have been told (The Trainer should pay attention to hear the exact message in the sentence of the last person as it may be different from the original one. If different, state aloud what you told the first person);
- vi. Prompt participants to mention real life examples when they have said something and it is misunderstood or distorted in meaning by someone else;
- vii. Explain the relevance of proper information management in case management, in a way, that protects it from misuse and/or distortion.



Group work on Documentation and information storage

Divide participants into two groups and ask each to answer one of the questions below:

1. Discuss why children's personal information needs to be safeguarded?

- What might happen if the information is not safeguarded?
2. How might casework information be leaked? What are some of the ways of protecting paper case files? What are some of the ways of protecting electronic records?

Facilitate a plenary feedback Session for the groups and clarify what may not be clear

SESSION 3:

MONITORING AND EVALUATING CASEWORK

Aim: To give tips to trainees on the need for and how to monitor and evaluate casework.

Methods: Group work, Discussion

Training materials / Resource Options: Manila cards, Flip charts, markers



Duration: 1 hour

Procedural Guidelines

- i. Write the words 'monitoring, and evaluation' on separate Manila cards and pin up on the wall;
- ii. Ask participants to define these concepts in the context of casework (Write the responses on a flip chart)
 - a. Monitoring
 - b. Evaluation
- iii. Ask them to explain the importance of measuring performance in casework.

Group work

Divide participants into three groups and ask each to answer one of the questions below:

1. What constitutes success in casework?
2. What steps do you follow in measuring casework performance?
3. What methods do you use to measure your success in casework?
- iv. Then listen in to each group's feedback and wrap up activity by giving a brief lecture on monitoring and evaluating casework as critical processes in measuring the success of the services rendered to children.



Trainer's Information checklist:

Monitoring and evaluation

Caseworkers need to monitor and review individual cases as part of the case management steps. They should also contribute to the review and evaluation of the agency's general case management processes and approach. There are two main reasons for measuring our performance in case management, i.e.

- ✓ Enhance accountability to those who give resources to casework and those who benefit (affected children and their families). Through accountability, we are able to tell if the resources have been used wisely.
 - ✓ Lesson learning by measuring, analysing and reflecting on our performance. Lessons learnt can guide the next steps - either change the case plan or change the whole casework approach
- There are four key steps in monitoring and evaluating casework:
- ✓ Specify what to monitor or evaluate
 - ✓ Collect performance data
 - ✓ Analyse the data
 - ✓ Utilise the results

Caseworker's role in measuring case management success:

There are various ways in which Caseworkers can contribute to the agency's monitoring and evaluation work:

a. Participating in supervised casework practice

Supervisory Sessions can help caseworkers reflect on the case management process and outcomes, together with their supervisor. This could be through:

- ✓ Providing feedback to the supervisor on the factors influencing the quality of casework documentation
- ✓ Face-to-face supervisory Sessions, with an open two-way discussion
- ✓ Being observed while conducting casework tasks, such as follow-up visits with clients.

b. Participating in Evaluating Casework

A Caseworker through self-appraisal can assess their knowledge of the job, actual performance (outputs), technical and social competences and the work environment. This informs the targets for the next period, the areas of improvement and the support to be provided by the agency. A Caseworker is also an important source of information during internal and external evaluations of an agency's performance in case management.



SECTION CONCLUSION

In this Section, we have looked at the meaning of casework and case management; steps, principles and standards in case management; competencies required of an effective child protection Caseworker as well as basic elements and tools used in child protection case management.

The Caseworker is now well prepared to offer the necessary support to children in need of protection services. However, the Caseworker is advised to undertake continuous professional development in order to ably cope with the changing dynamics and emerging issues in regard to child protection concerns.

REFERENCES / RESOURCE MATERIALS FOR THE TRAINER'S FURTHER READING

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APPENDICES

APPENDIX 1: CASE MANAGEMENT PRE-TRAINING REGISTRATION FORM

We request each of you to complete this Form. While the answers may be used during the training, no one will know the answers provided by any of the participants.

Part 1

Name:

Job Title:

Organization:.....

1. Please rate your current level of understanding of these topics (**Please tick**)

	Limited	Good	Very good
Child growth and development			
Children's rights			
Child protection			
Case management			
Child protection case management			
Monitoring and evaluating casework			

1. Have you received any prior training on any of the topics? If yes, list the key topics covered?
- a.
 - b.
 - c.
 - d.
2. What are the main challenges you are facing in managing child protection cases?
- 1.
 - 2.
 - 3.
 - 4.

3. What do you expect to learn from this training on child protection case management?
- 1.
 - 2.
 - 3.
 - 4.

Part 2

For each of these statements or questions, tick the most correct answer.

Statement/Question:

1. Under the Ugandan laws, a child is:
 - a. An unmarried person
 - b. Any person below the age of 18 years
 - c. Any person whose reasoning shows signs of immaturity
 - d. Any person who is dependent on others for their basic needs
 - e. All the above
2. Which of the following elements is not a common characteristic of children in their early childhood (2-6 years)?
 - a. Begin to sit and crawl
 - b. Imitate the behaviour of adults and other children in their environment
 - c. Eager to help with work, ask many questions and show high degree of curiosity
 - d. Desire to experiment with sex
 - e. Like playing and making friends
 - f. Both a and d
 - g. None of the above
3. Which of these actions does not constitute a violation of a child's right to protection?
 - a. Allowing a child to watch a pornographic film
 - b. Employing a child as a Housemaid
 - c. Giving a child a light beating
 - d. Inability of a parent to provide healthcare to a sick child
 - e. None of the above
4. Which of the following laws are directly used to prosecute child protection cases in Uganda?
 - a. The Children Act
 - b. The Penal Code Act
 - c. The Constitution of the Republic of Uganda
 - d. The United Nations Convention on the Rights of the Child
 - e. a and b only
 - f. All the above

5. Which of the following is true about the position of the Ugandan laws on child protection?
 - a. The law on defilement is unfair because it criminalizes boys under 18 years and leaves out girls.
 - b. The Children Act mandates any community member who has evidence that a child's rights are being infringed to report the matter to the local government council of the area
 - c. Local council (LC) leaders are allowed to hear and make judgments on cases of defilement
 - d. The role of the probation officer stops immediately the police starts investigating a case.
 - e. The laws have spoiled children because they ignore the role of parents in child care.
 - f. None of the above

6. Which of the following agencies does not have a specific mandate in child protection?
 - a. Local Councils
 - b. Police
 - c. Probation and Social Welfare Officers
 - d. Health workers
 - e. Resident State Attorneys (RSAs)
 - f. Family and Children Court
 - g. None of the above

7. Which of the following is not a step in a standard case management process?
 - a. Case Registration
 - b. Case Assessment
 - c. Case planning
 - d. Case postponement
 - e. Case review

8. Which of the following statements are not true about the principles in child protection case management?
 - a. Information about a child client should not be shared within any one to ensure confidentiality
 - b. A Caseworker should under no circumstances consult a child client's parent if the child does not give consent
 - c. The Non-discrimination principle means ensuring that disadvantaged children are given priority attention by the Caseworker
 - d. The DO NO HARM principle cautions Caseworkers to ensure that their work in no way results in negative effects on the child client
 - e. Both a and c
 - f. a, b and c

9. Which of the following statements are true about monitoring and evaluating child protection casework?
 - a. Caseworkers have no role in evaluating casework because evaluation

- requires the independent opinion of their supervisors or external assessors.
 - b. Casework monitoring and evaluation should be done in agencies receiving donor funding only because the main purpose of monitoring and evaluation is to assess resource utilization.
 - c. The most important step in monitoring and evaluating casework is the collection of performance data
 - d. A Caseworker's review of a case they are handling before it is closed is part of monitoring casework.
 - e. Both b and d
10. Why are you a child protection worker?
- a. I hate people that abuse children. I want to take their children away so they can't hurt them anymore.
 - b. I had a difficult childhood and helping other children helps me feel better about myself.
 - c. I believe in the intrinsic value of all people and want to help make children safe and happy, and help families improve coping strategies.
 - d. I don't like math or science so helping people was the only thing left

Thank you for completing this form. This information will inform the scope of this training.

APPENDIX 2: CASE MANAGEMENT TRAINING ASSESSMENT FORMS

APPENDIX 2.1: CASE MANAGEMENT POST-TRAINING ASSESSMENT FORM (UNCOMPLETED)

We request each of you to complete this Form. While the answers may be used by the organisers, no one will know the answers provided by any of the participants.

Part 1

Name:

Job Title:

Organisation:

1. Please rate your current level of understanding of these topics (**Please tick**)

	Limited	Good	Very good
Child growth and development			
Children's rights			
Child protection			
Case management			
Child protection case management			
Monitoring and evaluating casework			

2. What have you learnt from this training on child protection case management that you will apply in your work?
- a.
 - b.
 - c.
 - d.

Part 2

For each of these statements or questions, tick the most correct answer.

Statement/Question	Ans.
1. Under the Ugandan laws, a child is: a. An unmarried person b. Any person below the age of 18 years c. Any person whose reasoning shows signs of immaturity d. Any person who is dependent on others for their basic needs e. All the above	b
2. Which of the following elements is not a common characteristic of children in their early childhood (2-6 years)? a. Begin to sit and crawl b. Imitate the behaviour of adults and other children in their environment c. Eager to help with work, ask many questions and show high degree of curiosity d. Desire to experiment with sex e. Like playing and making friends f. Both a and d g. None of the above	f
3. Which of these actions does not constitute a violation of a child's right to protection? a. Allowing a child to watch a pornographic film b. Employing a child as a Housemaid c. Giving a child a light beating d. Inability of a parent to provide healthcare to a sick child e. None of the above	d

<p>4. Which of the following laws are directly used to prosecute child protection cases in Uganda?</p> <ul style="list-style-type: none"> a. The Children Act b. The Penal Code Act c. The Constitution of the Republic of Uganda d. The United Nations Convention on the Rights of the Child e. a and b only f. All the above 	e
<p>5. Which of the following is true about the position of the Ugandan laws on child protection?</p> <ul style="list-style-type: none"> a. The law on defilement is unfair because it criminalizes boys under 18 years and leaves out girls. b. The Children Act mandates any community member who has evidence that a child's rights are being infringed to report the matter to the local government council of the area c. Local council (LC) leaders are allowed to hear and make judgments on cases of defilement d. The role of the probation officer stops immediately the police starts investigating a case. e. The laws have spoiled children because they ignore the role of parents in child care. f. None of the above 	b
<p>6. Which of the following agencies does not have a specific mandate in child protection?</p> <ul style="list-style-type: none"> a. Local Councils b. Police c. Probation and Social Welfare Officers d. Health workers e. Resident State Attorneys (RSAs) f. Family and Children Court g. None of the above 	g
<p>7. Which of the following is not a step in a standard case management process?</p> <ul style="list-style-type: none"> a. Case Registration b. Case Assessment c. Case planning d. Case postponement e. Case review 	d

<p>8. Which of the following statements are not true about the principles in child protection case management?</p> <ul style="list-style-type: none"> a. Information about a child client should not be shared within any one to ensure confidentiality b. A Caseworker should under no circumstances consult a child client's parent if the child does not give consent c. The Non-discrimination principle means ensuring that disadvantaged children are given priority attention by the Caseworker d. The DO NO HARM principle cautions Caseworkers to ensure that their work in no way results in negative effects on the child client e. Both a and c f. a, b and c 	f
<p>9. Which of the following statements are true about monitoring and evaluating child protection casework?</p> <ul style="list-style-type: none"> a. Caseworkers have no role in evaluating casework because evaluation requires the independent opinion of their supervisors or external assessors. b. Casework monitoring and evaluation should be done in agencies receiving donor funding only because the main purpose of monitoring and evaluation is to assess resource utilization. c. The most important step in monitoring and evaluating casework is the collection of performance data d. A Caseworker's review of a case they are handling before it is closed is part of monitoring casework. e. Both b and d 	d
<p>10. Why are you a child protection worker?</p> <ul style="list-style-type: none"> a. I hate people that abuse children. I want to take their children away so they can't hurt them anymore. b. I had a difficult childhood and helping other children helps me feel better about myself. c. I believe in the intrinsic value of all people and want to help make children safe and happy, and help families improve coping strategies. d. I don't like math or science so helping people was the only thing left 	c

Thank you for completing this form. This information will inform the planning of similar training events.

APPENDIX 2.2: CASE MANAGEMENT POST-TRAINING ASSESSMENT FORM (COMPLETED)

We request each of you to complete this Form. While the answers may be used by the organisers, no one will know the answers provided by any of the participants.

Part 1

Name:

Job Title:

Organisation:

1. Please rate your current level of understanding of these topics (Please tick)

	Limited	Good	Very good
Child growth and development			
Children's rights			
Child protection			
Case management			
Child protection case management			
Monitoring and evaluating casework			

2. What have you learnt from this training on child protection case management that you will apply in your work?
- a.
 - b.
 - c.
 - d.

Part 2

For each of these statements or questions, tick the most correct answer.

Statement/Question Ans.

1. Under the Ugandan laws, a child is:
- a. An unmarried person
 - b. Any person below the age of 18 years
 - c. Any person whose reasoning shows signs of immaturity
 - d. Any person who is dependent on others for their basic needs
 - e. All the above

b

2. Which of the following elements is not a common characteristic of children in their early childhood (2-6 years)? f
- Begin to sit and crawl
 - Imitate the behaviour of adults and other children in their environment
 - Eager to help with work, ask many questions and show high degree of curiosity
 - Desire to experiment with sex
 - Like playing and making friends
 - Both a and d
 - None of the above
3. Which of these actions does not constitute a violation of a child's right to protection? d
- Allowing a child to watch a pornographic film
 - Employing a child as a Housemaid
 - Giving a child a light beating
 - Inability of a parent to provide healthcare to a sick child
 - None of the above
4. Which of the following laws are directly used to prosecute child protection cases in Uganda? e
- The Children Act
 - The Penal Code Act
 - The Constitution of the Republic of Uganda
 - The United Nations Convention on the Rights of the Child
 - a and b only
 - All the above
5. Which of the following is true about the position of the Ugandan laws on child protection? b
- The law on defilement is unfair because it criminalizes boys under 18 years and leaves out girls.
 - The Children Act mandates any community member who has evidence that a child's rights are being infringed to report the matter to the local government council of the area
 - Local council (LC) leaders are allowed to hear and make judgments on cases of defilement
 - The role of the probation officer stops immediately the police starts investigating a case.
 - The laws have spoiled children because they ignore the role of parents in child care.
 - None of the above
6. Which of the following agencies does not have a specific mandate in child protection? g
- Local Councils
 - Police
 - Probation and Social Welfare Officers
 - Health workers

- e. Resident State Attorneys (RSAs)
 - f. Family and Children Court
 - g. None of the above
7. Which of the following is not a step in a standard case management process?
- a. Case Registration
 - b. Case Assessment
 - c. Case planning
 - d. Case postponement
 - e. Case review
8. Which of the following statements are not true about the principles in child protection case management?
- a. Information about a child client should not be shared within any one to ensure confidentiality
 - b. A Caseworker should under no circumstances consult a child client's parent if the child does not give consent
 - c. The Non-discrimination principle means ensuring that disadvantaged children are given priority attention by the Caseworker
 - d. The DO NO HARM principle cautions Caseworkers to ensure that their work in no way results in negative effects on the child client
 - e. Both a and c
 - f. a, b and c
9. Which of the following statements are true about monitoring and evaluating child protection casework?
- a. Caseworkers have no role in evaluating casework because evaluation requires the independent opinion of their supervisors or external assessors.
 - b. Casework monitoring and evaluation should be done in agencies receiving do nor funding only because the main purpose of monitoring and evaluation is to assess resource utilization.
 - c. The most important step in monitoring and evaluating casework is the collection of performance data
 - d. A Caseworker's review of a case they are handling before it is closed is part of monitoring casework.
 - e. Both b and d
10. Why are you a child protection worker?
- a. I hate people that abuse children. I want to take their children away so they can't hurt them anymore.
 - b. I had a difficult childhood and helping other children helps me feel better about myself.
 - c. I believe in the intrinsic value of all people and want to help make children safe and happy, and help families improve coping strategies.
 - d. I don't like math or science so helping people was the only thing left

Thank you for completing this form. This information will inform the planning of similar training events.

APPENDIX 3: SAMPLE TRAINING REPORT TEMPLATE

- 1. Title, place (town, country) of the workshop**
- 2. Background to the workshop:**
 - Situation analysis of child protection case management knowledge
 - Target audience: Number and representation of participants (specify participant categories)
- 3. Objectives**
- 4. Discussions and training activities:**

Include details of the contents of the workshop activities:
- 5. Recommendations based on the evaluation of the training**
- 6. Follow up action plan to enhance application of knowledge by trainees**
- 7. Conclusions**
- 8. Acknowledgements of collaborations and donors**
- 9. Appendixes attached to the report should include:**
 - a) List of participants with their designation, address, phone number, e mail as well as all staff involved in planning and coordinating the training.
 - b) Workshop Programme

APPENDIX 4: A SIMPLIFIED LIST OF CHILDREN'S RIGHTS IN THE UNCRC

The specific rights as contained in UNCRC articles are:

- Article 2–** All children have a right to be protected from all forms of discrimination and unfair treatment no matter the child's culture, family status, religion, sex or disability
- Article 6 –** All children have the right to life
- Article 7 & 8 -** All children have a right to a legally registered name and nationality
- Article 9 & 18 -** Children have the right to live with their parents and families.
- Article 12 –** Children have the right to participate when adults are taking decisions concerning them. Decisions made by those who have authority over the child must always take into account the best interest of the child when the child may be affected by the decision.
- Article 13 -** Children have the right get and share information and express their beliefs and thoughts as long as the information is not damaging to themselves or to others
- Article 16 -** Children have a right to privacy
- Article 17 -** Children have a right to educative and reliable information from the mass media
- Article 27 -** Children have a right to good quality healthcare, clean water, nutritious food and a clean environment
- Article 28 -** All children have a right to primary education
- Article 30 -** Children have a right to learn and use the language and customs of their families
- Article 31 -** All children have a right to relax and play

APPENDIX 5: STEPS IN CHILD PROTECTION CASE MANAGEMENT

(EXTRACT FROM CHAPTER FOUR OF THE HANDBOOK FOR MANAGEMENT OF CHILD PROTECTION CASES – A RESOURCE GUIDE FOR MULTI SECTORAL CASE MANAGEMENT AGENCIES IN UGANDA (GOU-UNICEF-UCRNN, 2015)

Step 1: Identifying children in need of protection

Child protection cases can be identified through reports to authorities by children and other family community members. However, case reporting is not streamlined due to the absence of a law to compel people to report all forms of child protection violations and to criminalize the failure to report. Consequently, there is a need for deliberate effort by all child protection stakeholders to proactively identify children in need of protection services and refer them to appropriate service providers. For instance, field officers in child protection and other sector programmes might identify a child in the course of their regular activities. Other potential identification points for children in need of protection services are teachers (school setting), health workers (health facilities) and Local councils, community based organisations, community volunteers (child protection committees, para social workers, VHTs, FIT persons etc.).

Irrespective of the way in which a child in need has been identified, agencies supporting children and respective Caseworkers must have a clearly outlined vulnerability criteria (to guide the identification process) and raise awareness on this criteria within their work catchment area. A sample tool for assessing a child's vulnerability to protection is provided in the Appendix of this Handbook. This sample tool should be referenced with the National Vulnerability Index Assessment Tool for OVC to ensure that all key issues are captured.

The following signs are often exhibited by children that are at risk of harm or are suffering abuse, exploitation, neglect and violence of different forms. A child in need of protection may exhibit one or a combination of the following signs. It is therefore the duty of an adult that comes in contact with a child and observes such signs to pick interest in establishing more information from the child (if old enough) or people around the child, on the child's situation.

1. Physical abuse signs – injuries, bruises, marks, bites, cuts, wounds, chronic running away from adults, showing wariness or distrust of adults, being aggressive towards others.
2. Emotional and psychological abuse signs - aggressiveness, low confidence/ low esteem, loneliness, fearful of others, use of drugs and alcohol, change in behaviour / displays attention seeking behaviour, low performance and learning problems, delayed mental or emotional development, excessively anxious, has delayed speech or sudden speech disorder, fears new situations, makes inappropriate emotional responses to painful situations, too passive or too aggressive, abuses drugs or alcohol, regularly runs away from school or home, shows sudden under achievement or lack of concentration, wishes to die or tries to commit

suicide.

3. Sexual Abuse signs – poor social skills, clingy behaviour, aggressive sexual behaviour, frequent touching of genitals, difficult in trusting others, and/or unintended fears.

Step 2: Case Registration

Case registration includes initial intake and collection of personal and family data only occurs when the child meets the vulnerability or risk criteria and the child and or their family give informed consent/assent to accept services. In other words, not every case should be registered but rather only cases with a valid concern in terms of a child's right to protection.

Critical information to capture at registration includes:

1. Case management History
2. Personal details, including health and developmental deficiencies / disabilities
3. Current Care arrangements
4. Protection concerns
5. Child's wishes
6. Caregiver's opinion
7. Priorities for immediate action

Step 3: Assessment

Once the child has been registered for case management support, the next step is to undertake a systematic evaluation of the situation of the child. The assessment should consider two angles, i.e., the vulnerabilities (risks and harm factors) as well as the strengths of the child and the family (protective influences and resilience)]. It is important that the assessment is phased.

Initial assessment: To identify immediate risk areas to inform priority rescue actions.

Comprehensive assessment

1. Should be in-depth to enable a Caseworker gain a holistic understanding of the child's situation
2. Information generated to inform development of the case plan.
3. Identify the holistic needs of a child in need of protection, even if the employer agency is not able to address every concern directly. It is this broad list of concerns that informs the Caseworker's decisions on the nature of other service providers that can intervene in the child's situation to address the specific concerns.

Risks assessment results are categorized into 4 levels:

Level 1: Child significantly harmed- urgent response and frequent follow up required [Recommended response within 24 hours & bi weekly follow up]

Level 2: Child harmed- response and follow up required [Recommended response within 3 days and weekly follow up]

Level 3: Child at Risk of Harm – Monitoring required [Recommended response within 7 days and follow up fortnightly to monthly]

Level 4: Child no longer at risk: no further monitoring required, close case [consider external monitoring with new referral to child protection agency] The risk assessment guide in the Appendices section is a key tool in assessing risk facing a child in need of protection services.

The MGLSD has an inventory of child actors countrywide that can be accessed online by visiting the National OVC MIS Website at www.mglsd.go.ug/ovcmis. While an online inventory exists, it is important that a Caseworker has on file a hard copy of the list of child and family service organizations in the area (preferably from district to community level) to enable fast action to reported cases of children in need of protection.

Step 4: Case planning

Planning for case management is as critical as project planning because management of a case requires commitment with activities from start to end planned well to ensure positive outcomes. The accountability principle discussed later in section 3.2.7 can only be effectively administered, if the planning of client's cases is done in time and well.

What is a Case Plan?

A case plan lists the needs identified in the assessment and sets a strategy for addressing them through direct service provision, referrals and/or community based programs.

Elements of a case plan include:

1. Specific, measurable, time-bound case objectives are set
2. Objectives set are monitored for progress until time for case closure.
3. Actions agreed upon specify issue responding to, responsibility centre & date for results.
4. Revise case plans if a child's situation or needs change.

In countries where case management is highly developed, development of case plans for complex cases involves holding a multi-disciplinary and inter-agency case conference. In our context, joint case planning and or review meetings for complex cases are possible if the focal agency in case identification calls upon other service providers in the same catchment area. Of relevance in this context is MGLSD recently initiated district level quarterly meetings for child service providers under the SUNRISE OVC project. This is a potential platform where such complex cases are discussed to inform case planning (without violating confidentiality anonymity principles).

It is important for Caseworkers to note that depending on the nature of the child protection

issue at hand, case planning for cases of criminal nature (e.g. murder, defilement) must be done under the leadership of institutions with a statutory mandate for child protection notably Police (Child and Family Protection Unit, Criminal and Intelligence Investigations Department); and the Probation and Social Welfare Officer.

Step 5: Implement the Case Plan

Implementing the case plan involves:

- a) Taking actions to realize the plan, including direct support and services;
- b) Referral to other agencies/service providers, as appropriate.

A Caseworker is responsible for coordinating all of these services to their client, including documenting progress, and ensuring objectives in the case plan are being met.

It is important for all agencies involved in case management to note that effective implementation of case plans is dependent on well supervised, experienced, trained, and where possible, qualified social workers who have the time and resources to carry out their work.

Agencies involved in case management can leverage the services of the National Association of Social Workers in Uganda (NASWU) or experienced consulting firms in child protection to mentor their Caseworkers in basic social work practice with child clients and their immediate families.

Step 6: Follow up and review

Implementation of a case plan is not an end in itself. A Caseworker has to make follow up as implementation is on-going as well as periodic review of the progress being made in the client's case plan. This involves follow-up throughout the case management process with a focus on:

1. Checking whether a child and his/her family are receiving appropriate services and support.
2. Monitoring the child's situation and identifying any changes in a child's or family circumstances that might necessitate a review and change of the case plan.
3. Whether any risk factors have increased and if so take any other urgent actions.
4. Keep a record of the changes observed along the implementation path to guide decision making on the next course of action.
5. Inclusion of follow-up actions in the case plan.

The frequency of follow up actions will depend on the situation of the child, their specific needs and the risk level. The Caseworker has to generate a case follow up plan and document observations on each follow up visit to enable tracking of progress being made in reference to the case plan.

Review is a reflection on how the implementation of the plan is progressing, whether the objectives outlined in the case plan are being met, whether the plan remains relevant, and how to make adjustments to the plan, if necessary. Remember that as a Caseworker, you

have to keep the client and their immediate family involved along with you in monitoring the progress and making input in decisions along the way.

Step 7: Case Closure

Closure of cases is the last yet very important phase as it determines how case work efforts over a given period of time are eventually summed up. This is the point at which work with the child client ends. Just like projects, case closure in case management should not be an abrupt action, but, rather a planned activity within the case plan and well known by the client that at an appropriate time, the services of a Caseworker will come to an end.

Case closure can be a result of several reasons:

- a) The issue is resolved as per case plan
- b) The case management agency transfers the child client to another organization (e.g. because the child has moved to a location outside its catchment area),
- c) When the Child client attains adult status (child becomes 18 years old, unless there are good reasons to remain involved, such as additional vulnerabilities);
- d) If the client dies.

Cases should not be closed immediately after the plan has been concluded, but after a set period of time during which several monitoring visits have confirmed the child's sustained well-being. After closure, a visit should take place after one year to assess if the situation has remained stable and to seek feedback from the child and their family about the service provided. However, Case closure does not mean that all documentation is erased as cases can be reopened at any time whenever new information becomes available or the child's situation changes.

In some instances, cases may not be closed, but rather transferred to another agency. Often this happens when a child moves, but still needs a case plan to ensure their protection. Transfers also take place where the original Caseworker or agency are no longer best placed to lead, manage and coordinate the handling of the child's case, especially in complex cases. The transfer of a case indicates that the full responsibility for coordination of the case plan, follow up and monitoring of the child, is being handed over to another agency or department. Please note that this is distinct from referral where these responsibilities remain with the original Caseworker.

APPENDIX6: LIST OF PERSONS AT THE NATIONAL VALIDATION OF THE DRAFT

MANUAL

LIST OF PARTICIPANTS AT THE VALIDATION WORKSHOP FOR THE ACTION CENTRE GUIDELINES -13th March 2016		
S/N	Organisation	
1.	Onduri M. Fred	Ministry of Gender Labour and Social Development
2.	Kaboggoza James Ssembatya	Ministry of Gender Labour and Social Development
3.	Mondo Kyateeka	Ministry of Gender Labour and Social Development
4.	Jane Stella Ogwang	Ministry of Gender Labour and Social Development
5.	Agnes Mutonyi Wasike	Ministry of Gender Labour and Social Development / National Child Protection Working Group
6.	Alule Michael	Ministry of Gender Labour and Social Development
7.	Namanya Patience	Ministry of Gender Labour and Social Development
8.	Ssekamwa Paul	Ministry of Gender Labour and Social Development
9.	Musasizi Joseph	Ministry of Gender Labour and Social Development
10.	Asher Kigenyi	Ministry of Gender Labour and Social Development
11.	Brenda Kyalula	Ministry of Gender Labour and Social Development
12.	Asiku A. N	Ministry of Gender Labour and Social Development
13.	Otto Lucy	Ministry of Gender Labour and Social Development
14.	Batenga Farida	Ministry of Gender Labour and Social Development
15.	Luyiga Susan	Ministry of Gender Labour and Social Development
16.	Ajiambo Emily	Ministry of Gender Labour and Social Development
17.	Oyat Michael	Ministry of Gender Labour and Social Development
18.	Christine Kajumba	Ministry of Gender Labour and Social Development
19.	Jackie Nakifamba	Ministry of Gender Labour and Social Development
20.	Patrick Menya	Uganda Child Helpline
21.	Olivia Kyakimwa	Uganda Child Helpline
22.	Okot Jacob	Uganda Child Helpline
23.	Ayang Loy	Uganda Child Helpline
24.	Antoinette Angwech	Uganda Child Helpline
25.	Nayiga Hellen Mulira	Uganda Child Helpline
26.	Irene Ayot	UNICEF
27.	Mariana Garofalo	UNICEF
28.	Odit Peter	Kole District Probation Office
29.	Ocaa Jackson	Lira District Probation Office
30.	Ocabo Pius	Alebtong District Probation Office
31.	Namigadde Joyce	Luweero District Probation Office
32.	Mboizi Joshua	Kamuli District Probation Office
33.	Kitanywa Sowedi	Kasese District Probation Office
34.	Susan Nakawojwa	Rakai District Probation Office
35.	Milly Kayanga	Mayuge District Probation Office
36.	Mpindi Richard	Luweero District Probation Office
37.	Irene Nafungo	National Association of Social Workers of Uganda

38.	Jimmy Obbo Ivans	ANPPCAN -U
39.	Damalie Peace Jingo	UWESO
40.	Kabakurasi MBetty	ACODEV
41.	Naomi Ayot	ACODEV
42.	Bwire Moses	DEERU
43.	Gordon Tueriffe	CRS
44.	Namatovu Christine	UYDEL
45.	Linda Luyiga	MUK
46.	Komakech Samuel	Save the Children
47.	Stella Ayo Odongo	Uganda Child Rights NGO Network
48.	Deogratias Yiga	Development Links Consult
49.	Simon Enamu	Development Links Consult
50.	Juliet Nakayenga	Development Links Consult



Ministry of Gender, Labour
and Social Development



Save the Children
In Uganda



Development Links Consult (DLC)
Kampala - Uganda
www.devtlinks.org

