



## COMMUNITY BASED ALTERNATIVE CARE

AS A STRATEGY FOR PROTECTING BURUNDIAN REFUGEE GIRLS AND BOYS:  
A CASE STUDY FROM MAHAMA CAMP, RWANDA

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BURUNDI REFUGEE CRISIS

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## **SUMMARY**

This case study describes the community-based child protection programme implemented between 2015 and 2016 with Burundian girls, boys and adults in Mahama refugee camp in Rwanda.

Between April and July 2015, over 150,000 people fled Burundi after civil unrest and violence broke out following president Nkurunziza's announcement that he would run for a third term. Families sent their children to seek refuge in neighbouring Rwanda, while the parents stayed behind to guard their houses and belongings. As a result, over 2,000 girls and boys arrived in Mahama Refugee Camp in Rwanda without their original caregivers.

To improve the capacity of the local community to care for and protect the most vulnerable children, including those separated from their families, Plan International implemented a comprehensive community-based child protection programme in Mahama Refugee Camp. Plan International and partners designed an alternative care system with independent living arrangements for unaccompanied Burundian children. A local, community-based work force of refugees was trained to supervise these children locally and respond to their protection concerns.

A key success of the programme was the successful identification of separated and unaccompanied children through collaboration between community members and families. A network of community-based groups and Plan International case workers collaborated to ensure timely support to the most vulnerable children including placement in interim care.



## BACKGROUND

On 25 April 2015, Burundi President Pierre Nkurunziza's announced his run for a third presidential term. This sparked nation wide protests by those opposed to Nkurunziza, followed by months of political strife, intimidation. In mid-May rebel generals attempted a coup, which failed. The violence and political instability led over 150,000 people to flee Burundi. Many parents sent their children to seek refuge and safety in neighbouring countries, while staying behind themselves to safeguard their house and belongings. By the end of 2016, the total number of Burundians who fled the country has increased to nearly 400,000 people.

Many of Burundians have sought refuge in neighbouring Rwanda where the total Burundian refugee population as of March 2017 is nearly 85,000 individuals<sup>1</sup>. Mahama camp, Rwanda's biggest refugee camp, hosted over 50,000 residents by the end of 2016. The figure included over 2,000 unaccompanied and separated children.



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<sup>1</sup> UNHCR INTER-AGENCY SHARING PORTAL

## The needs of refugee girls and boys

Children<sup>2</sup> make up over 50% of the refugee population and approximately 12% of these children are unaccompanied<sup>3</sup> or separated<sup>4</sup>. Children without appropriate parental care face increased risks to abuse, sexual violence and exploitation as they are highly dependent on strangers to survive. Many children have witnessed terrible violence and some have lost family members, neighbours and friends. Children report feelings of fear, grief and continued distress as they miss their parents or caregivers.



Some of the refugee children, especially boys, have escaped from “Imbonerakure”, the youth wing of Burundi’s ruling party. The militia group, formed in 2010, has around 50,000 members and started intensive forced recruitment of boys and young men during the 2015 the political turmoil. Members reportedly has been responsible for attacks on protestors, harassment and violence against civilians and even killings.

Education services are not sufficient in the camps. Less than half of all 24,000 school-aged children in Mahama camp are in school. Also early childhood services for children between 3 and 5 years old and secondary education for adolescents are limited. As a result, many of the older girls and boys are working and leave the camps during the day, or even return to Burundi to seek jobs, facing risks of exploitation, violence, abuse and recruitment.

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<sup>2</sup> PLAN INTERNATIONAL DEFINES A CHILD AS A PERSON BELOW THE AGE OF 18 YEARS.

<sup>3</sup> CHILDREN WITHOUT ORIGINAL CAREGIVERS OR OTHER FAMILY MEMBERS WHO ARE BY LAW OR CUSTOM RESPONSIBLE FOR THEIR CARE.

<sup>4</sup> CHILDREN WITHOUT THEIR ORIGINAL CAREGIVERS BUT WITH OTHER EXTENDED FAMILY OR COMMUNITY MEMBERS WHO ARE RESPONSIBLE FOR THEIR CARE.

# PLAN INTERNATIONAL'S ACTION

## Community-based child protection as a strategy to protect separated refugee girls and boys

The purpose of the community-based child protection programme was to strengthen the protective environment in the camps to prevent and respond to protection concerns of the most vulnerable children. For the large numbers of unaccompanied and separated children, an alternative care system was set up as described further below. For children who were with extended family members, kinship care was provided. Given that foster care is not common in Burundi, supervised independent living arrangements were supported for adolescents between 15 and 18 years old who lived alone in the camp.

A systems approach was used to ensure this care system was underpinned by culturally appropriate care practices, and aligned with Rwanda's national policies and approaches to alternative care to ensure sustainability and longevity. A local, community-based work force of refugees were trained to monitor these care arrangements and respond to the children's protection concerns.

## KEY ACTIVITIES

### Assessment of the situation

The design of the response programme was based on an analysis of alternative care practices in Burundi as well as the national systems in host country Rwanda. In Burundi, children without their original caregivers or other family members, are usually placed in government group homes or if not, they are to fend for themselves on the street. When examining the situation for Burundian refugee children in the camp, it became clear that spontaneous fostering of unrelated children was not a traditional coping mechanism for many Burundian families. Instead, in Mahama over 1,200 girls and boys were living together in tents caring for each other and their siblings, for those with siblings. In the Rwanda national context, an alternative care system existed that supported community-based foster care and independent living arrangements, supervised by locally trained social workers. The Rwanda model was adapted as the basis for the camp-based alternative care system.





## Design of the alternative care system

Based on the assessment outlined above, Plan International established an alternative care system for separated and unaccompanied children. For separated children the first care arrangement option was kinship care, whereby the child lived with extended family with a relationship to the child. For children who did not have the option to live in kinship care, two alternative care options were developed. A first option was foster care, whereby the child was placed into a preselected family that was screened, trained and supported to take care of an unaccompanied child. A second option was supervised independent living. In this arrangement, girls and boys below the age of 18 would stay together in small groups of maximum seven adolescents, with a head of the 'household' above the age of 16. This option was the preference of mainly siblings and children who had already formed spontaneous groups in the camp. Both options were seen as temporary solutions during efforts to reunite children with their original caregivers and families.

This care system was developed in line with Rwanda's national policies to protect the welfare of vulnerable children, especially those without the caregivers. In the Rwandan national model, volunteers in the community are trained to provide supervised independent living support to orphaned children in their community. They offer parental guidance, mentorship, and some materials support. Plan International Rwanda worked with UNICEF and UNHCR to develop a camp-based alternative care system for unaccompanied children based on this national model. A standard operating procedure (SOP) for alternative care was developed by camp agencies.

## Establishing a community-based child protection work force

To increase the capacity of the community to care for and protect vulnerable separated children, a work force of refugee workers was identified and trained to monitor the alternative care arrangements and support children with special protection needs. It was decided that a two cohort system would be implemented: Child Protection (CP) Community Mobilizers and Para-social Workers (PSWs). All were volunteers from the local refugee population who received a stipend for their work.

- A total of 70 male and female Para-Social Workers were responsible for providing intensive care to unaccompanied children. They supported girls and boys in independent living arrangements by cooking for children, ensuring they maintain proper hygiene, attend school, do their homework, are safe throughout the day and night and have access to services as required. PSWs worked with children from the same area of the camp in which they lived, so that they were easily accessible to and trusted by children.
- A total of 50 male and female ChildProtection Community Mobilizers were responsible for conducting general home-visits to all vulnerable children, such as children living with their grandparents, mentally ill parents, children in interim care due to abuse or neglect by their parents and children with disabilities. The role of the community mobilizers was to monitor the well-being of these children and to signal any protection concerns or changes in the situation. The mobilizers visited these children approximately once/week. When more intensive forms of support were required, a referral was made to support from a Para-Social Worker.

The Para-Social Workers had typically 10 children they each worked with, while CP Mobilizers each provided less intensive monitoring support to 20 to 30 children. Different resources and tools were developed for both groups of workers, to support their work with children. For example monitoring checklists, documentation forms and child-friendly communication materials.

**Selection and capacity building of case workers**

For each cohort a clear Terms of Reference and individual Job Descriptions were developed. To select the case workers, a structured recruitment process was held that included a call for applications, short-listing, interviews with panel with staff from Government department MIDIMAR,



Plan International Child Protection coordinator Judith talks to newly arrived children in Mahama refugee camp. "We are receiving around 1,200 Burundian every day. I am determined to bring positive changes to the lives of Burundi Refugees, especially children". Together with her team, Judith welcomes new arrivals and identifies those children who arrive without caregivers. She ensures they are registered, allocated to their own tents and provided with all the necessary materials and support services.



UNHCR, UNICEF and Plan International Rwanda, leading to the final selection of workers. During the process, not only skills and experience was assessed, but also the motivation and commitment to work with children as well as recommendations from the community.

After the selection of the volunteers, Plan International trained all workers in its mandatory organisational policies, the Child Protection Policy and Code of Conduct, Preventing Sexual Abuse and Exploitation (PSEA), and an introduction to their Roles and Responsibilities. In addition, Plan International Rwanda provided a series of follow-up Child Protection trainings to the volunteers, in phased manner, on topics such as: Understanding and Identifying Violence Against Children, Protective Environments and Responsible Actors for Protecting Children, National and International Laws and Conventions Governing the Rights of Children, Stages of Child Development, Positive Parenting/ Discipline, Referral Pathways, Child Friendly Communication, Sensitization and Mobilization, Conducting Home Visits,

Caring for Separated and Unaccompanied Children, Reporting Requirements, and Supervision/Coaching Schedule.

**Monitoring of vulnerable girls and boys**

Plan International Rwanda established a multi-agency database that monitored cases of separated children. The system tracked basic information, for example if children were reunited with family, missing from the camp, experiencing protection concerns, had collected their food packages and other vital information to track their situation. From the addresses in the database, children were paired with volunteers who lived near them and/or had a previous relationship with them. Every week, the volunteers submitted reports on each child’s protection needs, which informed the database and were used for referrals to other agencies and to Plan International’s case workers. The two groups worked together to ensure complete coverage and received coaching sessions from Plan International on the support they provide to children, as well as the reporting they do.



### Support and supervision of community workers

The community workers conducted home visits and supervision of independent living arrangements, according to an agreed protocol. Plan International Rwanda provided regular coaching to community workers to reinforce their skills and knowledge on various topics, and to ensure effective coordination with Plan International's Child Protection Case Workers. For example, when a protection concern was identified by a Para Social Workers or Mobilizer, they detailed it in the weekly reports. These reports were reviewed by Plan International staff and referred to Child Protection staff for follow-up and case management when if required.

## POSITIVE IMPACT

### Increased reporting of child protection concerns

Gradually with time, community workers became more acquainted with providing counselling and support to children and

reporting concerns. After more than one year of intervention, it can be concluded that the community case workers' presence in the community and their connections with children and families locally has dramatically increased the number of referrals of child protection concerns that were made to Plan International's Child Protection Case Workers for follow-up and Case Management services.

### Changing community perceptions and support to vulnerable children

The case workers contributed to an improved protective environment by gradually changing community perceptions about unaccompanied children (taking every child as your own). As part of their role, the community workers were actively participating in community mobilisation, campaigns and awareness activities. They were also active in ensuring that separated and other at-risk children that they cared for were enrolled in school and participated in community activities such as psychosocial and recreational activities.



In Mahama camp, street theatre and performance are used as means to raise awareness on important issues such as the safety and protection of children in the camp.



## CHALLENGES

### Human resource requirements

Some of the biggest challenges were related to the high number of unaccompanied and separated children that arrived in Rwanda within a short time frame. The recruitment, training and ongoing supervision of all volunteers had to take off rapidly, while at the same time developing the wider child protection system and SOPs for alternative care. Managing the large numbers of volunteers and recording key data into a database to effectively monitor the high case load with an initial small child protection team in the camps was a challenge. This improved over time as more staff were recruited including dedicated database analysts and case managers and supervisors.

### Supervised independent living cost- and resource intensive

Supervised independent living was preferred by many children, especially by adolescents, and often easier to establish in the initial response phase compared to the lengthy process of identification, selection, screening and training of foster families. However, independent living required much more intensive supervision and support, and was therefore also more costly. For over 1,200 unaccompanied children, the required level of monitoring and support was hard to realize as human and financial resources were not sufficient.

## LESSONS LEARNED

- In situations with high numbers of extremely vulnerable children, a community-based case worker mechanism can be a rather effective structure to support the case management system. Community case workers such as Community Mobilisers

and Para-Social workers enable an increased coverage and reach into the displaced community. At the same time, their prevention and response work ensures that the Child Protection Case Management system does not become overloaded, as they cover a significant proportion of the ongoing monitoring and support to displaced children in the refugee camp.

- Employing different types of case workers has worked well in this context as they could provide appropriate care and protection to children with various levels of protection needs, from low to high risk concerns.
- At the camp level, the deployment of Plan International Community Engagement Officers has been crucial. These staff members were responsible for the supervision of all Plan International's activities in a specific area in the camp, including case management, Child Friendly Spaces and community awareness activities, and they were the first line of supervision of case workers and coordination between them and other services.
- While it is important to provide care arrangements in line with children's preference and cultural practices, the feasibility of temporary care arrangements like supervised independent living have to be carefully assessed. Independent living requires intensive monitoring and support and can therefore be very costly in terms of human and financial resources. The Mahama case illustrates that temporary foster care with adequate parental care generally require less intensive day to day support and may be a more feasible care option for displaced children when resources are limited.





### **About Plan International:**

Plan International strives to advance children's rights and equality for girls all over the world. We recognise the power and potential of every single child. But this is often suppressed by poverty, violence, exclusion and discrimination. And it's girls who are most affected. As an independent development and humanitarian organisation, we work alongside children, young people, our supporters and partners to tackle the root causes of the challenges facing girls and all vulnerable children.

We support children's rights from birth until they reach adulthood, and enable children to prepare for and respond to crises and adversity. We drive changes in practice and policy at local, national and global levels using our reach, experience and knowledge. For over 75 years we have been building powerful partnerships for children, and we are active in over 70 countries.