



REPUBLIC OF KENYA
Department of Children's Services



Facilitator's Training Manual

**Implementing the Guidelines for the Alternative Family Care of
Children in Kenya (2014)**

July 2019

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FOREWORD

The Government of Kenya's commitment to provide for children out of family care is demonstrated by the various policies and legislative frameworks that have been developed in the recent years.

All children are equal rights-holders and deserve to be within families and community as enshrined in the Constitution of Kenya 2010 and the Children Act 2001.

The development of this training manual recognizes the role of the family and the community in the care of our children while the accompanying user friendly handbook aims to boost the skills and knowledge of case workers and practitioners in the child protection sector.

All efforts need to be made to support families to continue to care for their children and, if this is not possible, to place a child in a family-based alternative care arrangement, such as; kinship care, foster care, guardianship, Kafaalah, Supported Independent Living (SIL), or adoption.

While the Guidelines for the Alternative Family Care of Children in Kenya (2014) provides a strong legal framework and a pathway for the development and implementation of family based care in Kenya, DCS also recognized the need to have a strong, competent and trained workforce to implement the Guidelines. This training package has been developed, in full collaboration with key development partners, to support the implementation of the Guidelines. The training manual will strengthen the capacity of child protection and care practitioners to support policy and programming around alternative care, grounded within good practice as highlighted within the Guidelines.

My Ministry recognizes efforts by all the Government Departments, organizations and individuals that have contributed towards the development of this training manual. The training manual is an important tool for informing and inspiring practitioners and organizations seeking to provide the best possible rights-based solutions and care for children in Kenya. It also provides a milestone achieved in the journey of care reforms in Kenya.

Am happy to note that this training manual aims at increasing the level of professionalism in providing care and protection to children who are out of family care for one reason or the other. This document provides practice guidelines and principles on the roles assigned to all duty bearers and child care practitioners.



Simon K. Chelugui, EGH
Cabinet Secretary
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The development of this training manual would not have been possible without the input of the national working group composed of National Council for Children's Services (NCCS), Department of Children's Services, UNICEF, Changing The Way We Care (CTWWC), SOS Kenya, Stahili Foundation, Hope and Homes for Children, Association for Care leavers of Kenya amongst other stakeholders.

Special appreciation goes to UNICEF and Changing the Way We Care (CTWWC) for funding the process and providing technical expertise.

The development of this facilitators training manual for Alternative Family Care was developed under the guidance of the Ministry of Labour and Social Protection through the Department of Children's Services with support from stakeholders in the children sector who provided extensive information on the care reform journey as well as expertise, technical advice and guidance.

The State Department for Social Protection reaffirms its commitment in the process of development of this training manual and upholds its ownership of the document on behalf the children and stakeholders in Alternative Family care.

We recognize with gratitude the work carried out by a team of International and National consultants in the development of the training manual and the accompanying user-friendly handbook. This manual therefore is a product of concerted efforts and substantive contributions from many people with a broad range of expertise.



Nelson Marwa Sospeter, CBS

Principal Secretary

State Department for Social Protection

RATIONALE

The Department of Children's Services (DCS) realized the need to provide harmonised national guidance for child welfare and protection practitioners in order to improve the quality of family support and alternative care services and to make family care a reality for all children in Kenya. To achieve this DCS with support from UNICEF, Changing The Way We Care (CTWWC) and stakeholders in matters concerning children developed a training manual to supplement the Guidelines for the Alternative Care of Children in Kenya (2014).

This training manual has been designed to encourage children reintegration to their families and communities and to offer practical approach, knowledge and key concepts which are invaluable to childcare practitioners in the care reform sector. A wide consultative process involving stakeholders was used in the development of this document.

This training manual and the accompanying User-friendly handbook are intended to assist in programming for the most vulnerable children who are either in residential care facilities, living in the streets or have been harmed or are at risk of losing parental care to effectively provide them with short or long term care suitable for their needs that will eventually lead to permanency.

The purpose of this training manual is to enhance care and protection of children and promote improved practices for children without parental care and those at risk of being separated from their parents. It is with this intent that the DCS and its care reform partners within government and civil society developed this facilitator's training manual for use alongside the Guidelines with the intent to streamline and standardize Alternative Family Care services in Kenya through training. This facilitators manual aims to support the implementation and dissemination of the Guidelines in a standardized way across government actors, service providers, children and families. It is also designed to strengthen and equip the capacity of the child protection workforce and other stakeholders in care reform. The facilitators guide does not substitute other national laws or policies related to the healthy and safe support of children transitioning from residential to family-based care. Rather, the facilitators manual is intended to provide direction, suggestions and concrete ways to deliver the different care options outlined in the Guidelines.

The training manual has been developed for the child protection workforce engaged with families, children in need of alternative family care and children at risk of being separated from their families/communities.



Noah M.O Sanganyi, HSC
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DEFINITIONS AND TERMS¹

Adoption	Adoption is the complete severance of the legal and social relationship between a child and his/her biological parent(s) and birth family, and the establishment of a new legal relationship between the child and his/her adoptive parent(s). Adoption is a permanent care solution and because of its permanent nature is not considered as alternative care but a permanent solution for a child who cannot be with his/her biological parents.
Alternative care	<p>A formal or informal arrangement whereby a child is looked after at least overnight outside the parental home, either by decision of a judicial or administrative authority or duly accredited body, or at the initiative of the child, his/her parent(s), primary caregivers, or spontaneously by a care provider in the absence of parents.</p> <p>Alternative care is for orphans and other vulnerable children who are not under the custody of their biological parents. It includes adoption, foster families, guardianship, kinship care, residential care, and other community-based arrangements to care for children in need of special protection, particularly children without primary caregivers.²</p>
Alternative Care Committee	The Alternative Care Committee (ACC) at sub-county level is a sub-committee of the Area Advisory Committee (AAC) and therefore reports to the AAC. Its overall objective is to coordinate and strengthen family and alternative care services within the sub-county. Members include specialized professionals providing family strengthening and alternative care services in the sub-county. The AAC may co-opt people who are not members of ACC to provide expertise.
Assessment	The process of building an understanding of the problems, needs, and rights of a child and his/her family in the wider context of the community. It should cover the physical, intellectual, emotional, and social needs and development of the child. There are various types of assessment, for example, rapid, initial, risk, and comprehensive.

¹Definitions and terms taken from the *Guidelines for the Alternative Family Care of Children in Kenya* (2014), pages 141–148 (unless otherwise stated).

²http://www.unicef.org/eapro/Alternative_care_for_children.pdf

Best interests assessment	A formal process with specific procedural safeguards and documentation requirements conducted for certain children of concern to United Nations High Commissioner for Refugees (UNHCR), whereby a decision-maker is required to weigh and balance all the relevant factors of a particular case, giving appropriate weight to the rights and obligations recognized in the United Nations Convention on the Rights of the Child (UNCRC) and other human rights instruments, so that a comprehensive decision can be made that best protects the rights of children.
Biological parents	The birth family into which a child is born. It can mean both parents if they are together, or the mother, or the father.
Caregiver/carer	A parent or guardian who is charged with the responsibility for a child's welfare.
Care leaver	A child or young person who is leaving or has left a formal alternative care placement. He or she may be entitled to assistance with education, finances, psychosocial support, and accommodation in preparation for independent living.
Care reform	Refers to the changes to the systems and mechanisms that promote and strengthen the capacity of families and communities to care for their children, address the care and protection needs of vulnerable or at-risk children to prevent separation from their families, and ensure appropriate family-based alternative care options are available.
Case management	The process of ensuring that an identified child has his/her needs met for care, protection, and support. This is usually the responsibility of an allocated social worker who meets with the child, the family, or any other caregivers/professionals involved with the child in order to assess, plan, deliver, or refer the child and/or family for services, and monitor and review progress.
Charitable children's institution (CCI)	A home or institution established by a person, corporate/non-corporate, religious organization, or non-governmental organization (NGO), which has been granted approval by the National Council for Children's Services (NCCS) to manage a program for the care, protection, rehabilitation, or control of children.
Child	Any human being under the age of 18 years.

Child abuse	<p>Child abuse consists of anything individuals, institutions, or processes do/fail to do which directly harms children or damages their prospects of safe and healthy development into adulthood (source: National Commission, United Kingdom, 1996). The Children Act, 2001 defines child abuse as anything that causes physical, sexual, psychological, or mental injury to a child.</p> <p>There are four types of child abuse: physical abuse, neglect, sexual abuse, and emotional maltreatment. All four are more typically found in combination than alone.</p>
Child-headed household	A household in which a child or children (typically an older sibling) assumes the primary responsibility for the day-to-day running of the household, providing and caring for those within the household. The children in the household may or may not be related.
Child living and working on the streets	Children who spend most of their time on the streets. They may be engaged in some kind of economic activity such as begging or vending. They may go home at the end of the day and contribute their earnings to their family, or they may live on the street, with or without other family members. The term “children living and working on the street” is preferred to “street children.”
Child protection practitioners	Individuals from government, civil society, and communities working with children, young people, and families providing family support, child protection, reintegration, and alternative care services.
Child protection system	A comprehensive system of laws, policies, procedures, and practices designed to ensure the protection of children and to facilitate an effective response to allegations of child abuse, neglect, exploitation, and violence.
Child sexual exploitation and abuse	This can take the form of harassment, touching, incest, rape, or exploitation in prostitution or pornography. It can happen in the home, school, care and justice institutions, the workplace, in travel and tourism facilities, and within communities at large, in both the development and emergency context.
Children without parental care	All children not in the overnight care of at least one of their parents, for whatever reason and under whatever circumstances.
Community-based care	A range of approaches designed to enable children to remain with their own (or extended) family and prevent the need for separation, or to be placed with an alternative family within his or her community.

Continuum of care	<p>A range of services and placement options for children with priority being family preservation or prevention of separation, i.e., all efforts to help a child remain with biological parent(s). Where necessary to separate the child, other suitable care options are appropriately selected within this continuum: kinship care, temporary foster family care, long- term foster care, domestic adoption, monitored child-headed households, small group homes, inter-country adoption, high-quality residential care, (including orphanages), and supported independent living. A continuum should represent a wide range of necessary and appropriate options.</p> <p>In the Care Reform context, continuum of care means a wide range of options to be carefully selected using the principle of necessity and suitability/appropriateness. Therefore, it does not necessarily mean that a child will move from one form of care to another in a linear scale, but rather, the case conference will determine the most suitable/appropriate care for the child after an assessment of needs.</p>
Domestic (national) adoption	Adoption by family (Couple or a single person) that are Kenyan and the child they are adopting is a Kenyan resident. Applications for domestic adoption are initiated through a registered local adoption society.
Duty bearer	Any person or institution, including the State, with responsibility for the welfare of a child.
Emergency placement	A situation where a child who is separated from his/her parents or other legal caregivers is placed in alternative care without going through the legal processes required in normal circumstances. The placement can either be with a family or a children's institution.
Family	A fundamental group of society and the natural environment for the growth, well-being, and protection of children. ³
Family-based care	Short- or long-term placement of a child in a family environment with one consistent caregiver and a nurturing environment where the child is part of a supportive family and the community.
Family preservation	A range of support strategies meant to prevent the family from breaking up, and to protect children from abandonment, neglect, or separation from family.
Family strengthening/ family support services	A range of measures/services to ensure the support of children and families— similar to community-based support but may be provided by external agents (e.g., social workers) and provide services (e.g., counseling, parent education, day-care facilities, and material support).

³UN Guidelines on Alternative Care of Children, 2009.
https://www.unicef.org/protection/alternative_care_Guidelines-English.pdf.

Family tracing	Activities undertaken by authorities, community members, relatives, or other agencies for the purpose of gathering information and locating the parents or extended family of the separated or lost child.
Formal care	All care provided in a family environment which has been ordered by a competent administrative body or judicial authority, and all care provided in a residential environment, including in private facilities, whether or not as a result of administrative or judicial measures.
Foster care	Placement of a child with a person who is not the child's parent, relative, or guardian and who is willing to undertake the care and maintenance of that child.
Foster parent	A parent registered under the Children Act to receive and retain a child for the purpose of caring for and maintaining the child apart from the child's parents, guardian, or relative.
Gatekeeping	Policies, systematic procedures, services, and decision-making which ensure that alternative care for children is used only when absolutely necessary, and that children receive the most suitable support and/or care to meet their unique individual needs, thereby upholding the best interests of the child.
Guardian	A person appointed by the will/deed of a parent or by an order of the court to assume parental responsibility for a child upon the death of the child's parent either alone or in conjunction with the surviving parent or the father of a child born out of wedlock who has acquired parental responsibility of the child in accordance with the provisions of the Children Act, 2001.
Guardianship	<p>A term used in three different ways:</p> <ol style="list-style-type: none"> 1. A legal device for conferring parental rights and responsibilities to adults who are not parents 2. An informal relationship whereby one or more adults assume responsibility for the care of a child 3. A temporary arrangement whereby a child who is the subject of judicial proceedings is granted a guardian to look after his/her interests.
Individual child-care plan	A written document that outlines by whom, when, and how a child's developmental needs will be met.
Informal care	Any private arrangement provided in a family environment whereby a child is looked after on an ongoing or indefinite basis by relatives or friends (informal kinship care) or by others in their individual capacity, at the initiative of the child, his/her parents, or other person(s) without this arrangement having been ordered by an administrative or judicial authority or a duly accredited body.

Institution	A large institution is characterized by having 25 or more children living together in one building. A small institution or children's home refers to a building housing 11–24 children.
Institutional care	Short- or long-term placement of a child into any non-family-based care situation. Other similar terms include residential care, group home care, and orphanage.
Intercountry adoption	Adoption of a Kenyan child by a family who are not Kenyan and who live outside Kenya. Intercountry adoptions are processed through an approved foreign adoption agency in conjunction with a Kenyan adoption society registered to make international adoption arrangements. Applications must be vetted and approved by an adoption committee before applicants can adopt a child.
Kafaalah	According to Islamic law, the commitment by a person or family to voluntarily sponsor and care for an orphaned or abandoned child. The individual or family sponsors the child to meet his/her basic needs for health, education, protection, and maintenance.
Kafiil	Refers to an individual who is providing Kafaalah to a child as defined above. Normally, the kafiil is a Muslim.
Kinship care (informal)	A private arrangement within an extended family whereby a child is looked after on a temporary or long-term basis by his/her maternal or paternal extended family, without it being ordered by an administrative or judicial authority. Family members include grandparents, aunts, uncles, and older siblings.
Kinship care (formal)	An arrangement, ordered by an external administrative or judicial authority, whereby a child is looked after on a temporary or long-term basis by his/her maternal or paternal extended family. Family members include: grandparents, aunts, uncles, and older siblings.
Orphan	A child who has lost one or both parents (as a result of death).
Placement	A social work term for the arranged out-of-home accommodation provided for a child or young person on a short- or long-term basis.
Prevention	A variety of approaches that support family life and help diminish the need for a child to be separated from her/his immediate or extended family or other caregiver and be placed in alternative care.
Reintegration	Process of a separated child making what is anticipated to be a permanent transition back to his or her immediate/extended family and the community (usually of origin) in order to receive protection and care and to find a sense of belonging and purpose in all spheres of life.

Reunification	The process of bringing together the child and family or previous care-provider for the purpose of establishing/re-establishing long-term care. ⁴
Separated child	A child separated from a previous legal or customary primary caregiver, but who may nevertheless be accompanied by another relative.
Specialized therapeutic care	Small residential care facility with limited number of beds for the care and protection of children with special needs
Statutory children's institution (SCI) in Kenya	Children institutions established by the Government of Kenya for the purpose of: 1) rescue of children who are in need of care and protection (rescue homes), 2) confinement of children in conflict with the law while their cases are being handled in court (remand homes), and 3) rehabilitation of children who have been in conflict with the law (rehabilitation school). The court commits a child into one of these institutions as appropriate.
Supported independent living	Where a young person is supported in her/his own home, a group home, hostel, or other form of accommodation to become independent. Support/social workers are available as needed to offer assistance at planned intervals and provide support—but not to supervise. Assistance may include timekeeping, budgeting, cooking, job seeking, counseling, vocational training, and parenting.
Temporary shelter	A safe, family-like environment where children in distress are placed for a short time (from a couple of hours to a maximum of six months), while arrangements for family reunification or placement in alternative care are made. These may also be referred to as places of safety, halfway homes, or rescue centers.
Violence against children	Includes emotional/physical abuse, neglect/negligent treatment, and sexual exploitation/abuse. It occurs in homes and families, schools, care and justice systems, workplaces, and communities. Perpetrators include parents, family members, teachers, caretakers, law enforcement authorities, and other children. Evidence is clear that violence can affect children's physical and mental health, impair their ability to learn and socialize, and undermine their development as functional adults and good parents later in life. In the most severe cases, violence against children leads to death.
Vulnerable child	A child, whose safety, well-being, and development are, for various reasons, threatened, including children who are emotionally deprived or traumatized.

⁴ Better Care Network (nd), Glossary of Key Terms, accessed at: <https://bettercarenetwork.org/toolkit/glossary-of-key-terms>.

ACRONYMS

AAC	Area Advisory Committee
ACC	Alternative Care Committee
ACRWC	African Charter on the Rights and Welfare of the Child
CCI	Charitable Children Institutions
CPIMS	Children Protection Information Management System
DCS	Department of Children's Services
GoK	Government of Kenya
KESCA	Kenya Society for Care Leavers
M&E	Monitoring and Evaluation
NCCS	National Council for Children's Services
NGO	Non-Governmental Organization
OVC	Orphans and Vulnerable Children
SCI	Statutory Children's Institution
UN	United Nations
UNCRC	United Nations Convention on the Rights of the Child
UNCRPD	United Nations Convention on the Rights of Persons with Disabilities
UNICEF	United Nations Children's Fund

INTRODUCTION TO THE FACILITATORS TRAINING MANUAL

This comprehensive training package includes the training facilitator’s manual, PowerPoint presentations, handouts, case studies, and video clips. They provide information, methodologies, and practical tools to build the capacity of child protection practitioners who work directly with or for children at risk of separation from their families or those who are deprived of parental care. Alternative care—as presented in the Guidelines—applies to a formal or informal arrangement whereby a child is looked after at least overnight outside the parental home. In collaboration with Children Officers, this can either be decided by a judicial or administrative authority, such as the Alternative Care Committee (ACC)—a subcommittee of the Area Advisory Committee (AAC)—or at the initiative of the child, his/her parent(s), primary caregivers, or spontaneously by a care provider in the absence of biological parent(s).

The rationale for developing the Facilitators Training Manual

The Government of Kenya (GoK), through the State Department for Social Protection, has embraced the importance of family care given the negative impacts on children’s safety, wellbeing, and development associated with residential care. The journey to care reform in Kenya started with the launch of the Guidelines in 2015. This was an important step in the effort to support longer-term care reform. In addition to the launching of the Guidelines, there have been numerous efforts to ensure that children are returning to families and those at risk are retained and supported within their families/communities (i.e., separation is prevented).

The purpose of the Guidelines is to enhance application of the Kenyan legal framework as it relates to care and protection of children and promote improved practices for children without parental care and those at risk of being separated from their parents. It is with this intent that the Department of Children’s Services (DCS) and its care reform partners within government and civil society developed this Facilitator’s Training Manual for training on implementing the Guidelines with the intent to streamline and standardize alternative family care services in Kenya through standardized training. This Facilitator’s Training Manual aims to support the implementation and dissemination of the Guidelines in a standardized way across government actors, service providers, and children/families. It is also designed to strengthen the capacity and equip the child protection workforce and other stakeholders in care reform. The Facilitator’s Training Manual does not substitute other national laws or policies related to the healthy and safe support of children transitioning from residential to family-based care. Rather, the Facilitator’s Training Manual is intended to provide direction, suggestions, and concrete ways to deliver the different care options outlined in the Guidelines.

The training package has been developed for the child protection workforce engaged with families, children in need of alternative family care, and children at risk of being separated from their families/communities. The Facilitator’s Training Manual presents different forms of alternative family care and the eligible children to be placed in those alternatives while outlining the placement

procedures and approval processes. The Facilitator's Training Manual is complemented with a participants' handbook and a series of PowerPoint slides.

This Facilitator's Training Manual provides the necessary information, tools, techniques, and tips for facilitators to be able to undertake the training and ensure that the training objectives are achieved. However, facilitators should adapt to the context/audience and incorporate local examples to illustrate the content.

TRAINING SCHEDULE

This prototype timetable may be changed to fit facilitator's plan, depending on the participants.

Time	Day 1	Day 2	Day 3	Day 4	Day 5
08:30–09:00	Welcome and Training	Recap Day 1	Recap Day 2	Recap Day 3	Recap Day 4
09:00–10:45	Introduction	Section 3 Foundational principles in alternative care	Section 5 The continuum of care	Section 5 The continuum of care	Section 7 Recap and way forward
10:45–11:00	Break	Break	Break	Break	Break
11:00–13:00	Section 1 Introduction to alternative care and the need for alternative care	Section 3 Foundational principles in alternative care	Section 5 The continuum of care	Section 5 The continuum of care	Evaluation
13:00–14:00	Lunch	Lunch	Lunch	Lunch	Lunch
14:00–15:30	Section 1 Introduction to alternative care and the need for alternative care	Section 4 Foundational approaches in alternative care	Section 5 The continuum of care	Section 6 Basics of monitoring and evaluating alternative care	
15:30–15:45	Break	Break	Break	Break	
15:45–16:30	Section 2 Understanding the legal, policy framework and duty bearers related to alternative care for children	Section 4 Foundational approaches in alternative care	Section 5 The continuum of care	Section 6 Basics of monitoring and evaluating alternative care	

OBJECTIVES OF THE TRAINING

The main objectives of the training:

1. Enhance knowledge of the Kenyan and global legal framework and existing practices for children without parental care and those at risk of being separated from their parents
2. Build the capacity of child protection practitioners and childcare service providers in order to protect and promote the well-being of children, ideally in a family-based environment
3. Improve the understanding and capacity of participants to implement the Guidelines for the Alternative Family Care of Children in Kenya (2014)
4. Provide guidance on how to support families in caring for their children by promoting the prevention of separation—or in the case of children already separated, reintegration into the family or placement into alternative, family-based care

SKILLS DEVELOPMENT OBJECTIVES

The training will develop participants' knowledge and skills in:

1. The international, regional, and national child-rights based legal and policy instruments related to children without appropriate care and alternative care
2. The reasons why children are separated or lack appropriate care, and how these can be addressed to ensure that children remain within or are reunited with their families
3. The effects of separation, loss, and institutionalization on children's development
4. Establishing appropriate gatekeeping strategies and measures to keep children within their families
5. Implementing the continuum of care, including family reunification, kinship and community care, foster care, Kafaalah, guardianship, adoption, and supported independent living, etc.
6. Assessing the situation of children in need of alternative care, reducing admissions to institutional care, and determining necessary/appropriate care options for each individual child
7. Monitoring and evaluation alternative care programs
8. Collecting, analyzing, and using data to improve policy, programming, and advocacy around alternative care
9. Advocating for vulnerable children at individual and strategic levels

INSTRUCTIONS FOR THE FACILITATOR

The information in this section is intended to guide facilitators on conducting the training sessions. It will help facilitators gain an overview of the training and an understanding of:

- The aims and learning objectives
- The training structure, including the way that the sessions have been designed to fit together
- The methodology used and what this means about how facilitators should run sessions and interact with participants

Methods of delivery

The training approach is based on adult learning theory, where participants play a leading role in their learning by building on their experiences and identifying knowledge/skills that need to be imparted. This will be achieved using a combination of lectures (plenary), group discussions, role plays, case studies, guest speakers, videos, and participatory group assignments.

Training overview

The training has been developed to provide participants with an extensive foundational understanding of alternative care and give practical guidance for the implementation of the Guidelines. The training

- consists of 30 sessions with each session varying in length;
- is intended to be run over five full days;
- is designed for a group size of between 20–30 people; and
- is intended to impart knowledge, inspire/motivate, and offer practical advice that practitioners can use to implement the Guidelines for the Alternative Family Care of Children in Kenya (2014).

Preparing to deliver sessions

The facilitator should review the package in full prior to launching the training.

- Before each session the trainer should review presentations and all materials for that session. PowerPoint slides for each session are prepared and in the event where the training is conducted in a location without facilities for PowerPoint, the facilitator should print the materials or write notes on manila paper/flip chart beforehand.
- Some slides include additional suggestions and instructions for the facilitator to help deliver the sessions. These are included in the notes section of the slides.
- Many sessions have case studies and handouts that will aid the group work and discussions.
- The slide notes include instructions for how the group discussions and case studies can be undertaken.

- *Prior* to each session, facilitators should read the session plan carefully to be very familiar with the content contained in the background information and with the way the session will run.
- If facilitating with someone else, be clear about who will be running which parts; make sure that each person understands their role and that everyone involved in leading the training share a common approach.
- It is recommended that one facilitator is designated as the lead facilitator in order to ensure that there is an ultimate decision-maker while delivering the training. If there is a secondary facilitator, it is recommended that they are appointed as timekeeper. If possible, it is also recommended that notes are kept during the training for future reference.

Training facilitators should be familiar with the following before the training course:

- Constitutions of Kenya, Article 53
- Guidelines for the Alternative Family Care of Children in Kenya (2014)
- United Nations (UN) Guidelines for the Alternative Care of Children in Kenya (2010)
- UN Conventions on the Rights of the Child (1999)
- The Children Act (2001)/Children's Bill (2018)
- Other Kenyan policies, such as National Standards for Best Practices in Charitable Children Institutions (CCIs)
- The Framework for the National Child Protection System for Kenya (2015)

Training delivery tips

- Facilitators should allow plenty of opportunities (and time) for participants to discuss, put forward questions, or talk about their own experience. This is intended to be participatory and adults learn best when they can be actively involved in discussions, role plays, etc.
- Facilitators should limit the use of technical jargon and be consistent in using terms.
- Facilitators should explain terms if participants do not understand them.
- The facilitator should, whenever possible, refer participants to further reading and research.
- Facilitators should ensure participants are engaged and check that their attention, interest and understanding are maintained. Ask questions, solicit their input -engage them.
- Facilitators should create an atmosphere where participants feel able to express their opinion and able to voice any concerns or doubts. This should be one of the ground rules established at the beginning of the training.
- Facilitators should work to simulate the kind of relationships and atmosphere that one will like participants to create and have fun with people they work with. Show them good examples of constructive discussion and participation: they will learn from the experience.

- Facilitators need to be honest and transparent with participants, trust them, respect them, and treat them as equals. However, the facilitator should also be prepared to address challenging or disruptive behavior of participants in a constructive manner should this occur.
- It is acceptable for a facilitator to admit to not knowing all the answers! If participants raise complex questions or ask about details outside a Facilitators area of expertise the facilitator can put the question back to others in the group. If there is still uncertainty Facilitators can always look into the issue and encourage participants to do so.
- It would be useful for the facilitators to ascertain the participants' child care norms, practices and beliefs throughout the training so that the facilitator can ensure that examples and discussions are relevant to the knowledge and experiences of the participants.

INTRODUCING THE TRAINING

Objectives of this Session:

- Welcome participants and set the climate for the training
- Ensure everyone is clear on the objectives and expectations for the training
- Introduce the concept of alternative care within a global and local context
- Present the Kenyan legal/policy framework and the key actors related to alternative care
- Explore push and pull factors around children being separated and placed into different forms of alternative care

Session:	Welcome, Introduction, Expectations, and Housekeeping
Total time needed:	60–75 minutes
Session objective(s):	<ul style="list-style-type: none"> ▪ Help make the participants feel comfortable with sharing in a group ▪ Participants to get to know each other and the facilitator(s) ▪ Set clear expectations on what the training will/will not cover ▪ Introduce the concept of “care reform” through the fun introduction exercise ▪ Set clear ground rules for the training
Resources required:	<ul style="list-style-type: none"> ▪ Facilitator’s Training Manual ▪ “Care Reform—A Historic Timeline” exercise, Handout 1 (facilitator distributes or attaches to wall) ▪ Pre-test questionnaire, Handout 2 ▪ PowerPoint presentation/printed materials ▪ Name tags, detailed agenda, pens, notebooks, flipcharts, markers, and pre-test form (Handout 2)
Session methodology:	<ol style="list-style-type: none"> 1. Welcome: a formal welcome to the training 2. Opening prayer: from a volunteer 3. Opening remarks: 50 total minutes for all speakers 4. Introduction exercise: use the instructions on the “Care Reform—A Historic Timeline” Handout 1 and ask people to introduce themselves as a part of the exercise 5. Workshop objectives, outputs, daily agenda: using PowerPoint (or flip chart/blackboard if no electricity) present the objectives, outputs, and agenda for the training 6. Pre-test: distribute the pre-test questionnaire (Handout 2), noting the objective is purely to evaluate what we have learned by the end of the training

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7. Housekeeping and expectations: split participants into pairs and ask them to discuss their expectations for the training. After 5 minutes ask the participants to express their partners' learning expectations for the training as well as ground rules for operation. The facilitator will note these on a flip chart to reflect on later in the training.

Key messages/ tips for the facilitator:	<ul style="list-style-type: none">▪ Ensure the participants understand that the training is an introduction to the Guidelines and other national/international-related instruments and that to be fully conversant and experienced there will need to be follow-up training, mentoring, and exposure/experiences of the various practices that are covered in the training; this training alone will not be sufficient to enable participants to implement the Guidelines for the Alternative Family Care of Children in Kenya (2014).▪ The training is designed for full participation and is not a traditional lecture-style training; the more participants engage/contribute the richer and more fulfilling the training will be for each one.▪ Ensure that all participants are given the opportunity to share and that they feel confident in the group.
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Job aids/ handouts:	<ol style="list-style-type: none">1. Handout 1, "Care Reform—A Historic Timeline" exercise2. Handout 2, Pre-test questionnaire
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SECTION 1: INTRODUCTION TO ALTERNATIVE CARE AND THE NEED FOR ALTERNATIVE CARE

In Kenya, children are sometimes temporarily or permanently deprived of family care and therefore require alternative care. This section introduces the concept of alternative care and presents a case as to why alternative care is one of the critical requirements for fulfilling the rights of children.

Learning Objectives

At the end of this section, participants will:

1. Be familiar with and understand common terms used in alternative care
2. Identify the factors that make children and families vulnerable and at risk of separation and/or deprived children of family care
3. Understand the evidence that illustrates the importance of family-based care and the consequences of adverse care environments
4. Understand the continuum of care and the concepts of alternative care and family-based alternative care
5. Be able to identify categories of children at risk and/or in need of alternative care

Sessions

This section is made up of an introduction to the section and 5 (five) sessions.

Session 1: Introduction to Alternative Care

Session 2: Why Children End Up in Alternative Care and Understanding Family/Childhood Vulnerabilities

Session 3: What the Evidence Tells Us About Institutional Versus Family Care

Session 4: An Introduction to the Continuum of Care

Session 5: Global Trends in Alternative Care

It is estimated this section will take 2 hrs/45 minutes to complete.

Section 1 Introduction	
Time needed:	10 minutes
Resources required:	PowerPoint presentation, flip charts, or other materials (e.g., printed cards and manila papers) that can be used in the event there is no electricity
Session methodology:	<ol style="list-style-type: none">1. Using PowerPoint slides/printed cards/manila papers, the facilitator introduces the section and the overall learning objectives for the section.2. The facilitator explains that the section is split into sessions and what is in each session.

3. The facilitator asks the participants if they understand the learning objectives of the section and answers any questions relating to the section.

Session 1: Introduction to Alternative Care

Total time 20 minutes
needed:

Session description: The session introduces the concept of alternative care and the common terms used. Participants will share experiences of situations they are aware of where children are in alternative care settings. Participants will learn the different types of alternative care, both family-based and residential. The session will highlight global/regional trends and initiatives to prioritize family-based care.

Resources/job aids required:

- Facilitator's Guide
- PowerPoint presentation/other printed cards/written flip charts/manila papers
- Key terms and definitions in alternative care handout

Materials required:

- Projector and screen/printed materials
- Flip chart and manila paper
- Markers
- Masking tape
- Post-It notes

Session methodology:

1. The session begins with a plenary discussion with the facilitator posing the question to participants: "What is your current understanding and knowledge of alternative care?"
2. The facilitator provides a handout to the participants and outlines some of the key terms and definitions, highlighting the most important relevant to the training. Participants are given the opportunity to clarify the understanding of any term they are unsure about.
3. Using the PowerPoint presentation/printed materials, the facilitator provides a brief history of "alternative care" in Kenya.

Key messages/tips for the facilitator:

- It is important that during this first session the facilitator is aware of the level of understanding and knowledge of alternative care amongst the participants.
- The facilitator should make it clear that more detailed terms and definitions, such as the elements in the continuum of care, will be explored later in the training; at this stage it is only the main terms and definitions that are important to understand.

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- The facilitator (or timekeeper) will need to ensure that plenary discussions are kept within the time allocated to the session.
 - The facilitator should note any key issues or questions raised during the session on a flip chart for discussion later in the training or for follow-up post-training.
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Session 2: Why Children End Up in Alternative Care and Understanding Family/Childhood Vulnerabilities	
Total time needed:	45 minutes
Session description:	Participants will be engaged in participatory exercises to map the factors that lead to children being separated from family and in need of alternative care, including both the push and pull factors. Global and Kenya-specific research and evidence will be presented/discussed in order that participants gain a comprehensive understanding of the situation of children without parental care globally and in Kenya.
Resources/job aids required:	<ul style="list-style-type: none"> ▪ Facilitator's Training Manual ▪ Guidelines for the Alternative Family Care of Children in Kenya ▪ PowerPoint presentation/printed materials
Materials required:	<ul style="list-style-type: none"> ▪ Projector and screen ▪ Flip chart and paper ▪ Markers ▪ Masking tape ▪ Post-It notes
Session methodology:	<ol style="list-style-type: none"> 1. The facilitator leads the participants in a plenary discussion where participants are asked to identify both the push and pull factors of why children end up separated from their families and in alternative care. 2. Using PowerPoint/printed materials, the facilitator presents some of the research findings on the reasons why children end up in alternative care, specifically institutional care (if any Kenyan or local research is available, the facilitator should use it to contextualize an understanding of the harm of institutional care on children). 3. The participants will be given the opportunity to share their understanding and perspectives of why (push/pull) children end up without parental care.
Key messages/tips for the facilitator:	<ul style="list-style-type: none"> ▪ The facilitator should ensure that the participants are aware that sometimes separating children from their parents is necessary when there are serious child protection concerns. Alternative care could be necessary at such a time, and these alternatives will be explored in this training. The facilitator can briefly mention the principle of necessity, which will be explored in a later session. ▪ The facilitator should highlight that it has been proven globally that some children who have been institutionalized to access services (such as education and material provisions) actually have families—although their families may be poor or experiencing vulnerabilities. The facilitator

should highlight that both international and national laws prohibit such an intervention. Poverty and vulnerabilities within the family should not be a sole reason to separate a child from their family. The facilitator can briefly mention the **principle of suitability/appropriateness**, which will be explored in a later session.

- The facilitator should note any key issues or questions raised during the session on a flip chart for discussion later in the training or for follow-up post-training.

Session 3: What the Evidence Tells Us about Institutional Versus Family Care	
Total time needed:	45 minutes
Session description:	The session presents evidence that discourages the placement of children into institutional care given the negative consequences on the emotional, cognitive, and physical development of the child—including issues of attachment, loss of identity, and disruptions/delays in development. The participants will discuss the benefits of growing up in a family and the key elements of family and community that are absent from residential care. Drawing on global/regional research (including experiences of care leavers), the short, medium, and often life-long impact on children outside of family care will be shown. The need to reduce and minimize placement of children into residential care and provide family-based care alternatives will be highlighted.
Resources/job aids required:	<ul style="list-style-type: none"> ▪ Facilitator’s Training Manual ▪ Guidelines for the Alternative Family Care of Children in Kenya ▪ PowerPoint presentation/printed materials ▪ If available, a person who has previously lived in a CCI (a care leaver) can be asked to share their experiences (pre-arranged)
Materials required:	<ul style="list-style-type: none"> ▪ Projector and screen ▪ Flip chart and paper ▪ Markers ▪ Masking tape ▪ Post-It notes
Session methodology:	1. The session begins with a brief plenary discussion on what have been participants’ experiences (or their understanding) on the effects of institutionalization on children. Key observations are written on a flip chart for reflection.

	<ol style="list-style-type: none"> 2. The facilitator will present the PowerPoint slides/printed materials that outline the research on the effects of institutionalization of children. 3. The facilitator shows a video from the training resource library of a care leaver sharing their experiences of growing up in an institution. If no electricity is available, share a case study of a care leaver. 4. The facilitator presents the PowerPoint slides/printed case studies/story of a care leaver highlighting the research and experiences of care leavers or a care leaver (pre-arranged) shares their personal experiences.
Key messages/ tips for the facilitator:	<ul style="list-style-type: none"> ▪ From the job aids, there is a collection of videos and the facilitator should decide what video(s) of care leavers should be shown based on which they consider is most appropriate depending on the skills and experiences of the participants. ▪ The facilitator should mention that in addition to the experiences and voices of Kenyan care leavers, there is a growing movement of care leavers globally who are sharing their own experiences and expressing their views on institutional care. The facilitator can cite the Kenya care leavers association as an example of other networks of care leavers that have been established and inspired by the work done in Kenya. ▪ The facilitator should highlight that the views and voices of care leavers are very important and care leavers should be included in policy and programme development. ▪ The facilitator should note any key issues or questions raised during the session on a flip chart for discussion later in the training or for follow-up post-training.
Job aids/ handouts used:	<ul style="list-style-type: none"> ▪ Care leaver video(s) from the training resource repository, or on-site care leavers who speak about their experiences, or a printed case study/story written by care leavers about their experiences

Session 4:	An Introduction to the Continuum of Care
Total time needed:	30 minutes
Session description:	Forms of alternative care will be explored based on the Guidelines. This session introduces participants to the various forms of alternative care that can be considered for children depending on their unique needs and circumstances. The circumstances under which each type of alternative care might be provided are explored. The continuum of care, including reunification to biological family (when determined to be in the best interests of the child), kinship care, Kafaalah, foster care, guardianship,

supported independent living, child-headed household, and adoption are explored and discussed. A critical review that allows participants to reflect on the strengths, limitations, and effects of the different alternative care options will also help to solidify understanding about the continuum of care.

Resources/job aids required:	<ul style="list-style-type: none"> ▪ Facilitator's Training Manual ▪ PowerPoint presentation/printed materials ▪ Guidelines for the Alternative Family Care of Children in Kenya (2014)
Materials required:	<ul style="list-style-type: none"> ▪ Projector and screen ▪ Flip chart and paper ▪ Markers ▪ Masking tape ▪ Post-It notes
Session methodology:	<ol style="list-style-type: none"> 1. The facilitator will present the PowerPoint slide/printed material that shows a visual diagram of the continuum of care. 2. The facilitator should talk briefly about each element of the continuum of care and explain that each one will be explored in great detail later in the training. 3. The facilitator should clarify that the provided forms of care are not sequential but selected using the principles of necessity and suitability/appropriateness. 4. The facilitator should mention why family-based alternatives are first, community-based are second, and institutional are last in terms of order on the continuum. 5. Participants will be given the opportunity to ask questions about the continuum of care and in particular encouraged to highlight what elements they are already familiar with, what elements they are unfamiliar with, and what elements are currently not functioning in Kenya.
Key messages/tips for the facilitator:	<ul style="list-style-type: none"> ▪ The facilitator should ensure that participants do not delve into each element of the continuum of care too deeply, as they will have the opportunity to do so later in the training. ▪ The facilitator should ask participants which elements of the continuum of care in Kenya they are familiar with. Which they are not? Which do they believe are very active, less active, inactive/non-existent? ▪ The facilitator should note any key issues or questions raised during the session on a flip chart for discussion later in the training or for follow-up post-training.

Session 5: Global Trends in Alternative Care	
Total time needed:	45 minutes
Session description:	This session exposes the participants to some of the most significant global initiatives that are making a significant impact into the move away from institutional care towards family-based care. The session highlights, through video clips, examples of alternative care programs and alternative care developments from around the world.
Resources/job aids required:	<ul style="list-style-type: none"> ▪ Facilitator's Training Manual ▪ PowerPoint presentation/printed materials ▪ Video from the training resource repository: "Child's i Foundation—Time for Global Action, Bloomberg"
Materials required:	<ul style="list-style-type: none"> ▪ Projector and screen ▪ Flip chart and paper ▪ Markers ▪ Masking tape ▪ Post-It notes
Session methodology:	<ol style="list-style-type: none"> 1. The facilitator will show the video: "Child's i Foundation—Time for Global Action, Bloomberg" from the training resource repository. 2. A plenary discussion will take place where participants can reflect on the video and share their thoughts. 3. The facilitator will highlight key global initiatives that are taking place to move away from institutional care and develop/implement family-based alternative care.
Key messages/tips for the facilitator:	<ul style="list-style-type: none"> ▪ It is important that the participants understand that there is a global movement in moving away from institutional care for children and focusing on preventing children being separated from their families by strengthening those families and their communities, reintegrating children back to their families, and finding family/community-based alternative care for children who cannot remain with or return to their families. ▪ The facilitator should note any key issues or questions raised during the session on a flip chart for discussion later in the training or for follow-up post-training.

SECTION 2: UNDERSTANDING THE LEGAL/POLICY FRAMEWORK AND DUTY BEARERS RELATED TO ALTERNATIVE CARE

Introduction

This section introduces participants to the legal and policy framework for alternative care. Participants will be introduced to international and regional policy framework that Kenya has ratified, as well as national frameworks with provisions that underline care for children who are separated from or without family care. Emphasis will be placed on the rights-based approach to child protection that underpins these frameworks. This section will also cover the basic understanding of the role of duty bearers engaged in alternative care at national and county government levels.

Learning Objectives

By the end of the section, participants will be able to:

1. Make reference to provisions within the relevant international, regional, and national child-rights legal frameworks, policies, and guidelines that support effective programming for alternative care
2. Understand roles and responsibility of different duty bearers in the provision and oversight of alternative care

Sessions

This section is an introduction to the section and the 3 (three) sessions.

Session 1: International Frameworks and Instruments

Session 2: National Legal, Policy, and Programmatic Frameworks for Alternative Care

Session 3: Duties and Responsibilities of Duty Bearers

It is estimated that this section will take 1 hour/10 minutes to complete.

Section 2 Introduction

Total time needed: 10 minutes

Resources required: ■ PowerPoint presentation/printed materials

Resources/job aids required: ■ Facilitator's Training Manual
 ■ PowerPoint presentation/printed materials
 ■ Video from the training resource repository: "Child's i Foundation—Time for Global Action, Bloomberg"

Materials required: ■ Projector and screen
 ■ Flip chart and paper
 ■ Markers
 ■ Masking tape
 ■ Post-It notes

Session methodology: 1. Using PowerPoint/printed materials the facilitator introduces the section and the overall learning objectives for the section.
 2. The facilitator explains that the section is split into sessions and what is in each session.
 3. The facilitator asks the participants if they understand the learning objectives of the section and answers any questions relating to the section.

Session 1: International Frameworks and Instruments

Total time needed: 20 minutes

Session description: While this session makes reference to various international conventions and treaties, major emphasis is placed on the rights of children as outlined in the UN Convention on the Rights of the Child (UNCRC), African Charter on the Rights and Welfare of the Child (ACRWC), the UN Guidelines on Alternative Care (2010), and the UN Convention on the Rights of Persons with Disabilities (CRPD). In this session, the capacity of participants to relate the legal provisions and principles as they apply to children in various circumstances will be enhanced.

Resources/job aids required: ■ Facilitator's Training Manual
 ■ Guidelines for the Alternative Family Care of Children in Kenya (2014)
 ■ PowerPoint presentation/printed materials

	<ul style="list-style-type: none"> Any additional handouts that the facilitator has identified during the preparation for the training
Materials required:	<ul style="list-style-type: none"> Projector and screen Flip chart and paper Markers Masking tape Post-It notes
Session methodology:	<ol style="list-style-type: none"> In a plenary session, the facilitator begins the session by asking the participants to highlight their awareness of any international child-rights legal and policy frameworks and instruments related to alternative care for children. The facilitator presents the PowerPoint slides/printed materials outlining the various international child-rights legal and policy frameworks and instruments related to alternative care for children, briefly explaining each. The facilitator highlights relevant articles that are deemed critical. The facilitator presents the PowerPoint slides/printed materials that displays key goals of the United Nations Guidelines for Alternative Care.
Key messages/tips for the facilitator:	<ul style="list-style-type: none"> The facilitator can provide the participants with any updated information that is available, such as the UN General Assembly declaration (2019) or other relevant updates. The facilitator should investigate and review these beforehand in order to be prepared. The facilitator should highlight the importance of the UNCRC and the UN Guidelines for Alternative Care, since these are the fundamental international instruments that inform Kenyan policies and frameworks. The facilitator should ensure that participants understand the principles of necessity and suitability/appropriateness and how all other principles are pinned on these two. The facilitator may want to ask the participants which countries have not yet signed the UNCRC (South Sudan and the United States of America). The facilitator should note any key issues or questions raised during the session on a flip chart for discussion later in the training or for follow-up post-training.

Session 2:	National Legal, Policy, and Programmatic Frameworks for Alternative Care
Total time needed:	30 minutes
Session description:	Participants will be presented with an overview of the national legal frameworks and their significance to the provision of alternative care in Kenya. As Kenya has ratified both the UNCRC and the ACRWC, participants will learn how these frameworks are operationalized through the Children Act (2001) and The Guidelines, which provide guidance on the alternative care of children including matters concerning foster care, adoption, guardianship, and the administration/regulation of CCIs. During this session, participants will have the opportunity to assess the national provisions against the international ones.
Resources/job aids required:	<ul style="list-style-type: none"> ▪ Facilitator's Training Manual ▪ PowerPoint presentation/printed materials ▪ The Constitution of Kenya (2010) ▪ Guidelines for the Alternative Family Care of Children in Kenya (2014) ▪ The National Policy of Orphans and Vulnerable Children (OVC) ▪ The National Plan of Action for Children in Kenya (2015–2022) ▪ Disability Act (2003)
Materials required:	<ul style="list-style-type: none"> ▪ Projector and screen ▪ Flip chart and paper ▪ Markers ▪ Masking tape ▪ Post-It notes
Session methodology:	<ol style="list-style-type: none"> 1. The facilitator begins with a plenary session by asking the participants to highlight their awareness of national legal, policy, and programmatic frameworks for alternative care. 2. The facilitator presents the PowerPoint slides/printed materials outlining the various national legal, policy, and programmatic frameworks for alternative care for children, briefly explaining each one. 3. Participants are then divided into small groups to discuss the general principles in the provision of alternative care services and determination of the most appropriate form of alternative care (15 minutes). 4. In the plenary discussion the participants will be asked to express their views on how successful the national laws, policies, and programmatic frameworks have been implemented.

Key messages/ tips for the facilitator:	<ul style="list-style-type: none"> ▪ It is common in those countries that are starting (or in the process) to reform their alternative care systems that the “practices” have not yet caught up with the legislation and that “implementation” may be lacking. However, it is important for the facilitator to remain positive and concentrate on the positive movements to improve the care system and implement the laws. ▪ Areas of the legal framework which are struggling to be implemented should be seen as an opportunity rather than an obstacle. ▪ The facilitator should highlight that all the work relating to alternative care should be done within the legal frameworks that are provided. ▪ Facilitators may need to be mindful that the Children Act (2001) does not provide for direct foster care placement but instead utilizes CCI’s; there is, however, a provision where a child can be committed to a fit person. The facilitator should note that the Constitution supersedes the Children Act (2001) and therefore, if it is in a child’s best interest, s/he can be placed into foster care without first being placed into a CCI. ▪ The facilitator should remind participants that the Children’s Bill (2018) has been drafted and addresses some of the gaps in providing alternative family care. ▪ The facilitator should note any key issues or questions raised during the session on a flip chart for discussion later in the training or for follow-up post-training.
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Session 3: Duties and Responsibilities of Duty Bearers	
Total time needed:	30 minutes
Session description:	In this session the roles and responsibilities of the stakeholders, both at national and county levels, will be outlined. Participants will have the opportunity to discuss the realities of the roles and share experiences.
Resources/job aids required:	<ul style="list-style-type: none"> ▪ Facilitator’s Training Manual ▪ PowerPoint presentation/printed materials ▪ Guidelines for the Alternative Family Care of children in Kenya
Materials required:	<ul style="list-style-type: none"> ▪ Projector and screen ▪ Flip chart and paper ▪ Markers ▪ Masking tape ▪ Post-It notes

Session methodology:	<ol style="list-style-type: none"> 1. The facilitator begins the session by asking the participants to highlight their own understanding of who the stakeholders are at a national, county, and sub-county level and who is implementing alternative care. 2. The facilitator presents the PowerPoint slides/printed materials outlining the stakeholders at the national, county, and sub-county levels. 3. In a plenary discussion the participants will be asked to express their views and give examples on the effectiveness of duty bearers in carrying out their mandatory responsibilities in the implementation of alternative care. Ask: <ol style="list-style-type: none"> a. Are there specific functions that are working well and what are the reasons, in the participants' opinion? b. Are there specific functions that are not working well and what are the reasons, in the participants' opinion?
Key messages/tips for the facilitator:	<ul style="list-style-type: none"> ▪ The facilitator should ensure that participants are aware that this session concentrates on the “overall” roles and responsibilities of child protection duty bearers and not get too detailed in terms of the continuum of care, which will come later in the training. ▪ The facilitator should highlight the need for collaboration of duty bearers at all levels in order to be effective. ▪ The facilitator should ensure that the discussion does not descend into personal criticisms of individuals but ensure that the discussion remains cordial and concentrates on “functions” rather than individuals (hint: make use of job titles within a system rather than people's names). ▪ The facilitator should highlight that there is a major “window of opportunity” in Kenya for reforming and improving the care system, which includes ensuring people are aware of their role and responsibilities in the care system. ▪ The facilitator should note any key issues or questions raised during the session on a flip chart for discussion later in the training or for follow-up post-training.

SECTION 3: FOUNDATIONAL PRINCIPLES IN ALTERNATIVE CARE

This session is concerned with the foundational principles to ensure that children have their needs met for care, protection, and support.

Learning Objectives

By the end of the section, training participants will be able to:

1. Understand the general principles in the provision of alternative care services
2. Understand the core principles of necessity and appropriateness in delivering alternative care
3. Understand the concept of family strengthening
4. Understand and appreciate family-strengthening alternative care
5. Be equipped with the requisite knowledge to strengthen families and prevent family separation

Sessions

This section is made up of an introduction to the section and 3 (three) sessions.

Session 1: Foundational Child Protection Principles

Session 2: Foundational Principles Underlying the Guidelines

Session 3: The Principles of Necessity and Appropriateness in Alternative Care

It is estimated this section will take 1 hour/20 minutes to complete.

Section 3 Introduction	
Total time needed:	5 minutes
Resources required:	▪ PowerPoint presentation/printed materials
Session methodology:	<ol style="list-style-type: none">1. Using PowerPoint/printed materials, the facilitator introduces the section and what the overall learning objectives are for the section.2. The facilitator explains that the section is split into sessions and what is in each session.3. The facilitator asks the participants if they understand the learning objectives of the section and answers any questions relating to the section.

Session 1:	Foundational Child Protection Principles
Total time needed:	40 minutes
Session description:	Within this session, participants will be introduced to the key child protection principles that underpin children entering alternative care.
Resources/job aids required:	<ul style="list-style-type: none"> ▪ Facilitator's Training Manual ▪ PowerPoint presentation/printed materials ▪ Handouts on the various frameworks on the rights of the children
Materials required:	<ul style="list-style-type: none"> ▪ Projector and screen ▪ Flip chart and paper ▪ Markers ▪ Masking tape ▪ Post-It notes
Session methodology:	<ol style="list-style-type: none"> 1. The facilitator presents the PowerPoint slides/printed materials outlining the foundational child protection principles. 2. The participants are provided with the opportunity to discuss and explain their understanding of the child protection principles and how these principles apply to alternative care. 3. The facilitator should prompt a discussion about how these child protection principles are perceived in communities and how they can be communicated more effectively so that communities and alternative care duty bearers understand and agree on the principles.
Key messages/tips for the facilitator:	<ul style="list-style-type: none"> ▪ It is important that participants are clear on the principles and what they mean, since they are critical in considering alternative care for children. ▪ The facilitator should note any key issues or questions raised during the session on a flip chart for discussion later in the training or for follow-up post-training.

Session 2: Foundational Principles Underlying the Guidelines	
Total time needed:	40 minutes
Session description:	Within this session, participants will be introduced to the foundational principles that underpin the implementation of the Guidelines, including the guiding principles of the UNCRC: 1) definition of the child (Article 1); 2) non-discrimination, highlighting the rights of children with disabilities (Article 2); 3) best interests of the child (Article 3); 4) right to life, survival, and development (Article 6); and 5) respect for the views of the child (Article 12).
Resources/job aids required:	<ul style="list-style-type: none"> ▪ Facilitator's Training Manual ▪ PowerPoint presentation/printed materials ▪ Handouts on the various frameworks on the rights of the children ▪ Guidelines for the Alternative Family Care of Children in Kenya (2014) ▪ The Children Act 2001/the Children Bill 2018
Materials required:	<ul style="list-style-type: none"> ▪ Projector and screen ▪ Flip chart and paper ▪ Markers ▪ Masking tape ▪ Post-It notes
Session methodology:	<ol style="list-style-type: none"> 1. The facilitator presents the PowerPoint slides/printed materials outlining the foundational principles underlying the Guidelines, explaining that these principles underpin everything in the Guidelines. 2. The participants are provided with the opportunity to discuss and explain their understanding of the foundational principles using <i>Chapter 3: General Principles in the Provision of Alternative Care Services</i> in the Guidelines. 3. Participants can ask for clarification if they are still unsure or do not understand some of the principles.
Key messages/tips for the facilitator:	<ul style="list-style-type: none"> ▪ It is important that participants are clear on the principles and what they mean, since they are critical to understand and apply throughout the training. ▪ The facilitators should ensure that participants understand the two core principles and are able to distinguish them from other principles that will be subsequently discussed (such as in case management). ▪ The facilitator should note any key issues or questions raised during the session on a flip chart for discussion later in the training or for follow-up post-training.

Session 3: The Principles of Necessity and Suitability in Alternative Care	
Total time needed:	40 minutes
Session description:	The session will highlight the two-core principle of necessity and suitability/appropriateness that are crucial in implementing and monitoring a national alternative care system. This principle helps ensure that children are not unnecessarily separated from their families; however, if alternative care is deemed suitable/appropriate, the care option meets minimum standards.
Resources/job aids required:	<ul style="list-style-type: none"> ▪ Facilitator's Training Manual ▪ PowerPoint presentation/printed materials ▪ Handout 4: from the training repository: <i>Applying the principles of necessity and suitability</i> ▪ Case studies to practice applying the two principles
Materials required:	<ul style="list-style-type: none"> ▪ Projector and screen ▪ Flip chart and paper ▪ Markers ▪ Masking tape ▪ Post-It notes
Session methodology:	<ol style="list-style-type: none"> 1. The facilitator presents the PowerPoint slides/printed materials outlining the principles of necessity and suitability/appropriateness in alternative care. 2. The facilitator provides the participants with Handout 4 (<i>Applying the principles of necessity and suitability</i>) explaining that it will help them later in the training when making decisions. 3. The participants are provided with the opportunity to comment on the principles of necessity and suitability/appropriateness in alternative care and ask for clarification if they are still unsure. 4. For wider discussion, the facilitator will ask participants for their own examples of "necessity" and "suitability/appropriateness" in alternative care.
Key messages/tips for the facilitator:	<ul style="list-style-type: none"> ▪ It is important that participants are clear on the principles and what they mean, since they are critical to understand and apply throughout the training. ▪ The facilitator should note any key issues or questions raised during the session on a flip chart for discussion later in the training or for follow-up post-training.

SECTION 4: FOUNDATIONAL APPROACHES IN ALTERNATIVE CARE

This section outlines foundational approaches required in the implementation of the Guidelines, including family strengthening/prevention of separation, gatekeeping mechanisms, and coordination mechanisms.

Learning Objectives

By the end of the section, participants will be able to:

1. Understand the definition and role of prevention (i.e., family preservation) and what options are available to support families to remain together
2. Understand the role of gatekeeping and the formal and informal “gatekeeping” mechanisms that are available and can be strengthened
3. Understand the concepts, key principles, and sequencing of case management and its importance/ relevance in the provision of alternative care services
4. Understand how case management is critical in supporting prevention/family strengthening, family reunification for separated children, and placement of children in alternative care

Sessions

This section is made up of an introduction to the section and 4 (four) sessions.

Session 1: Family Strengthening and Prevention of Separation

Session 2: Gatekeeping and Gatekeeping Mechanisms

Session 3: Introduction to Case Management

Session 4: Case Management in Reintegration and Alternative Care—Case Studies

It is estimated this section will take 2 hours to complete.

Section Introduction	
Total time needed:	5 minutes
Resources required:	▪ PowerPoint presentation/printed materials
Session methodology:	<ol style="list-style-type: none">1. Using PowerPoint/printed materials, the facilitator introduces the section and the overall learning objectives for the section.2. The facilitator explains that the section is split into sessions and what is in each session.3. The facilitator asks the participants if they understand the learning objectives of the section and answers any questions relating to the section.

Session 1: Family Strengthening and Prevention of Separation	
Total time needed:	60 minutes
Session description:	<p>This session builds upon the premise that underpins the Guidelines that every effort should be made at the family and community levels to avoid the need for a child to enter alternative care. It builds upon the evidence that once a child has been brought into care it is likely that biological family connections will be weakened or lost. It examines a range of common reasons for family breakdowns that lead to children needing care. Participants will explore a range of family strengthening or preventive approaches at individual the family and community levels and look at the role of governments, donors, community, faith-based/non-governmental organizations (NGOs) in providing an infrastructure to support the most vulnerable families.</p>
Resources/job aids required:	<ul style="list-style-type: none"> ▪ Facilitator’s Training Manual ▪ PowerPoint presentation/printed materials ▪ Session videos ▪ Case studies: work in groups with guidance and group presentations
Materials required:	<ul style="list-style-type: none"> ▪ Projector and screen ▪ Flip chart and paper ▪ Markers ▪ Masking tape ▪ Post-It notes
Session methodology:	<ol style="list-style-type: none"> 1. The facilitator introduces this session with several videos from the training resource repository: <ol style="list-style-type: none"> a. <i>Gorgeous—the impact of separation on children</i> b. <i>Strengthening families</i> c. <i>Preventing separation</i> 2. The facilitator presents the PowerPoint slides/printed materials giving a definition of prevention of family-child separation. 3. The facilitator presents the PowerPoint slides/printed materials outlining the various family support and prevention elements that can be used. 4. In a plenary discussion, the facilitator asks the participants to comment on the videos they have seen and discuss their awareness of various family support programmes/care arrangements.
Key messages/tips for the facilitator	<ul style="list-style-type: none"> ▪ The facilitator should prompt the participants to explore and emphasise traditional and informal care arrangements in families and communities that happen naturally, e.g., where children are left with aunts or other

relatives/community members while their parent(s) are in hospital, travelling for burials, or are working/studying in another town/city.

- Highlight that these informal care arrangements are being disrupted by the presence of institutions which may appear “easier” than the traditional family and community arrangements.
- The facilitator should note any key issues or questions raised during the session on a flip chart for discussion later in the training or for follow-up post-training.

Session 2: Gatekeeping and Gatekeeping Mechanisms

Total time needed: 30 minutes

Session description: To further support prevention of child-family separation (Session 1), this session explores the definition of gatekeeping with an emphasis on the importance of working collaboratively with different duty bearers at the community level and highlighting their roles and responsibilities in gatekeeping. Participants will explore and identify formal/informal key gatekeeping mechanisms (people, organizations, structures) at the community level.

Resources/job aids required:

- Facilitator’s Training Manual
- PowerPoint presentation/printed materials
- Session videos
- Case studies: work in groups (with guidance) and group presentations

Materials required:

- Projector and screen
- Flip chart and paper
- Markers
- Masking tape
- Post-It notes

Session methodology:

1. The facilitator introduces this session by presenting a PowerPoint slide/printed material displaying the graphic for “continuum of care for orphans and other vulnerable children,” which displays the gatekeeping function in the centre of the diagram.
2. Through a plenary discussion, the facilitator should help the participants explain their understanding of gatekeeping and remind them of its definition as per the handout from an earlier session.
3. The facilitator asks the participants to highlight the gatekeeping structures in communities that they are aware of and how well—or not—

	those functions are operating to protect children and prevent unnecessary separation of children from their families.
Key messages/ tips for the facilitator:	<ul style="list-style-type: none"> ▪ The participants may say that gatekeeping does not yet exist in Kenya. The facilitator should explain that “gatekeeping” is the act of decision-making—even if Kenya does not have a formal system to date, there are still care decisions being made at all levels (refer to the previous session, which listed traditional/informal arrangements that are part of gatekeeping; e.g., children remaining within a family/community system). ▪ The facilitator should note any key issues or questions raised during the session on a flip chart for discussion later in the training or for follow-up post-training.

Session 3: Introduction to Case Management	
Total time needed:	20 minutes
Session description:	This session outlines case management principles and processes needed when working with vulnerable families, reintegrating children to their families, or placing children into alternative care (according to the continuum of care).
Resources/job aids required:	<ul style="list-style-type: none"> ▪ Facilitator’s Training Manual ▪ Guidelines for the Alternative Family Care of Children in Kenya (2014) ▪ Child Protection Case Management and Referral Guidelines (2019) ▪ Case Management for Reintegration Package (2019) ▪ PowerPoint presentation/printed materials ▪ Session videos
Materials required:	<ul style="list-style-type: none"> ▪ Projector and screen ▪ Flip chart and paper ▪ Markers ▪ Masking tape ▪ Post-It notes
Session methodology:	<ol style="list-style-type: none"> 1. The facilitator begins the session by presenting a PowerPoint slide/printed material with the definition of case management entitled “What is case management?” 2. The facilitator presents the PowerPoint slides/printed materials of the case management process and walks through the steps.

	3. In a plenary discussion the participants should share their experiences of case management and raise any concerns about the case management approach.
Key messages/ tips for the facilitator:	<ul style="list-style-type: none"> ▪ The facilitator should emphasize that each step of the case management process builds on the previous step and sets the foundation for the next step (i.e., it is a sequential process that falls apart if any step is skipped). ▪ The facilitator should make it clear to the participants that—although this training concentrates specifically on case management in alternative care—the case management approach can and should be applied to child protection cases outside of alternative care. ▪ Case management can often be a resource intensive approach; however, the facilitator should encourage the participants that the Kenyan case management guidelines are practical, and participants should obtain further training on case management. ▪ The facilitator should note any key issues or questions raised during the session on a flip chart for discussion later in the training or for follow-up post-training.

Session 4: Case Management in Reintegration and Alternative Care—Case Studies	
Total time needed:	55 minutes
Session description:	This session demonstrates—through case studies—how case management can be used in different scenarios across the continuum of care including: reintegration, family tracing, family assessment, reintegration of children back to their parent(s), kinship care, foster care, adoption, children in child-headed households, and children in need of temporary residential care. The session highlights case management as a process made up of several steps that are required to be successful. The importance of case management procedures is to ensure child safety and protection before, during, and after placement—even within their own families.
Resources/job aids required:	<ul style="list-style-type: none"> ▪ Facilitator’s Training Manual ▪ Guidelines for the Alternative Family Care of Children in Kenya (2014) ▪ Child Protection Case Management and Referral Guidelines (2019) ▪ PowerPoint presentation/printed materials ▪ Session videos ▪ Case studies: work in groups (with guidance) and group presentations

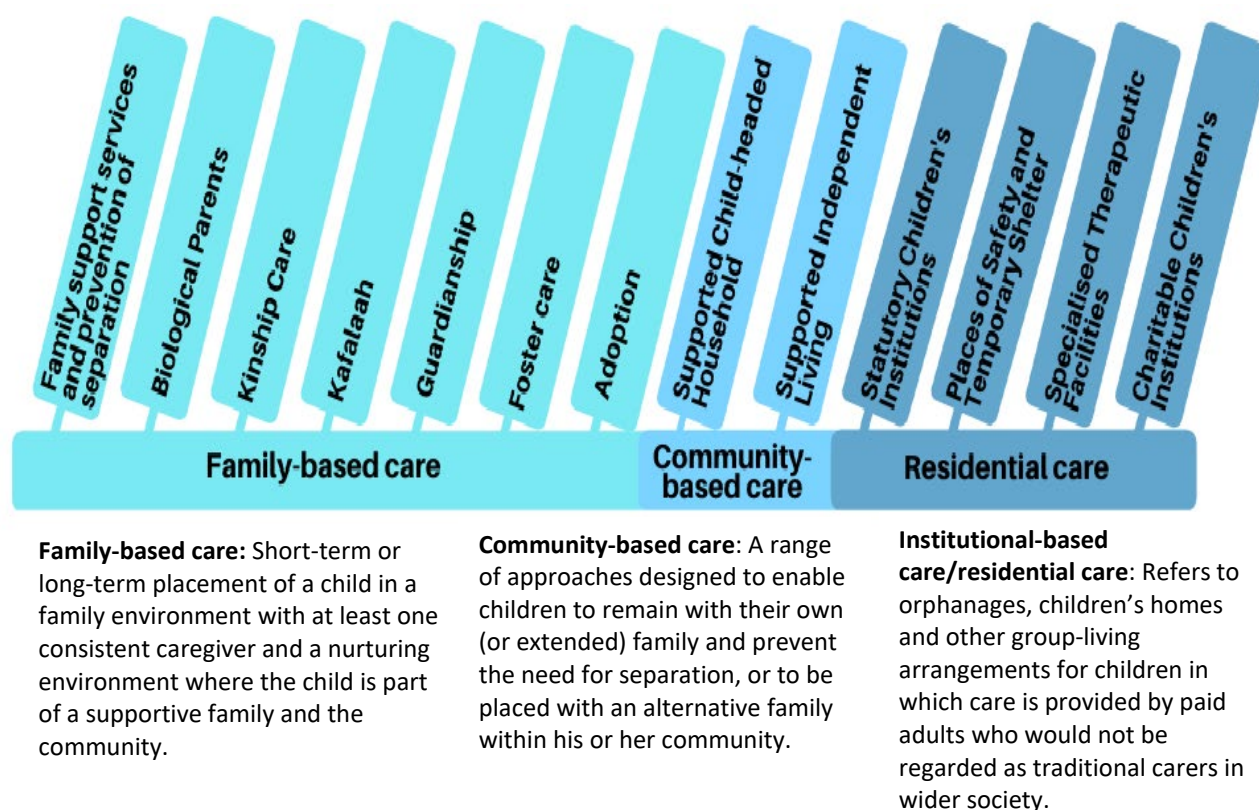
Materials required:	<ul style="list-style-type: none">▪ Projector and screen▪ Flip chart and paper▪ Markers▪ Masking tape▪ Post-It notes
Session methodology:	<ol style="list-style-type: none">1. The facilitator begins the session by presenting a PowerPoint slide/printed material with the definition of “case management in reintegration,” outlining the key steps to follow.2. The facilitator splits the participants in to groups and provides each group with a selection of case studies.3. Using the case studies, the groups will outline the simple case management steps (recording them on a flip chart) that are required in each case to provide a pathway for a child to be successfully reintegrated or placed into alternative care (temporarily or permanently).4. Each group will present their group work and all participants can comment and ask questions in the plenary discussion.
Key messages/tips for the facilitator:	<ul style="list-style-type: none">▪ Before the group work begins, the facilitator should remind the participants that the approach they need to take in considering the cases and necessary actions should include the principles outlined earlier in the training.▪ It is particularly important to highlight child/family assessment and preparation, aftercare, and monitoring—which are the steps least understood and most easily forgotten.▪ The facilitator should note any key issues or questions raised during the session on a flip chart for discussion later in the training or for follow-up post-training.

SECTION 5: THE CONTINUUM OF CARE

Introduction

This section covers the operationalization of family-based care as an alternative to residential care. It sets out the process and responsibilities of duty bearers at every stage of the continuum of care (Figure 1).⁵ It provides guidelines for good practice in relation to each of the stages of the continuum of care and develops an understanding of quality standards for all types of alternative care.

Figure 1: Continuum of Care



Learning Objectives

At the end of this section participants will:

1. Understand the continuum of care and the different types of care for children
2. Understand what is required to implement each type of care
3. Understand the roles and responsibilities of all key duty bearers in the delivery of different types of care
4. Be aware of the risks and challenges of each type of care
5. Identify ways to strengthen the types of care in the continuum

Sessions

⁵Diagram provided by Michelle Oliel, Stahili Foundation (<https://www.stahili.org>).

This section is made up of an introduction to the section and 14 (fourteen) sessions.

Session 1: Biological Parental Care (Reunification/Reintegration)

Session 2: Kinship Care

Session 3: Kafaalah

Session 4: Guardianship

Session 5: Foster Care

Session 6: Child-Headed Households

Session 7: Supported Independent Living

Session 8: Residential Statutory Institutions

Session 9: Charitable Children's Institutions

Session 10: Emergency (temporary) Shelters

Session 11: Specialized Therapeutic Facilities

Session 12: Domestic Adoption

Session 13: Intercountry Adoption

Session 14: Other Forms of Community-Based Care

It is estimated that this section will take 5–6 hours (one day) to complete.

Section Introduction	
Total time needed:	5 minutes
Resources required:	<ul style="list-style-type: none"> PowerPoint presentation/printed materials
Session methodology:	<ol style="list-style-type: none"> Using PowerPoint presentation/printed materials, the facilitator introduces the section and what the overall learning objectives are for the section. The facilitator explains that the section is split into sessions and what each session consists of using the continuum of care diagram as a visual aid. The facilitator asks the participants if they understand the learning objectives of the section and answers any questions relating to the section. The continuum of care is designed to be done in groups, where participants are assigned two sessions/forms of care each to discuss and note their discussion on a flip chart. The group work discussions should take about 30 minutes each—up to one hour for the assigned two sessions. Once completed, the facilitator asks for groups to begin their presentations (each presentation should take no more than 15 minutes, including question/answer time). With each group having two presentations, it should take them no more than 30 minutes total to

present their feedback. Alternatively, presentations can be made after the first 30-minute discussion for one form of care for each group, and then regroup to do the second form of care assigned—and again do their presentation.

5. The facilitator should form a minimum of seven groups and assign each group two sessions/forms of care.

Session 1:	Biological Parental Care
Total time: needed:	30 minutes
Session description:	The session will help participants understand the importance of preserving care in biological families and working to reunify children to families when they have been separated. There will be a distinction between reunification and reintegration. The session outlines the practical and legal process of reunification of a separated child back to his or her parent(s). The session also outlines the appropriate steps needed for healthy/safe reunification and to ensure that longer-term reintegration is successful, including the roles and responsibilities that all duty bearers play in the process— including courts, government, family, community, and education institutions.
Resources/job aids required:	<ul style="list-style-type: none"> ▪ Facilitator’s Training Manual ▪ Guidelines for the Alternative Family Care of Children in Kenya (2014) ▪ PowerPoint presentation/printed materials ▪ Session videos
Materials required:	<ul style="list-style-type: none"> ▪ Projector and screen ▪ Flip chart and paper ▪ Markers ▪ Masking tape ▪ Post-It notes
Session methodology:	<ol style="list-style-type: none"> 1. Presentation of the definition(s) 2. Video/case studies 3. Group work—participants are split into groups (minimum 2 groups) and spend 30 minutes exploring the following and using a flip chart to answer/record salient points: <ul style="list-style-type: none"> ▪ <i>What is biological parental care—is it just the parent(s)? Who else provides parental care to children?</i> ▪ <i>How do we help keep children in their families and prevent removal of children from their families?</i> ▪ <i>How do we decide when it is not in a child’s best interest to remain in their family?</i> ▪ <i>When is it appropriate to reintegrate a child into biological family?</i> ▪ <i>How do we reintegrate children back to their families?</i> ▪ <i>What are benefits of reunification of a child back to his or her parent(s)?</i> ▪ <i>What are the risks and challenges of reintegrating a child back to his or her parent(s)?</i> ▪ <i>What process is involved in reintegration?</i>

	<ul style="list-style-type: none"> ▪ <i>What legal and policy instruments support reintegration?</i> ▪ <i>Who are the key duty bearers and what are their responsibilities?</i> ▪ <i>What documentation is required?</i>
	4. Group feedback—each group briefly presents their findings
	5. Plenary discussion—discuss the findings and issues raised during the session
Key messages/ tips for the facilitator:	<ul style="list-style-type: none"> ▪ Groups should use the Guidelines and the Children Act (2001) to help with their discussions. ▪ The facilitator should note key issues being raised for further discussion later in the training and note any issues or questions for follow-up post-training. ▪ Participants should be encouraged to share their personal relevant experiences.

Session 2: Kinship Care	
Total time needed:	30 minutes
Session description:	This session builds upon the definitions of kinship care and provides guidance on the processes required for the implementation of successful kinship care placement.
Resources / job aids required:	<ul style="list-style-type: none"> ▪ Facilitator's Training Manual ▪ Guidelines for the Alternative Family Care of Children in Kenya (2014) ▪ PowerPoint presentation/printed materials ▪ Session videos
Materials required:	<ul style="list-style-type: none"> ▪ Projector and screen ▪ Flip chart and paper ▪ Markers ▪ Masking tape ▪ Post-It notes
Session methodology:	<ol style="list-style-type: none"> 1. Presentation of the definition(s) 2. Video/case studies 3. Group work—participants are split into groups and spend 30 minutes exploring the following and using a flip chart to answer/record salient points: <ul style="list-style-type: none"> ▪ <i>What is kinship care and what is the difference between “formal” and “informal” kinship care?</i> ▪ <i>When is kinship care appropriate?</i>

- *What categories of children are eligible for kinship care?*
 - *What legal and policy instruments support kinship care?*
 - *What are the requirements to be a kinship caregiver?*
 - *What are benefits of kinship care?*
 - *What are the risks and challenges of kinship care?*
 - *What is the process of kinship care placements?*
 - *What documentation is required?*
 - *Who are the key duty bearers and what are their responsibilities?*
4. Group feedback—each group briefly presents their findings
 5. Plenary discussion—discuss the findings and issues raised during the session

- Key messages/ tips for the facilitator:
- Groups should use the Guidelines for the Alternative Family Care of Children in Kenya (2014) and the Children Act (2001) to help with their discussions.
 - The facilitator should note key issues being raised for further discussion later in the training and also note any issues or questions for follow-up post-training.
 - Participants should be encouraged to share their personal relevant experiences.

Session 3: Kafaalah	
Total time needed:	30 minutes
Session description:	This session builds upon the definitions of the Islamic model of alternative childcare in which a person or family voluntarily commits himself/herself to sponsor and care for a child deprived of family care. The session offers guidance on the processes required for the implementation of successful kafaalah placements.
Resources/job aids required:	<ul style="list-style-type: none"> ▪ Facilitator's Training Manual ▪ Guidelines for the Alternative Family Care of Children in Kenya (2014) ▪ PowerPoint presentation/printed materials ▪ Session videos
Materials required:	<ul style="list-style-type: none"> ▪ Projector and screen ▪ Flip chart and paper ▪ Markers ▪ Masking tape ▪ Post-It notes

Session methodology:	<ol style="list-style-type: none"> 1. Presentation of the definition(s) 2. Video/case studies 3. Group work—participants are split into groups and spend 30 minutes exploring the following and using a flip chart to answer/record salient points: <ul style="list-style-type: none"> ▪ <i>What is Kafaalah?</i> ▪ <i>When is Kafaalah care appropriate?</i> ▪ <i>What categories of children are eligible for Kafaalah?</i> ▪ <i>What legal and policy instruments support Kafaalah?</i> ▪ <i>What are requirements to be a kafil</i> ▪ <i>What are benefits of Kafaalah?</i> ▪ <i>What are the risks and challenges of Kafaalah?</i> ▪ <i>What documentation is required?</i> ▪ <i>Who are the key duty bearers and what are their responsibilities?</i> ▪ <i>What is the difference between Kafaalah and other forms of care?</i> 4. Group feedback—each group briefly presents their findings 5. Plenary discussion—discuss the findings and issues raised during the session
Key messages/tips for the facilitator:	<ul style="list-style-type: none"> ▪ Groups should use the Guidelines and the Children Act (2001) to help with their discussions. ▪ The facilitator should note key issues being raised for further discussion later in the training and note any issues or questions for follow-up post training. ▪ Participants should be encouraged to share their personal relevant experiences.

Session 4: Guardianship	
Total time needed:	30 minutes
Session description:	This session builds upon the definitions of guardianship placement and offers guidance on the processes required for the implementation of successful guardianship placement.
Resources/job aids required:	<ul style="list-style-type: none"> ▪ Facilitator's Training Manual ▪ Guidelines for the Alternative Family Care of Children in Kenya (2014) ▪ PowerPoint presentation/printed materials ▪ Session videos

Materials required:	<ul style="list-style-type: none"> ▪ Projector and screen ▪ Flip chart and paper ▪ Markers ▪ Masking tape ▪ Post-It notes
Session methodology:	<ol style="list-style-type: none"> 1. Presentation of the definition(s) 2. Video/case studies 3. Group work—participants are split into groups and spend 30 minutes exploring the following and using a flip chart to answer/record salient points: <ul style="list-style-type: none"> ▪ <i>What is guardianship?</i> ▪ <i>What are different types of guardianship?</i> ▪ <i>When is guardianship appropriate?</i> ▪ <i>What categories of children are eligible for guardianship?</i> ▪ <i>What legal and policy instruments support guardianship?</i> ▪ <i>What are requirements to be a guardian?</i> ▪ <i>What are benefits of guardianship?</i> ▪ <i>What are the risks and challenges of guardianship?</i> ▪ <i>What documentation is required for guardianship?</i> ▪ <i>Who are the key duty bearers and what are their responsibilities?</i> 4. Group feedback—each group briefly presents their findings 5. Plenary discussion—discuss the findings and issues raised during the session
Key messages/tips for the facilitator:	<ul style="list-style-type: none"> ▪ Groups should use the Guidelines and the Children Act (2001) to help with their discussions. ▪ The facilitator should note key issues being raised for further discussion later in the training and note any issues or questions that need follow-up post training. ▪ Participants should be encouraged to share their personal relevant experiences.
Job aids/handouts used:	<ul style="list-style-type: none"> ▪ Session videos ▪ Case studies ▪ Guidelines for the Alternative Family Care of Children in Kenya (2014)

Session 5: Foster Care	
Total time needed:	30 minutes
Session description:	This session builds upon the definitions of foster care and offers guidance on the processes required for the implementation of successful foster care placement.
Resources/job aids required:	<ul style="list-style-type: none"> ▪ Facilitator's Training Manual ▪ Guidelines for the Alternative Family Care of Children in Kenya (2014) ▪ PowerPoint presentation/printed materials ▪ Session videos
Materials required:	<ul style="list-style-type: none"> ▪ Projector and screen ▪ Flip chart and paper ▪ Markers ▪ Masking tape ▪ Post-It notes
Session methodology:	<ol style="list-style-type: none"> 1. Presentation of the definition(s) 2. Video/case studies 3. Group work—participants are split into groups (minimum 2 groups) and spend 30 minutes exploring the following and using a flip chart to answer/record salient points: <ul style="list-style-type: none"> ▪ <i>What is foster care?</i> ▪ <i>What are the different types of foster care?</i> ▪ <i>When is foster care appropriate/not appropriate?</i> ▪ <i>What legal and policy instruments support foster care?</i> ▪ <i>What are the qualifications to be a foster carer?</i> ▪ <i>What are the steps for foster care placements?</i> ▪ <i>What are benefits of foster care?</i> ▪ <i>What are the risks and challenges of foster care?</i> ▪ <i>What documentation is required?</i> ▪ <i>Who are the key duty bearers and what are their responsibilities?</i> 4. Group feedback—each group briefly presents their findings 5. Plenary discussion—discuss the findings and issues raised during the session
Key messages/tips for the facilitator:	<ul style="list-style-type: none"> ▪ Groups should use the Guidelines and the Children Act (2001) to help with their discussions. ▪ The facilitator should note key issues being raised for further discussion later in the training and note any issues or questions that need follow-up post-training.

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- Participants should be encouraged to share their personal relevant experiences.
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Session 6: Child-Headed Households	
Total time needed:	30 minutes
Session description:	This session explores the definition and role of child-headed households and explores how to monitor and support these care arrangements.
Resources/job aids required:	<ul style="list-style-type: none"> ▪ Facilitator's Training Manual ▪ Guidelines for the Alternative Family Care of Children in Kenya (2014) ▪ PowerPoint presentation/printed materials ▪ Session videos
Materials required:	<ul style="list-style-type: none"> ▪ Projector and screen ▪ Flip chart and paper ▪ Markers ▪ Masking tape ▪ Post-It notes
Session methodology:	<ol style="list-style-type: none"> 1. Presentation of the definition(s) 2. Video/case studies 3. Group work—participants are split into groups and spend 30 minutes exploring the following and using a flip chart to answer/record salient points: <ul style="list-style-type: none"> ▪ <i>What is a child-headed household?</i> ▪ <i>What are the categories of children who usually reside in a child-headed household?</i> ▪ <i>When is a child-headed household an appropriate form of care?</i> ▪ <i>What legal and policy instruments support child-headed households?</i> ▪ <i>What are benefits of child-headed households?</i> ▪ <i>What are the risks and challenges of child-headed households?</i> ▪ <i>How can we support child-headed households, so they are safe and successful?</i> ▪ <i>What is or should be the process of appointing a guardian/mentor for child-headed households?</i> ▪ <i>What documentation is required?</i> ▪ <i>Who are the key duty bearers and what are their responsibilities?</i> 4. Group feedback—each group briefly presents their findings

	5. Plenary discussion—discuss the findings and issues raised during the session
Key messages/tips for the facilitator:	<ul style="list-style-type: none"> ▪ Groups should use the Guidelines and the Children Act (2001) to help with their discussions. ▪ The facilitator should note that there is no legal provision for Child-Headed Households in Kenyan law. ▪ The facilitator should note key issues being raised for further discussion later in the training and note any issues or questions that need follow-up post-training. ▪ Participants should be encouraged to share their personal relevant experiences.

Session 7: Supported Independent Living	
Total time needed:	30 minutes
Session description:	This session helps participants understand supported independent living and provides guidance on how to support children and young adults transitioning from out-of-home care or living on the streets to adulthood by implementing supported independent living interventions.
Resources/job aids required:	<ul style="list-style-type: none"> ▪ Facilitator's Training Manual ▪ Guidelines for the Alternative Family Care of Children in Kenya (2014) ▪ PowerPoint presentation/printed materials ▪ Session videos
Materials required:	<ul style="list-style-type: none"> ▪ Projector and screen ▪ Flip chart and paper ▪ Markers ▪ Masking tape ▪ Post-It notes
Session methodology:	<ol style="list-style-type: none"> 1. Presentation of the definition(s) 2. Video/case studies 3. Group work—participants are split into groups and spend 30 minutes exploring the following and using a flip chart to answer/record salient points: <ul style="list-style-type: none"> ▪ <i>What is supported independent living?</i> ▪ <i>When is supported independent living appropriate?</i> ▪ <i>What legal/policy instruments are in place for supported independent living?</i> ▪ <i>What are benefits of supported independent living?</i> ▪ <i>What are the risks and challenges of supported independent living?</i>

	<ul style="list-style-type: none"> ▪ <i>How can we support individuals/groups transitioning to independent living?</i> ▪ <i>What documentation is required?</i> ▪ <i>Who are the key duty bearers and what are their responsibilities?</i>
	4. Group feedback—each group briefly presents their findings
	5. Plenary discussion—discuss the findings and issues raised during the session
Key messages/ tips for the facilitator:	<ul style="list-style-type: none"> ▪ Groups should use the Guidelines, the Children Act (2001), and the Child Protection Case Management and Referral Guidelines (2019—which includes job aids to help prepare transitioning to independent living) to help with their discussions. ▪ The facilitator should note that there is no legal provision for supported independent living. ▪ The facilitator should note key issues being raised for further discussion later in the training and note any issues or questions that need follow-up post-training. ▪ Participants should be encouraged to share their personal relevant experiences.

Session 8: Statutory Children’s Institutions	
Total time needed:	30 minutes
Session description:	This session defines the role of government-run statutory children’s institutions in the continuum of care.
Resources/job aids required:	<ul style="list-style-type: none"> ▪ Facilitator’s Training Manual ▪ Children Act 2001 ▪ Guidelines for the Alternative Family Care of Children in Kenya (2014) ▪ Through Care and Aftercare Guidelines ▪ National Standards for Statutory Children Institutions (2008) ▪ PowerPoint presentation/printed materials ▪ Session videos
Materials required:	<ul style="list-style-type: none"> ▪ Projector and screen ▪ Flip chart and paper ▪ Markers ▪ Masking tape ▪ Post-It notes

Session methodology:	<ol style="list-style-type: none"> 1. Presentation of the definition(s) 2. Video/case studies 3. Group work—participants are split into groups and spend 30 minutes exploring the following and using a flip chart to answer/record salient points: <ul style="list-style-type: none"> ▪ <i>What are statutory children institutions in Kenya?</i> ▪ <i>What is the process of placement/exit strategy?</i> ▪ <i>How is supervision and aftercare support offered after exit?</i> ▪ <i>When is placement into statutory children institutions appropriate?</i> ▪ <i>What legal and policy instruments regulate/monitor statutory children institutions?</i> ▪ <i>What are benefits of statutory children institutions?</i> ▪ <i>What are the risks and challenges of statutory children institutions?</i> ▪ <i>What documentation is required?</i> ▪ <i>Who are the key duty bearers and what are their responsibilities?</i> 4. Group feedback—each group briefly presents their findings 5. Plenary discussion—discuss the findings and issues raised during the session
Key messages/tips for the facilitator:	<ul style="list-style-type: none"> ▪ Groups should use the Guidelines and the Children Act (2001) to help with their discussions. ▪ The facilitator should highlight the “Case Conference Committee” process in the Through Care and Aftercare Guidelines (2013). ▪ The facilitator should note key issues being raised for further discussion later in the training and note any issues or questions that need follow-up post-training. ▪ Participants should be encouraged to share their personal relevant experiences.

Session 9: Charitable Children’s Institutions	
Total time needed:	30 minutes
Session description:	This session defines the role of charitable children’s institutions in the continuum of care.
Resources/job aids required:	<ul style="list-style-type: none"> ▪ Facilitator’s Training Manual ▪ Children Act (2001) ▪ Guidelines for the Alternative Family Care of Children in Kenya (2014)

	<ul style="list-style-type: none"> ▪ National Standards for Best Practice in Charitable Children’s Institutions (CCIs) ▪ PowerPoint presentation/printed materials ▪ Session videos
Materials required:	<ul style="list-style-type: none"> ▪ Projector and screen ▪ Flip chart and paper ▪ Markers ▪ Masking tape ▪ Post-It notes
Session methodology:	<ol style="list-style-type: none"> 1. Presentation of the definition(s) 2. Video/case studies 3. Group work—participants are split into groups and spend 30 minutes exploring the following and using a flip chart to answer/record salient points: <ul style="list-style-type: none"> ▪ <i>What are charitable CCIs?</i> ▪ <i>When is placement into CCIs appropriate?</i> ▪ <i>What is the process of placing a child into CCIs?</i> ▪ <i>What exit strategies are in place?</i> ▪ <i>What legal and policy instruments regulate CCIs?</i> ▪ <i>What are benefits of CCIs?</i> ▪ <i>What are the risks and challenges of CCIs?</i> ▪ <i>What can be done to transition CCIs to provide other services?</i> ▪ <i>Who are the key duty bearers and what are their responsibilities?</i> 4. Group feedback—each group briefly presents their findings 5. Plenary discussion—discuss the findings and issues raised during the session
Key messages/tips for the facilitator:	<ul style="list-style-type: none"> ▪ Groups should use the Guidelines and the National Standards of Best Practice in CCIs to help with their discussions. ▪ The facilitator should note the “Exit Committees” as outlined in the National Standards for Best Practice in CCIs. ▪ The facilitator should clarify that CCI’s are considered only as the last resort. ▪ The facilitator should note key issues being raised for further discussion later in the training and note any issue or questions that need follow-up post-training. ▪ Participants should be encouraged to share their personal relevant experiences.

Session 10: Emergency (temporary) Shelters	
Total time needed:	30 minutes
Session description:	This session builds upon the definitions of emergency (temporary) shelters and provides guidelines for the short-term placement of children in distress into places of safety or temporary shelter as they await reunification with the family or placement into a long-term care arrangement.
Resources/job aids required:	<ul style="list-style-type: none"> ▪ Facilitator's Training Manual ▪ Guidelines for the Alternative Family Care of Children in Kenya (2014) ▪ Minimum Standards for Child Protection in Humanitarian Action (2012) ▪ PowerPoint presentation/printed materials ▪ Session videos
Materials required:	<ul style="list-style-type: none"> ▪ Projector and screen ▪ Flip chart and paper ▪ Markers ▪ Masking tape ▪ Post-It notes
Session methodology:	<ol style="list-style-type: none"> 1. Presentation of the definition(s) 2. Video/case studies 3. Group work—participants are split into groups and spend 30 minutes exploring the following and using a flip chart to answer/record salient points: <ul style="list-style-type: none"> ▪ <i>What are emergency (temporary) shelters? (Do they exist? If not, why not?)</i> ▪ <i>What services do/should emergency (temporary) shelters provide?</i> ▪ <i>When are emergency (temporary) shelters appropriate?</i> ▪ <i>What legal and policy instruments support care in emergency (temporary) shelters?</i> ▪ <i>What are benefits of emergency (temporary) shelters?</i> ▪ <i>What are the risks and challenges of emergency (temporary) shelters?</i> ▪ <i>What guidelines exist to direct the management of emergency (temporary) shelters?</i> ▪ <i>Who are the duty bearers and what are their responsibilities?</i> ▪ <i>What documentation is required?</i> 4. Group feedback—each group briefly presents their findings 5. Plenary discussion—discuss the findings and issues raised during the session

Key messages/ tips for the facilitator:	<ul style="list-style-type: none"> ▪ Groups should use the Guidelines and the Children Act (2001) to help with their discussions. ▪ The facilitator should note key issues being raised for further discussion later in the training and note any issue or questions that need follow-up post-training. ▪ Participants should be encouraged to share their personal relevant experiences.
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Session 11: Specialized Therapeutic Facilities

Total time
needed: 30 minutes

Session
description: This session builds upon the definitions of specialized therapeutic facilities and offers guidance on the processes required for placement of children into specialized therapeutic care.

Resources/job
aids required:

- Facilitator's Training Manual
- Guidelines for the Alternative Family Care of Children in Kenya (2014)
- PowerPoint presentation/printed materials
- Session videos

Materials
required:

- Projector and screen
- Flip chart and paper
- Markers
- Masking tape
- Post-It notes

Session
methodology:

1. Presentation of the definition(s)
2. Video/case studies
3. Group work—participants are split into groups and spend 30 minutes exploring the following and using a flip chart to answer/record salient points:
 - *What is specialized therapeutic care and what services do (or should) be provided?*
 - *When is specialized therapeutic care appropriate?*
 - *What type of children are eligible for care in a specialized therapeutic facility?*
 - *What legal and policy instruments support specialized therapeutic facilities?*
 - *What are benefits of specialized therapeutic facilities?*
 - *What are the challenges in establishing and running specialized therapeutic facilities?*

	<ul style="list-style-type: none"> ▪ <i>What documentation is required?</i> ▪ <i>Who are the key duty bearers and what are their responsibilities?</i>
	4. Group feedback—each group briefly presents their findings
	5. Plenary discussion—discuss the findings and issues raised during the session
Key messages/ tips for the facilitator:	<ul style="list-style-type: none"> ▪ Groups should use the Guidelines and the Children Act (2001) to help with their discussions. ▪ The facilitator should note key issues being raised for further discussion later in the training and note any issue or questions that need follow-up post-training. ▪ Participants should be encouraged to share their personal relevant experiences.

Session 12: Domestic Adoption	
Total time needed:	30 minutes
Session description:	This session builds upon the definition of domestic adoption and offers guidance on the processes required for the implementation of successful domestic adoption placements.
Resources/job aids required:	<ul style="list-style-type: none"> ▪ Facilitator's Training Manual ▪ Children Act (2001) ▪ Adoption Regulations (2005) ▪ Guidelines for the Alternative Family Care of Children in Kenya (2014) ▪ PowerPoint presentation/printed materials ▪ Session videos
Materials required:	<ul style="list-style-type: none"> ▪ Projector and screen ▪ Flip chart and paper ▪ Markers ▪ Masking tape ▪ Post-It notes
Session methodology:	<ol style="list-style-type: none"> 1. Presentation of the definition(s) 2. Video/case studies 3. Group work—participants are split into groups and spend 30 minutes exploring the following and using a flip chart to answer/record salient points: <ul style="list-style-type: none"> ▪ <i>What is domestic adoption?</i> ▪ <i>What are types of domestic adoption?</i>

- *When is domestic adoption appropriate?*
 - *What categories of children are eligible for domestic adoption?*
 - *What are legal and policy instruments that support domestic adoption?*
 - *What are the qualifications to be an adoptive parent?*
 - *What are benefits of domestic adoption?*
 - *What are the risks and challenges of domestic adoption?*
 - *What difference is there between adoption and other forms of care?*
 - *What is the process of domestic adoption-special circumstances?*
 - *What documentation is required?*
 - *Who are the key duty bearers and what are their responsibilities?*
4. Group feedback—each group briefly presents their findings
5. Plenary discussion—discuss the findings and issues raised during the session

- Key messages/
tips for the
facilitator:
- Groups should use the Guidelines and the Children Act (2001) to help with their discussions—plus any other relevant laws, policies, or frameworks (such as the Adoption Regulations).
 - The facilitator should note key issues being raised for further discussion later in the training and note any issue or questions that need follow-up post-training.
 - Participants should be encouraged to share their personal relevant experiences.

Session 13: Intercountry Adoption

Total time
needed: 30 minutes

Session
description: This session builds upon the definition of intercountry adoption and offers guidance on the processes required for the implementation of successful intercountry adoption placements.

Resources/job
aids required:

- Facilitator's Training Manual
- Children Act (2001)
- Adoption Regulations (2005)
- Guidelines for the Alternative Family Care of Children in Kenya (2014)
- PowerPoint presentation/printed materials
- Session videos

Materials
required:

- Projector and screen
- Flip chart and paper

	<ul style="list-style-type: none"> ▪ Markers ▪ Masking tape ▪ Post-It notes
Session methodology:	<ol style="list-style-type: none"> 1) Presentation of the definition(s) 2) Video/case studies 3) Group work—participants are split into groups and spend 30 minutes exploring the following and using a flip chart to answer/record salient points: <ul style="list-style-type: none"> ▪ <i>What is intercountry adoption?</i> ▪ <i>When is intercountry adoption appropriate?</i> ▪ <i>What categories of children are eligible for intercountry adoption?</i> ▪ <i>What legal and policy instruments support intercountry adoption?</i> ▪ <i>What are the qualifications to be an intercountry adoptive parent?</i> ▪ <i>What are benefits of intercountry adoption?</i> ▪ <i>What are the risks and challenges of intercountry adoption?</i> ▪ <i>What is the process of intercountry adoption placements?</i> ▪ <i>Who are the duty bearers and what are their responsibilities?</i> ▪ <i>What documentation is required?</i> ▪ <i>Explore the moratorium—why was it put in place?</i> 4. Group feedback—each group briefly presents their findings 5. Plenary discussion—discuss the findings and issues raised during the session
Key messages/tips for the facilitator:	<ul style="list-style-type: none"> ▪ Groups should use the Guidelines and the Children Act (2001) to help with their discussions. ▪ The facilitator should note key issues being raised for further discussion later in the training and also note any issue or questions that need follow-up post-training. ▪ Participants should be encouraged to share their personal relevant experiences.

Session 14: Other Forms of Community-Based Care	
Total time needed:	30 minutes
Session description:	This session builds upon the definitions of alternative/community-based care and offers guidance on the processes required for the implementation of successful community-based care placements that are practiced by different cultural groups and considered safe and protective of children.

Resources/job aids required:	<ul style="list-style-type: none"> ▪ Facilitator's Training Manual ▪ Guidelines for the Alternative Family Care of Children in Kenya (2014) ▪ PowerPoint presentation/printed materials ▪ Session videos
Materials required:	<ul style="list-style-type: none"> ▪ Projector and screen ▪ Flip chart and paper ▪ Markers ▪ Masking tape ▪ Post-It notes
Session methodology:	<ol style="list-style-type: none"> 1. Presentation of the definition(s) 2. Video/case studies 3. Group work—participants are split into groups and spend 30 minutes exploring the following and using a flip chart to answer/record salient points: <ul style="list-style-type: none"> ▪ <i>What other types of alternative/cultural/traditional care are practiced in Kenya?</i> ▪ <i>Are there other forms of alternative family/community-based care forms not mentioned in the Guidelines?</i> ▪ <i>When is community-based care appropriate?</i> ▪ <i>What categories of children are eligible for community-based care?</i> ▪ <i>What legal and policy instruments support community-based care?</i> ▪ <i>What are benefits of community-based care?</i> ▪ <i>What are the risks and challenges of community-based care?</i> ▪ <i>What documentation is required?</i> ▪ <i>Who are the key duty bearers and what are their responsibilities?</i> 4. Group feedback—each group briefly presents their findings 5. Plenary discussion—discuss the findings and issues raised during the session
Key messages/tips for the facilitator:	<ul style="list-style-type: none"> ▪ Groups should use the Guidelines (2014) and the Children Act (2001) to help with their discussions. ▪ The facilitator should note key issues being raised for further discussion later in the training and note any issues or questions that need follow-up post-training. ▪ Participants should be encouraged to share their personal relevant experiences.

SECTION 6: BASICS OF MONITORING AND EVALUATING ALTERNATIVE CARE

Introduction

This section introduces participants to the importance of tracking, monitoring, collecting, and analyzing data, and further, to make use of that data to improve alternative care program quality and affect care/services offered to the child and family, policy, and programming. This section highlights the importance of building a monitoring and evaluation (M&E) system for alternative care as part of the GoK Child Protection Management Information Systems (CPIMS), and how to use the data generated to improve care and services, programming, decision-making, and advocacy for family-based care.

Learning Objectives

1. Understand the importance of M&E for alternative care programmes
2. Enhance participants' basic knowledge and skills on M&E alternative care programmes and the indicators used to measure effectiveness
3. Explain types of M&E and be able to articulate examples of ways in which data can be collected and analyzed
4. Understand the importance of CPIMS to capture data and use it to inform policy and programming

Sessions

This section is made up of an introduction to the section and 2 (two) sessions.

Session 1: Introduction to Monitoring and Evaluation

Session 2: Identifying Indicators and Collecting/Analyzing Data

It is estimated that this section will take 1 hour/5 minutes to complete.

Section Introduction	
Total time needed:	5 minutes
Resources required:	▪ PowerPoint presentation/printed materials
Session methodology:	<ol style="list-style-type: none">1. Using PowerPoint/printed materials, the facilitator introduces the section and what the overall learning objectives are for the section.2. The facilitator explains that the section is split into sessions and clarifies what is included in each session.3. The facilitator asks the participants if they understand the learning objective of the section and answers any questions relating to the section.

Session 1: Introduction to Monitoring and Evaluation	
Total time needed:	30 minutes
Session description:	The key concepts relevant to understanding monitoring and evaluation and common approaches are discussed. Participants are introduced to the rationale for conducting monitoring and evaluation of alternative care programmes. Participants will be given an opportunity to share their experiences in relation to M&E and in particular linking it to their organization(s) where applicable. The session will help participants understand how everyone is part of M&E.
Resources/job aids required:	<ul style="list-style-type: none"> ▪ Facilitator's Training Manual ▪ Guidelines for the Alternative Family Care of Children in Kenya (2014) ▪ PowerPoint presentation/printed materials ▪ Case Management Package (2019) ▪ Information from CPIMS
Materials required:	<ul style="list-style-type: none"> ▪ Projector and screen ▪ Flip chart and paper ▪ Markers ▪ Masking tape ▪ Post-It notes
Session methodology:	<ol style="list-style-type: none"> 1. The facilitator begins the session by presenting a PowerPoint slide/printed material with the definition of monitoring and evaluation in alternative care. 2. If possible, a representative from the Children Protection Information Management System (CPIMS) section should attend to introduce the monitoring systems used (or should be used) in Kenya. 3. The facilitator walks through the PowerPoint slides/printed materials highlighting the difference between "monitoring" and "evaluation." 4. The facilitator presents the slide/printed material: "what needs to be monitored and evaluated in alternative care," highlighting the key components. 5. The facilitator holds a plenary discussion for questions and answers on the concepts and ideas of monitoring and evaluation in alternative care.
Key messages/tips for the facilitator:	<ul style="list-style-type: none"> ▪ The facilitator emphasizes that monitoring children and their families in alternative care (or when children have been reintegrated back to their family/community) is critical and should be built into the case management process.

- The facilitator should note any key issues or questions raised during the session on a flip chart for discussion later in the training or for follow-up post-training.

Session 2: Identifying Indicators and Collecting/Analyzing Data	
Total time needed:	30 minutes
Session description:	The various designs or approaches to M&E will be introduced including: identifying indicators, the M&E stages and steps, qualitative and quantitative research methodologies, management, and reporting findings. Additionally, participants will be introduced to various monitoring tools and methods, along with how to develop monitoring and evaluation questions.
Resources/job aids required:	<ul style="list-style-type: none"> ▪ Facilitator's Training Manual ▪ Guidelines for the Alternative Family Care of Children in Kenya (2014) ▪ PowerPoint presentation/printed materials ▪ Session videos
Materials required:	<ul style="list-style-type: none"> ▪ Projector and screen ▪ Flip chart and paper ▪ Markers ▪ Masking tape ▪ Post-It notes
Session methodology:	<ol style="list-style-type: none"> 1. The facilitator begins the session by presenting the PowerPoint slides/printed materials outlining the definition of indicators and the different kinds of indicators: quantitative and qualitative. 2. The facilitator uses PowerPoint slides/printed materials to discuss quantitative indicators. 3. The facilitator uses PowerPoint slides/printed materials to discuss qualitative indicators. 4. The facilitator splits the participants into relevant groups (by role, location, or organization) and gives each group 15 minutes to come up with indicators they feel are relevant to their group, recording their salient points on a flip chart. 5. The facilitator will give each group a few minutes to present their group work, allowing time for a plenary discussion.
Key messages/tips for the facilitator	<ul style="list-style-type: none"> ▪ The facilitator should ask the participants to discuss confidentiality and safe storage of data, i.e., how can confidentiality be ensured when collecting and storing personal information?

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- The facilitator should note any key issues or questions raised during the session on a flip chart for discussion later in the training or for follow-up post-training.
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SECTION 7: RECAP AND WAY FORWARD

Introduction

This section outlines the final sessions of the training that includes a recap of what has been covered in the training and offers the participants the opportunity to plan practical activities that will enable them to implement the aspects of the Guidelines relevant to their role and organization.

Learning Objectives

1. Participants will be able to adeptly describe the key learning from the training
2. Participants will demonstrate what they have learnt from the training through a recap exercise
3. Participants will demonstrate their ability to convert theory (from the training) to practice through the development of practical actions to take forward during implementation

Sessions

This section is made up of an introduction to the section and 2 (two) sessions.

Session 1: Training Recap

Session 2: Way forward: Planning the Next Steps

It is estimated that this section will take 1 hour/50 minutes to complete.

Section Introduction	
Total time needed:	5 minutes
Resources required:	▪ PowerPoint presentation/printed materials
Session methodology:	<ol style="list-style-type: none">1. Using PowerPoint/printed materials, the facilitator introduces the section and the overall learning objectives for the section.2. The facilitator explains that the section is split into sessions and what is in each.3. The facilitator asks the participants if they understand the learning objectives of the section and answers any questions.

Session 1: Training Recap	
Total time needed:	45 minutes
Session description:	During this session the participants will be given the opportunity to reflect on the sum of their training in a plenary discussion, highlighting what they have learned and their training experience. Participants will be provided with a series of questions related to the training to reflect on and answer. While this exercise is not a scored test, it will provide participants and training organizers with a good understanding of what has been learned during the training.
Resources/job aids required:	<ul style="list-style-type: none"> ▪ Facilitator's Training Manual ▪ The training questionnaire ▪ PowerPoint presentation/printed materials
Materials required:	<ul style="list-style-type: none"> ▪ Projector and screen ▪ Flip chart and paper ▪ Markers ▪ Masking tape ▪ Post-It notes ▪ Post-training questionnaire
Session methodology:	<ol style="list-style-type: none"> 1. Each participant will receive a short post-training questionnaire. 2. Participants will be given 20 minutes to complete the questionnaire. 3. The facilitator will collect the completed questionnaires for evaluation. 4. Participants will be asked to provide key learning from the training and prepare a small skit of the training experience. 5. A plenary discussion will take place where the participants will be provided with some responses from filled questionnaire and discuss the answers.
Key messages/tips for the facilitator:	The facilitator should mention that the questionnaire is not meant as a formal test or an appraisal of the participants but is to help them reflect on the training and prompt a discussion about what has been learned during the training.

Session 2: Way Forward: Planning the Next Steps	
Total time needed:	60 minutes
Session description:	Participants will develop a series of actions that are appropriate to their role/organization to enhance the implementation of the Guidelines. Actions

can be developed for the days, weeks, and months following the training. Participants will be provided with examples of the kind of actions that can be taken forward including: case management training, training for their team members on specific elements on the continuum of care, further research into what alternative care provisions exist in their geographical location, research on alternative care related services in their area, establishing an Alternative Care Committee, strengthening reintegration practices, disseminating tools, etc. The action points will be presented and discussed with all participants.

Resources/job aids required:	<ul style="list-style-type: none"> ▪ Facilitator's Training Manual ▪ Guidelines for the Alternative Family Care of Children in Kenya (2014) ▪ PowerPoint presentation/printed materials ▪ Session videos
Materials required:	<ul style="list-style-type: none"> ▪ Projector and screen ▪ Flip chart and paper ▪ Markers ▪ Masking tape ▪ Post-it notes
Session methodology:	<ol style="list-style-type: none"> 1. In groups, participants will develop a series of actions that are appropriate to their role/organization(s) to enhance the implementation of the Guidelines, using a flip chart to record their action plans. 2. Groups will briefly present their action plans by showing their flip chart pages (using masking tape for hanging) to the entire group of participants. 3. A plenary discussion will follow to critique the action plans, including how they can be adopted for implementation, how they can be taken forward, and how to report their progress.
Key messages/tips for the facilitator:	<ul style="list-style-type: none"> ▪ When splitting the participants into groups, the facilitator should consider basing them on geographical areas, organizations, or roles, to ensure that there is continuity in collaboration in implementing what the groups are asked to develop. One suggestion is that the groups be led by an authority from each location; for example, Sub-County Children's Officers (SCCOs) could lead all the agencies from their sub-county in the planning activity. ▪ The facilitator should encourage participants to concentrate on identifying further training and exposure to practices that they need to enhance their understanding/ approach and skill set.
Job aids/handouts used:	<ul style="list-style-type: none"> ▪ Guidelines for the Alternative Family Care of Children in Kenya (2014) ▪ Training PowerPoint slides/printed materials (for reference)

LIST OF PARTICIPANTS

	NAME	ORGANIZATION
1	NOAH SANGANYI	DCS HQ- DIRECTOR
2	CHARLES ONDOGO	DCS HQ- DEPUTY DIRECTOR
3	CARREN OGOTI	DCS HQ- DEPUTY DIRECTOR AFC SECTION
4	ALFRED MURIGI	DCS HQ- ALTERNATIVE FAMILY CARE SECTION
5	JANE MUNUHE	DCS HQ- ALTERNATIVE FAMILY CARE SECTION
6	HUDSON K. IMBAYI	DCS HQ- ALTERNATIVE FAMILY CARE SECTION
7	NAOMI KYULE	DCS HQ- ALTERNATIVE FAMILY CARE SECTION
8	PATRICK ISADIA	DCS HQ- ALTERNATIVE FAMILY CARE SECTION
9	BEATRICE MAINA	DCS HQ- ALTERNATIVE FAMILY CARE SECTION
10	RUTH ARERI	DCS HQ- CHILDREN INSTITUTIONS SECTION
11	CAROLINE TOWETT	DCS HQ- CHILDREN INSTITUTIONS SECTION
12	LUCY NJERU	DCS HQ- CHILDREN INSTITUTIONS SECTION
13	HARRISON NG'ANG'A	DCS HQ- COMMUNITY CHILD SUPPORT SERVICES
14	PAULINE N. MUYA	DCS HQ- COMMUNITY CHILD SUPPORT SERVICES
15	EMILY MUSENETI	DCS HQ- COMMUNITY CHILD SUPPORT SERVICES
16	RUTH NJUGUNA	DCS HQ-COUNTER TRAFFICKING IN PERSONS SECTION
17	LILIAN OSERO	DCS HQ-PLANNING AND DEVELOPMENT SECTION
18	SAMWEL MASESE	DCS-KAJIADO COUNTY
19	RICHARD MASIKA	DCS-KAKAMEGA COUNTY
20	RACHEL KARANJA	DCS-KIAMBU COUNTY
21	ROSE BARINE	DCS-KIAMBU COUNTY
22	SAMUEL T. KIMANI	DCS-KIAMBU COUNTY
23	GEORGE MIGOSI	DCS-KILIFI COUNTY
24	BEATRICE M. OBUTU	DCS-KISII COUNTY
25	ESTHER WASIGE	DCS-BUSIA COUNTY
26	PETER KUTERE	DCS-HOMABAY COUNTY
27	ALICE K. WANYONYI	DCS-KISUMU COUNTY
28	BILHA AKOTH AMIMO	DCS-KISUMU COUNTY
29	ELIZABETH ENOI	DCS-KISUMU COUNTY
30	EVERLYNE ANNAM	DCS-KISUMU COUNTY
31	HARRIET LIKOVELE ICHENIHI	DCS-KISUMU COUNTY
32	HUMPHREY WANDEO	DCS-KISUMU COUNTY
33	JOHN WAINAINA GITAU	DCS-KISUMU COUNTY
34	LAWRENCE O. OGUTU	DCS-KISUMU COUNTY
35	MARK O. KEYA	DCS-KISUMU COUNTY
36	NELLY P. ASUNAH	DCS-KISUMU COUNTY
37	PATRICK A. AWINO	DCS-KISUMU COUNTY
38	DANIEL MUSEMBI	DCS-KITUI COUNTY
39	SELASTINE NTHIANI	DCS-MAKUENI COUNTY
40	JOHN ODHIAMBO ODINYA	DCS-MIGORI COUNTY

41	RHODA MWIKYA	DCS-MURANG'A COUNTY
42	BILLY ADERA	DCS-NYAMIRA COUNTY
43	CHRISTINE ONGAYO	DCS-NYAMIRA COUNTY
44	GILBERT SIMBA	DCS-NYAMIRA COUNTY
45	LAWRENCE MAERA	DCS-NYAMIRA COUNTY
46	MARTHA MBATIA	DCS-NYAMIRA COUNTY
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48	SAMMY KORIR	DCS-NYAMIRA COUNTY
49	SUSAN RAUTTA	DCS-NYAMIRA COUNTY
50	VIVIAN ONDEYO	DCS-NYAMIRA COUNTY
51	JEMIN ONYANGO	DCS-SIAYA COUNTY
52	AGGREY AMBWAYA	DCS-VIHIGA COUNTY
53	BONIFACE BULUMA	FADV
54	RUTH WACUKA	KESCA
55	THOMAS BOSIRE	KESCA
56	MARK RILEY	MAESTRAL
57	MIRIAM MUSYOKA	SOS VILLAGE (K)
58	RONALD SSENTUUWA	SOS VILLAGE (REGIONAL)
59	JOSEPH KIMANI	STAHILI FOUNDATION
60	PETER MBURU	STAHILI FOUNDATION
61	JACK ONYANDO	UNICEF
62	BERNARD KAISER	CRS-CTWWC
63	CORNEL OGUTU	CRS-CTWWC
64	CRISPUS NATALA	CRS-CTWWC
65	LUCY NJERI	CRS-CTWWC
66	MAUREEN OBUYA	CRS-CTWWC
67	MERCY NDIRANGU	CRS-CTWWC
68	TERESIAH KAMAU	CRS-CTWWC
69	OBED MASESE	CTWWC-MANGA HEART
70	ERIC MOTH	CTWWC-ICS
71	BETTY KWENAH	CTWWC-ICS

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