

The National Child Protection System and Alternative Child Care in Palestine

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**SOS CHILDREN'S
VILLAGES**

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Foreword

This report on the National Child Protection System and Alternative Child Care in Palestine was commissioned by SOS Children's Villages International, Regional Office for CEE/CIS/Middle East. It is part of a series of five reports based on a multi-country desk review, including also Jordan, Lebanon, Egypt and Syria. The author is the renowned international child protection consultant Dr. Chrissie Gale. We are glad to share this and the other reports with all interested stakeholders in order to spark further efforts to better protect children without parental care or at risk of losing it and facilitate new effective partnerships. All reports can be accessed [here](#).

The main objective of the review was to increase our knowledge and understanding of the child protection sector in Palestine, in particular recent developments and reform efforts. SOS Children's Villages alternative care and family strengthening programs operating in the country continuously aim at improving and increasing the positive impact on the lives of children who lost parental care and children at risk of being separated from their families. Understanding the functioning and challenges of the national child protection system is paramount for us to better address the needs of these groups, scale up or launch new initiatives and strengthen cooperation with governmental and civil society stakeholders.

The report thoroughly examines all available academic and professional research literature. It offers an analysis of data and information obtained from open web and official government sources. Presenting a synthesis of compiled evidence, it gives a detailed picture of current child protection practices and the structural and legal building blocks of the child protection system in Palestine. The report offers rich evidence for sound decision-making in the areas of policy, programming, advocacy and development cooperation.

We hope the report will be useful also for other agencies and organizations active in the field of child protection. May the learnings help us in our work to improve the lives of children and families.



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Glossary of terms

Abandonment	A situation in which children are anonymously left in a 'public' place by persons unknown e.g. a child is left on the steps of a mosque or in front of a hospital, or on the street.
Adoption	A child who is effectively placed in the legal custody of the person adopting them 'pursuant to a final adoption order, as of which moment, for the purposes of the UN Guidelines for the Alternative Care of Children, the child is considered to be in parental care'. ¹
Ageing out of Care	The time at which a child or young person living in formal alternative care reaches a legally-determined age (usually the age of majority) above which they are no longer entitled to live in a care placement. In most cases, they need to leave care and start their lives as independent adults.
Alternative Care	Children not in the overnight care of at least one of their parents, as parents are unwilling or unable to care for children ² . The UN Guidelines for the Alternative Care of Children outline several different forms of alternative care including kinship care, residential care and foster care.
Child	A child is any person under the age of 18 years unless the law of a particular country sets the legal age for adulthood younger, as provided for under Article 1 of the United Nations Convention on the Child. ³
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'. ⁴
Kinship care	Family-based care within the child's own extended family or with close friends of the family known to the child. ⁵
Family based care	Refers to a short- or long-term care arrangement whereby a child is placed in the domestic environment of a family, as opposed to institutional or residential care. ⁶ This includes kinship care and foster care.
Formal care	'All care provided in a family environment that 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 the result of administrative or judicial measures' ⁷
Foster care	'Situations whereby children are placed by a competent authority for the purposes of alternative care in the domestic environment of a family, other than children's own family, that has been selected, qualified, approved, and supervised for providing such care'. ⁸ (Note: In some countries, this now also applies to a formally arranged

¹ UN General Assembly (2009) Guidelines for the Alternative Care of Children

² UN General Assembly (2009) Guidelines for the Alternative Care of Children

³ based on Article 1 of the UN Convention on the Rights of the Child (CRC) (UN, 1989).

⁴ UN General Assembly (2009) Guidelines for the Alternative Care of Children Article III, 29a.

⁵ UN General Assembly (2009) Guidelines for the Alternative Care of Children

⁶ European Expert Group on the Transition from Institutional to Community-based Care (EEG) 'The Common European Guidelines on the Transition from Institutional to Community-based Care', November 2012, available under: www.deinstitutionalisation.com; hereinafter quoted as "EEG (November 2012) op. cit."

⁷ UN General Assembly (2009) Guidelines for the Alternative Care of Children

⁸ UN General Assembly (2009) Guidelines for the Alternative Care of Children

	placement with another family member - kinship foster care). This form of care should be temporary in nature.
Guardian	A guardian is a person, not a parent of the child, who is given legal responsibility to care for a child; this may entail full parental responsibility, including the care of a child or, in some systems, more limited responsibilities related only to making legal decisions on behalf of the child. A guardian could also be someone recognized by the community or traditional authorities as having the responsibility to care for and protect the child. A guardian may be related or unrelated to a child. (please also see definition of legal guardian below)
Informal care	Any private arrangement provided in a family environment, whereby the child is looked after on an ongoing or indefinite basis by relatives or friends ('informal kinship care') or by others in their individual capacity. The arrangement is at the initiative of the child, his/her parents, or other person without this arrangement having been ordered by an administrative or judicial authority or a duly accredited body. ⁹
Institutional care	'Large residential care facilities,' ¹⁰ where children are looked after in any public or private facility, staffed by salaried carers or volunteers working predetermined hours/shifts, and based on collective living arrangements, with a large capacity. ¹¹
Kafala	A means of providing care for vulnerable children, recognized under Islamic law and in article 20 of the Convention on the Rights of the Child and in 2.a and 161 of the UN Guidelines for the Alternative Care of Children. In practice, this may include providing financial and material support to a child in parental or alternative care, or, as referenced in the UN Convention on the Rights of the Child, may be an arrangement closer to adoption or fostering where a child is taken to live with another family ¹² As regards children, it is generally defined as a person's (<i>kafil</i>) commitment to voluntarily take care of the specific needs, maintenance, education and protection of a child deprived of his/her family (<i>makfoul</i>). However, its legal and practical effects differ from country to country, ranging from financial support for children in a residential facility to full-time care by the <i>kafil</i> in their family environment
Kinship care	'Family-based care within the child's extended family or with close friends of the family known to the child, whether formal or informal in nature.' ¹³ Kinship care can be both a form of permanent family-based care and a form of temporary alternative care. There are two types of kinship care. Informal kinship care is: 'any private arrangement provided in a family environment, whereby the child is looked after on an ongoing or indefinite basis by relatives or friends ... at the initiative of the child, his/her parents or other person without this arrangement having been ordered by an administrative or judicial authority or a duly accredited body.' ¹⁴ Formal kinship care is care by extended family or close friends, which has been ordered by an administrative or judicial authority or duly accredited body. ¹⁵ This may in some settings include guardianship or foster-care.
Legal guardian	A legal guardian is a person who has the legal rights and responsibilities to care for another person. A child's legal guardian will normally be the child's mother or father unless they have had their parental rights removed by a court order. Children without a legal guardian will require representation in the decision-making process to ensure their rights, opinions and best interests are protected.

⁹ UN General Assembly (2009) Guidelines for the Alternative Care of Children

¹⁰ UN (2009) Guidelines for the Alternative Care of Children.

¹¹ NGO Working Group on Children Without Parental Care (2013) Identifying Basic Characteristics of Formal Alternative Care Settings For Children: A Discussion Paper'

¹² Cantwell and Jacomy-Vite (2011)

¹³ UN General Assembly (2009) Guidelines for the Alternative Care of Children Article III, 29c.i.

¹⁴ *ibid.* Article 29b.i.

¹⁵ *ibid.* Article 29b.i.

Orphan	For this report the term orphan will refer to a child whose both parents have died
Relinquishment	Is a process where a mother and/or father or others with or without parental authority decide not to raise their child and hand over the child to another 'carer' e.g. a child left behind in a maternity ward of a hospital or voluntarily taken to a residential care facility. Relinquishment unlike abandonment is when the identity of the mother or father, or other family members, are known
Residential care	<p>'Care provided in any non-family based group setting, such as places of safety for emergency care, transit centres in emergency situations, and all other short- and long-term residential care facilities, including group homes.'¹⁶</p> <p>A distinction is often made between different forms of residential care. For example:</p> <ul style="list-style-type: none"> • <i>Institutional care</i>: large-scale facilities where children are cared for in large groups, usually involving shift-systems, a common set of rules, children sleeping in dormitories, and isolation from wider communities. • <i>Small group homes</i>: children cared for in small groups, usually with one or two consistent carers, in specially designed and designated facilities.¹⁷
Separated children	Children who have been separated from both parents, or from their previous legal or customary primary care-giver, but not necessarily from other relatives. These may therefore, include children accompanied by other adult family members. ¹⁸
Small residential care settings	A 'public or private, registered, non-family based arrangement, providing temporary care to a group of 4 to 6 children, staffed by highly trained, salaried carers, applying a key-worker system, with a high caregiver-to-child ratio that allows for individualized attention for each child, based on the professionally developed case plan, which takes into account the voice of the child.' ¹⁹
Street connected children	Children living and/or working on the streets
Supervised independent living	Where children/young people live alone or in small groups in a house or apartment but are carefully supported by an adult whilst transitioning from a full-time care setting to independence.
Reintegration	The process of a separated child making, what is anticipated to be, a permanent transition back to his or her family and 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 ²⁰
Unaccompanied children	Children who have been separated from both parents and other relatives and are not being cared for by an adult who, by law or custom, is responsible for doing so. ²¹
Violence	For this report the term 'violence' will be used to denote all forms of abuse and exploitation including serious neglect and physical, sexual and emotional abuse

¹⁶ *ibid.* Article III, 29c.iv.

¹⁷ United Nations General Assembly (2019) 'Promotion and protection of the rights of children' adopted by the General Assembly at its 74th session, 19 November 2019, A/74/395

¹⁸ Definition from: Committee on the Rights of the Child General Comment No. 6, Treatment of unaccompanied and separated children outside their country of origin, UN document CRC/GC/2005/6 of 1 September 2005

¹⁹ UNICEF (2020) White Paper: The role of small-scale residential care for children in the transition from institutional to community-based care and in the continuum of care in the Europe and Central Asia Region. UNICEF ECARO Office

²⁰ (Inter-agency group on Reintegration 2016, p.1).

²¹ *ibid.*

Preface

1. Introduction

This desk review of the child protection system and alternative care in Palestine was commissioned by CEE/CIS/ME Programme Team in SOS CVI.

1.1 Aim and scope

The aim of the desk review was to develop a synthesis of findings drawn from literature relating to child protection systems and alternative care in Egypt, and provide an understanding of the structural and operational realities, and status quo, of the system in the country.

In this respect, the aim of the research undertaken in Palestine was to gain an understanding of the following:

- The socio-economic and cultural contexts in which child care reforms are taking place?
- The risks children face that can lead to loss of parental care and placement in alternative care
- The structures and processes governing child protection and alternative care, including the normative (legal and policy) framework, Government and non-governmental structures and their roles and responsibilities
- Provision of alternative care
- The child protection and alternative care workforce
- Attitudes that impact on protection and alternative care of children

1.2 International treaties and guidance underpinning the structure of the report

The structure and choice of information to include in this report has been informed by international conventions and guidance. In particular, this includes the UN Convention on the Rights of the Child (CRC), the UN Guidelines for the Alternative Care of Children (UN Guidelines), and the accompanying Handbook 'Moving Forward'²². This latter document identifies two basic principles that are described as the 'pillars' of the UN Guidelines: 'necessity' and 'suitability'. It has also been informed by the recent United National General

²² Cantwell, N.; Davidson, J.; Elsley, S.; Milligan, I.; Quinn, N. (2012). *Moving Forward: Implementing the 'Guidelines for the Alternative Care of Children'*. UK: Centre for Excellence for Looked After Children in Scotland. Available at: www.alternativecareguidelines.org

Assembly Resolution on the Rights of the Child ²³ adopted on 18th December 2019, which strengthens the commitment of States to children without parental care and those at risk of being so.

The UN Guidelines clearly state that the family is the 'fundamental group of society and the natural environment for the growth, well-being and protection of children' and that 'efforts should primarily be directed to enabling the child to remain in or return to the care of his/her parents, or when appropriate, other close family members.' This '**necessity** principle therefore, safeguards children from being removed from parental care and placed in alternative care unnecessarily. The '**suitability**' principle as also laid out in the UN Guidelines, requires a range of good quality alternative care settings be made available so that if care is deemed as necessary, each child's individual needs, circumstances and wishes can be met. It also requires ending the use of unsuitable placements such as the use of institutions and detention centres. The UN Guidelines require the most suitable forms of alternative care be provided under conditions that 'promote the child's full and harmonious development'. All efforts should also be made to return children to the care of their family as soon as possible or, if finally deemed not possible, to find other suitable permanent family-based care.

²³ United Nations General Assembly (2019) 'Promotion and protection of the rights of children' adopted by the General Assembly at its 74th session, 19 November 2019, A/74/395

2. Summary of findings

This section contains a brief summary of some key issues as highlighted during this desk review relating to the child protection system and alternative care provision in Palestine.

- There is a unique situation in Palestine as a result of different administrations of Gaza and West Bank. This means there is a disconnect in systems and the implementation of legislation etc.
- It has been possible to source information on child protection concerns in Palestine, which probably reflects the presence of numerous humanitarian needs in the country. However, this also highlights the lack of specific evaluation and reporting on alternative care. Furthermore, even those reports providing data on child protection concerns and processes, are predominantly quantitative in nature, there is less information about the quality of services and efficacy in implementation of child protection procedures and services.
- From the data available, there appears to be relatively small numbers of children in residential care in Palestine.
- Children are placed in family-based alternative care but this is only possible for certain children such as those of unknown parentage. Further more, although the placements are referred to as 'foster' care, they are permanent placements and do not meet international foster care standards.
- There is no systematic application of family reunification for children placed in alternative care being applied across the country.
- There was no information found during this literature search on regulations and investment in programmes to support young people ageing out of care.
- The law does not allow for adoption of children thus they are not provided with a legal secure family setting in which all their legal entitlements and rights should be upheld.
- There is a lack of longitudinal qualitative and quantitative data held in a centralized database that would indicate the number of children at risk of losing parental care and provide disaggregated information about children in care. This would also allow an understanding of trends as for example, to know whether the use of residential care and alternative family care is on the increase or is declining. This lack of data also means it is difficult to discern the exact reasons children are in care.
- Much of the development of the child protection system in Palestine has occurred since the arrival of the Palestinian Authority. UN bodies and NGOs - international and national - have played a major role in this development including technical guidance and support to the Ministries. It is noted however, that these procedures may have been overtly influenced by western practices.
- Although there is acknowledgment as to the use of child protection case management in the literature, there is a lack of evidence about how it is being implemented, or if utilized well.
- As with other countries, there is confusion over terminology including definitions of defined abandonment and relinquishment. Furthermore, use of is also used by some as the term for children born out of wedlock.
- There is recognition in the law and in strategic documents that family-based care is a priority but this is not necessarily being carried through when allowing children to be sent into residential care due to the lack of family-based alternative care or prevention of separation.
- There is a concern that children who do need protection through alternative care are not receiving it e.g. families prefer not to report child protection concerns, particularly issues of sexual abuse
- There may be further information in the documents that were kindly provide by the SOS team. However, some were in formats that would not download or translate

3. Methodology

Desk review

A literature search was carried out using the search engines Web of Science, Google Scholar, and Google as well as the websites of such organizations as UNICEF and the Better Care Network. In addition, source documents in Arabic and English were provided by key informants from the SOS National Association in Egypt.

The literature was reviewed by assessing the relevance of information to key research questions in order to examine all relevant aspects of child protection and alternative care systems including relevant actions of prevention, care placement, reunification and leaving care.

Interviews with key informants

A short interview was conducted with team members of the SOS National Association in Palestine in order to gain additional information and/or confirm information that had been gathered during the desk review.

Limitations and notes

The information in this report has been drawn from documents that could be sourced in English and Arabic. Although a comprehensive search was conducted to find these documents, complimented by reports and other information provided by national teams, it is not possible to guarantee that all relevant published data has been found.

Translating Arabic into English, as well as reading reports produced in English, revealed the challenge that different authors have used differing terminology for the same topics. For example, different reports use variations for the names of government departments, national programmes and forms of alternative care. Furthermore, information sourced in documents has in some instances, proven to be contradictory in nature.

This report does not include an assessment of children placed in 'boarding' schools although it is acknowledged by the author that she would consider these to be residential institutions as defined in the report 'European Expert Group on the Transition from Institutional to Community-based Care: Guidance on implementing and supporting a sustained transition from institutional care to family-based and community-based alternatives for children, persons with disabilities, persons with mental health problems and older persons in Europe' issued November 2012.

The term Ministry of Social Affairs and Ministry of Social Development has been used interchangeably across documents reviewed for this study. It also translates both ways on the Palestinian Authority's own website. It may also be, although not confirmed, that the name of the Ministry has changed from Ministry of Social Affairs to Ministry of Social Development. For purposes of this report, the term Ministry of Social Development will be used, as this is how the Ministry is described in the State of Palestine's submission to the Commission on the Rights of the Child.

4. Context

4.1 Geography



Figure 1. Map of Palestine²⁴

²⁴ P2

The State of Palestine is situated in the Middle East. The West Bank has a land borders with Jordan. Gaza, which is just 25 miles (40 km) long, and 4-5 miles (6-8 km) wide has a land border with Egypt and also borders the Mediterranean Sea.²⁵ There is a total land area of 6,000 square kilometers.²⁶

Palestine is also referred to as the 'Occupied Palestinian Territories' or alternatively the 'West Bank' and the 'Gaza Strip'. For the purposed of this study, the term 'Palestine' will be used throughout. Palestine is now recognized as a sovereign state by the UN and many of its members.²⁷ On the 29th November 2012, the UN General Assembly resolution 67/19 accorded to Palestine "non-member observer state" status in the United Nations, 'without prejudice to the acquired rights, privileges and role of the Palestine Liberation Organization in the United Nations as the representative of the Palestinian people, in accordance with the relevant resolutions and practice.' It also reaffirmed the right of the Palestinian people to self-determination and expressed hope that the Security Council would consider favorably the application submitted on 23 September 2011 by the State of Palestine for admission to full membership in the United Nation.²⁸

Much has been written about the history of Palestine, including the period of the British Mandate for Palestine; the manner in which the Balfour Declaration of 1917 recognized a 'national home' for Jewish people and its consequences leading to the establishment of the State of Israel; the long standing occupation of Israel and building of settlements; the political division between Palestinian authorities in the Gaza Strip and the West Bank; and wars including the 6 day war in 1967 during which thousands of Palestinians were displaced, the periods of intifada, wars and the ongoing conflict between Palestine and Israel. This ongoing situation has resulted in generations of children growing up in a country dominated by conflict, division and violence. Thousands of Palestinians have been killed, injured, displaced, made homeless, and arrested. They have had their homes, schools, hospitals, places of worship and other essential infrastructure damaged or completely destroyed. They have come under attack from missiles and other weapons, including chemical weapons.

An evaluation of need conducted by the Protection Cluster in Palestine²⁹ - part of the UN OCHA Cluster Approach³⁰ - estimated that over 2.1 million Palestinians experience, or are at risk of, conflict, violence and forcible transfer, and will be in need of protection assistance in 2021.³¹ At the end of 2020, OCHA also published³² the following:

The humanitarian context of the occupied Palestinian territory (oPt) is a protracted protection crisis, characterized by more than 50 years of Israeli occupation, insufficient respect for international humanitarian and human rights law, internal Palestinian political divisions, and recurrent escalations of hostilities between Israel Security Forces and Palestinian armed groups. As a result, significant humanitarian and protection challenges prevail including: a continuing need for protection measures for over two million Palestinians - around 40 per cent of the population - who are experiencing, or at risk of, conflict and violence, displacement, and denial of access to livelihoods, among other threats; entrenched levels of food insecurity, brought on by high levels of poverty and unemployment, especially among the refugee population; inadequate access to essential services for the most vulnerable households; and limited or declining ability of vulnerable households to cope with the prolonged nature of the humanitarian crisis.³³

A further significant event that has, and continues to impact on the development of legislation, planning, oversight and delivery of child protection services, is the split in the authorities governing authority the West Bank and Gaza. Following a period of tension between Hamas and Fatah, elections were held in 2006 with a declared win for Hamas, including agreement from international election observers. A coalition government was formed. However, violence ensued leading to President Abbas to dismiss the Hamas led government and declare a state of emergency in 2007. The West Bank remained under control of the Fatah led Palestinian Authority - recognized by the international community - and Hamas led the administration of Gaza. A deal was

²⁵ Sourced at: <https://www.britannica.com/place/Palestine/Palestine-and-the-Palestinians-1948-67>

²⁶ Sourced at

https://databank.worldbank.org/views/reports/reportwidget.aspx?Report_Name=CountryProfile&Id=b450fd57&tbar=y&dd=y&inf=n&zm=n&country=PSE

²⁷ Sourced at: <https://worldpopulationreview.com/countries/palestine-population>

²⁸ Status of Palestine in the UN - Non-member observer State status - Secretary General Report sourced at:

<https://www.un.org/unispal/document/auto-insert-182149/>

²⁹ Please see this link for further details of the Protection Cluster: <https://www.humanitarianresponse.info/en/operations/occupied-palestinian-territory/protection#:~:text=The%20situation%20in%20the%20occupied,crisis%20with%20serious%20humanitarian%20consequences.&text=The%20Protection%20Cluster%20is%20part,the%20UN%20DSRSG%2FHumanitarian%20Coordinator.>

³⁰ <https://www.humanitarianresponse.info/en/operations/occupied-palestinian-territory/protection#:~:text=The%20situation%20in%20the%20occupied,crisis%20with%20serious%20humanitarian%20consequences.&text=The%20Protection%20Cluster%20is%20part,the%20UN%20DSRSG%2FHumanitarian%20Coordinator.>

³¹ *ibid.*

³² Document provided by SOS in Palestine but undated and no reference apart from being a publication of the Child Protection Cluster

³³ P18

negotiated in 2014 in which Hamas agreed to a unity government leading to handover of the administration of Gaza to the Palestinian Authority based in Ramallah. However, it was not until 2017 that the Palestinian Authority was able to start to take control of public institutions in Gaza. These efforts failed and the Palestinian Authority withdrew. In 2019, the unity government also ended. Gaza therefore remains under the control of Hamas, and the West Bank is controlled by Fatah.

4.2. Population

In a UNICEF 2018 study, a population of 4.8 million people were reportedly living in the West Bank and Gaza of which 2.3 million were children.³⁴ In 2018, population growth was estimated to be 2.5%.³⁵ The principal language is Arabic.

4.3 Economy

In 2018, GDP per capita was US\$ 3,463.³⁶ A 2019 OCHA study estimated 25% of the labour force were unemployed. The same study also found 29% of the population were living under the poverty line with a noticeable difference between those living in Gaza (53%) and those in the West Bank (14%). In total, 17% of the population are reported to be living in deep poverty: 34% in Gaza and 6% in the West Bank. A decline in the aid reaching Palestine, and the spread of the COVID-19 virus, has posed further risks to the economy.³⁷ Figure 2. illustrates the increase in poverty between 2011 and 2017 across Palestine

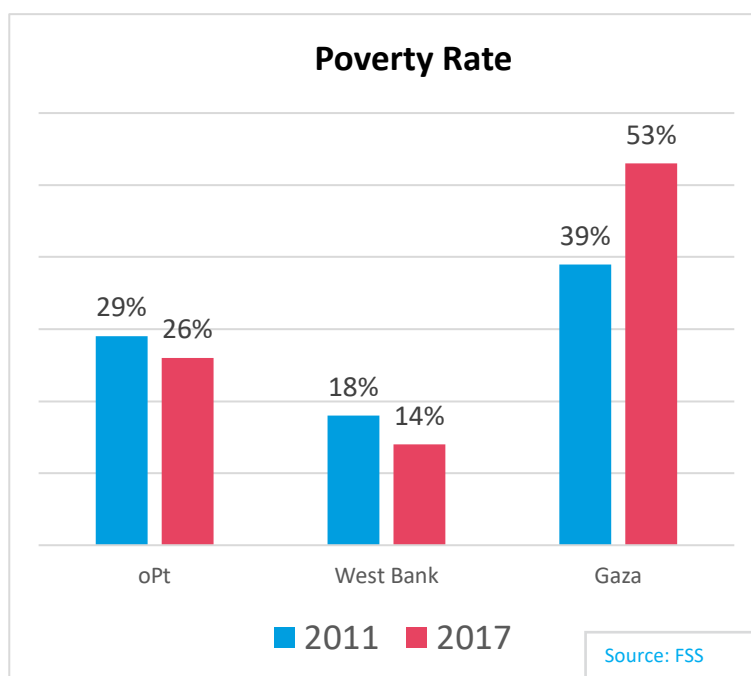


Figure 2. Poverty rates in Palestine 2011 and 2017³⁸

³⁴ P5

³⁵ Sourced at:

https://databank.worldbank.org/views/reports/reportwidget.aspx?Report_Name=CountryProfile&Id=b450fd57&tbar=y&dd=y&inf=n&zm=n&country=PSE

³⁶ Sourced at: <http://pubdocs.worldbank.org/en/394981554825501362/mpo-pse.pdf>

³⁷ P18

³⁸ *ibid.*

4.4 Religion

The vast majority of Palestinians are Muslim with the largest denomination being Sunnis (85%) (Mostly Shafi'i) and 15% non-denominational.³⁹ Six percent of the population are Christians from a variety of denominations.⁴⁰

4.5 Education

In 2018, primary school enrolment was reported to be 98.6% and completion rate est. 97% and secondary school enrolment was 89%.⁴¹ However, in 2019, OCHA reported an estimated 1.2% of 6 to 9 year olds, 5% of 10 to 15 year olds, and 25% of 16 to 17 year olds were out of school.⁴² Severe household poverty has been identified as a factor related to children being out of school leading to risks of child labour and early marriage being consequences.⁴³

In 2017, an estimated 24% of girls with disabilities between the ages of 6 and 17 years, and 30% of boys were not enrolled in education. A total of 33% of children with disabilities aged 10 years and older were illiterate.⁴⁴

Schooling is also often disrupted due to factors relating to the ongoing conflict, including bombing of schools, difficulties crossing checkpoints, violence experienced on the way to school, as well as violence within schools as illustrated in Figure 3.⁴⁵

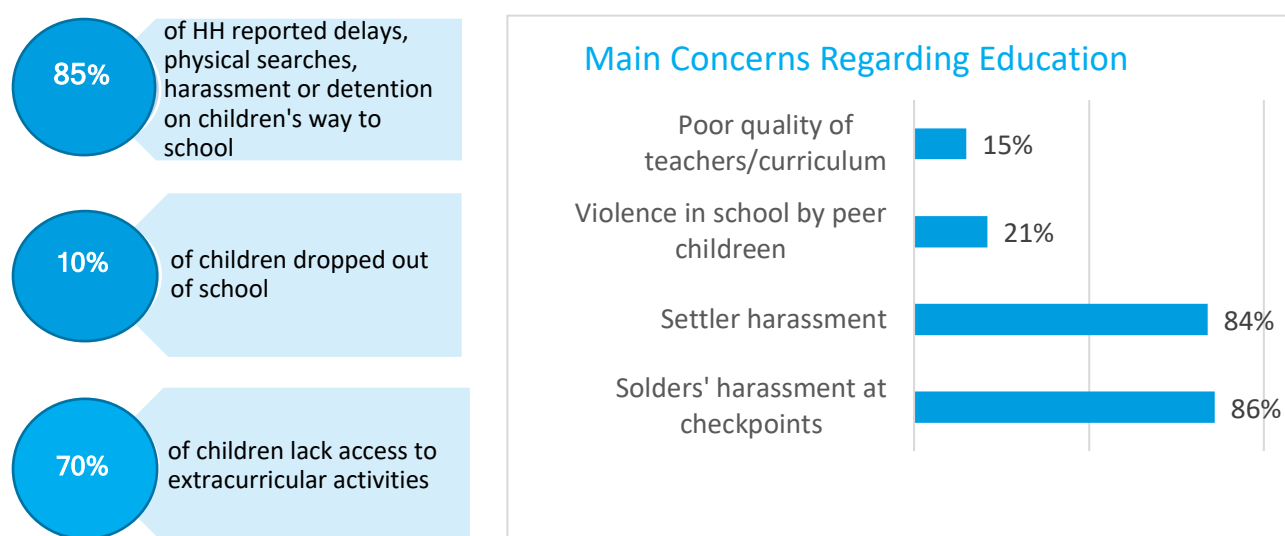


Figure 3. Main concerns regarding education (2019)⁴⁶

4.6 Health

In 2018, life expectancy was 74 years. In the same year, the fertility rate (total births per woman) was 3.6.⁴⁷

A 2019 OCHA publication illustrates the impact of the humanitarian situation encapsulated in Figure 4. and the some of the health concerns facing thousands of children.⁴⁸

³⁹ Sourced at: https://en.wikipedia.org/wiki/Islam_in_Palestine

⁴⁰ Sourced at: <https://worldpopulationreview.com/countries/palestine-population>

⁴¹ Sourced at:

https://databank.worldbank.org/views/reports/reportwidget.aspx?Report_Name=CountryProfile&Id=b450fd57&tbar=y&dd=y&inf=n&zm=n&country=PSE

⁴² P18

⁴³ ibid.

⁴⁴ ibid.

⁴⁵ P18

⁴⁶ ibid.

⁴⁷ Sourced at:

https://databank.worldbank.org/views/reports/reportwidget.aspx?Report_Name=CountryProfile&Id=b450fd57&tbar=y&dd=y&inf=n&zm=n&country=PSE

⁴⁸ P18

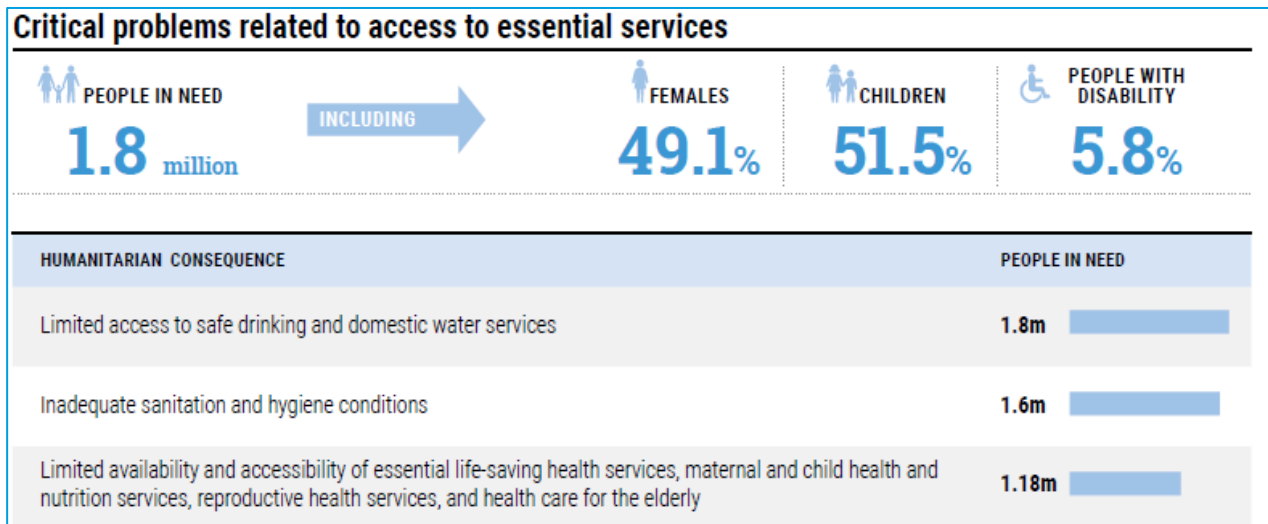


Figure 4. Critical problems related to lack of access to essential services in 2019⁴⁹

The humanitarian situation, dire economic conditions, and restricted freedom of movement for many, are recognized as having a significant effect on children’s mental health and well-being.⁵⁰ The aforementioned 2019 OCHA publication highlights the serious concern of psychosocial distress and mental health facing Palestinians. In 2019,⁵¹ an estimated 299,979 children were suffering from mild, moderate and severe psychosocial distress.

The same report also called attention to the increase in maternal and infant mortality. Rates have risen from 5.9 to 16.7 deaths per 100,000 live births between 2017 and 2018. Factors contributing to this situation include weakened primary health care, shortage of essential drugs. Furthermore, a total of 324,143 children in Gaza under the age of 5 years were reported to be suffering from micronutrient deficiencies. Some of the causes of poor child health included food insecurity, poor maternal nutrition status, and inadequate water and sanitation. It is forecast that this situation may lead to an even greater risk of acute malnutrition, impaired physical growth and cognitive development and even death.⁵²

Figure 5. is extracted from a 2018 UNICEF⁵³ report. It illustrates an array of health concerns facing children in early childhood in Palestine.

⁴⁹ *ibid.*

⁵⁰ P10

⁵¹ P18

⁵² *ibid.*

⁵³ P5

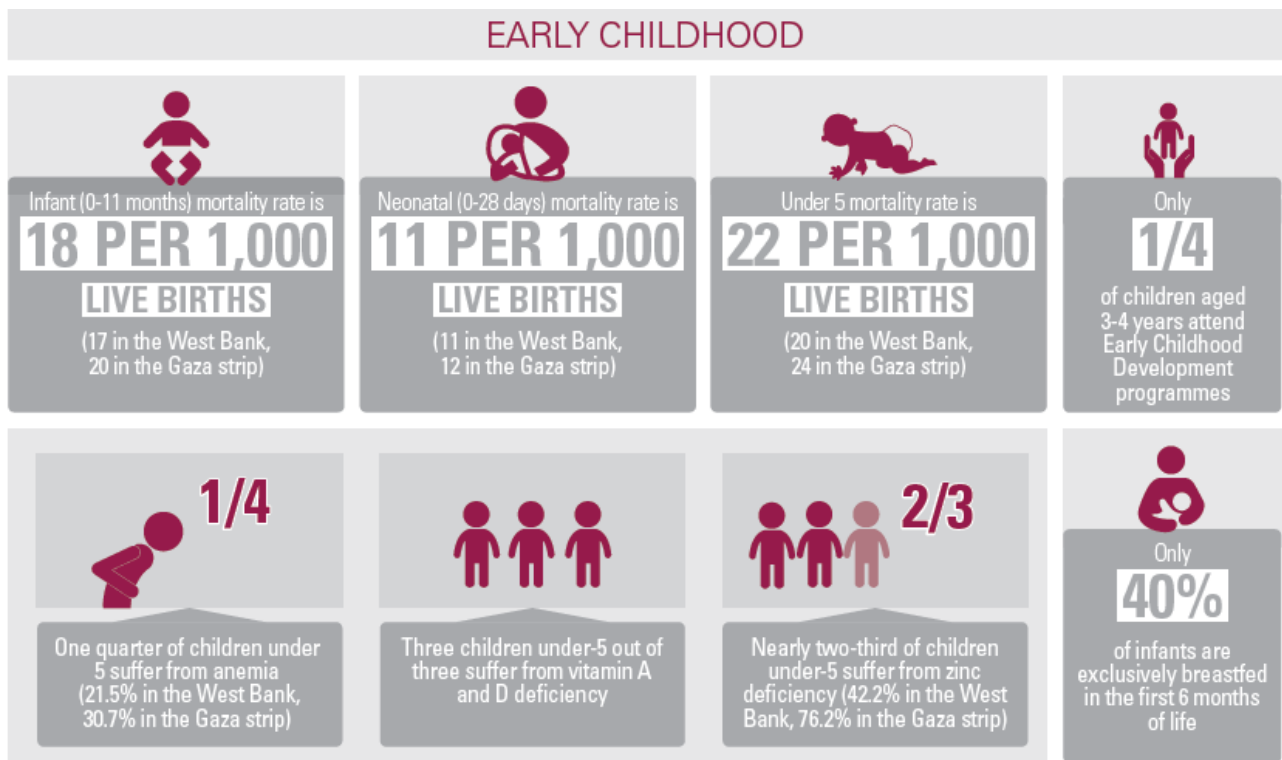


Figure 5. Health concerns for children in early childhood published 2018)⁵⁴

A report⁵⁵ on violence experienced in Gaza further highlights the ongoing impact of conflict experienced by children with the example of a period of violence in 2014 often referred to as the 50-day war. At this time, 551 children and 3,436 children were injured. 82 hospitals and clinics and 259 schools in Gaza were destroyed or damaged.

A major concern is the restrictions imposed on Palestinians travelling out of Gaza with only a few who require medical treatment that cannot be obtained in the Strip being given permission to leave.⁵⁶

Exposure to illicit drugs has also been recognized as a concern. Research published in 2020⁵⁷ reported how there were an estimated 80,000 drug users in Palestine with children and young people at particular risk. As depicted in Figure 6. this includes children who use drugs as well as associated risks.

⁵⁴ P5

⁵⁵ P10

⁵⁶ P10

⁵⁷ P19

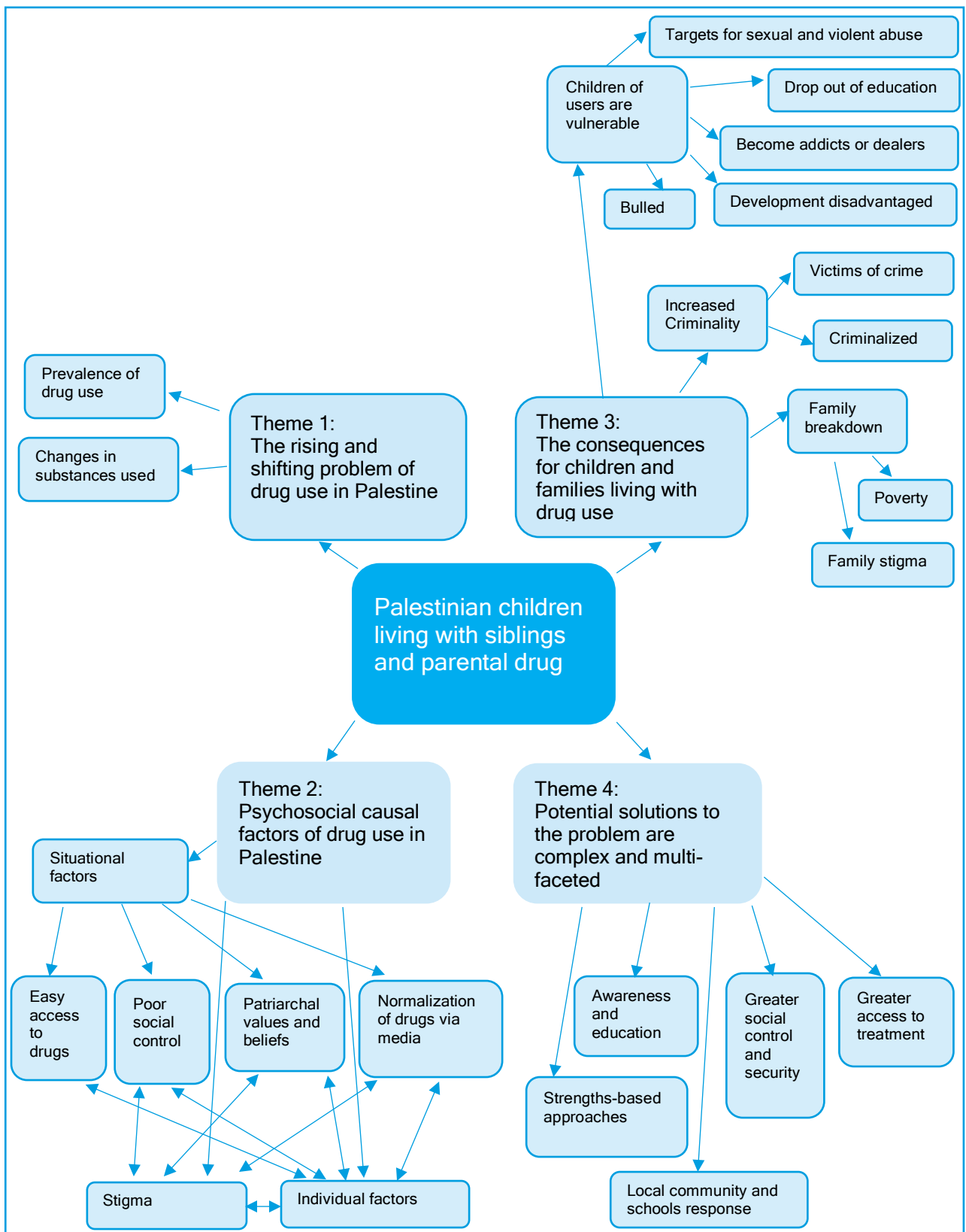


Figure 6. Risks associated with drug taking in Palestine (published 2020)⁵⁸

Data relating to children with disabilities can be found in Section 5 below.

⁵⁸ E19

5. Child protection concerns and reasons children are at risk of entering alternative in Palestine

The United Nations General Assembly Resolution (2019) 'Promotion and protection of the rights of children' and the UN Guidelines identify the importance of collating information documenting protection and other risks children face that can lead to loss of parental care and placement in alternative care. Gathering this information provides evidence that can inform actions that prevent family separation, provide access to programmes and services that prevent violence against children and, when necessary, provide suitable care options for the temporary care of children when needed.

Furthermore, it is well recognized that violence in childhood 'can have negative lasting impacts on health and wellbeing.'⁵⁹ Therefore, national child protection systems should, 'prevent, respond to, and resolve the abuse, neglect, exploitation and violence experienced by children'⁶⁰. To do this, such systems should provide violence prevention and mitigation programmes which can avert separation of children from parental care. In this respect, differing international conventions and treaties, including the newly adopted 2019 UNGA Resolution on the 'Promotion and protection of the rights of children'⁶¹, are very clear that all forms of violence against children in all settings are condemned and must be addressed. The resolution urge States,

to strengthen efforts to prevent and protect children from all such violence through a comprehensive, gender-responsive and age-appropriate approach and to develop an inclusive multifaceted and systematic framework, which is integrated into national planning processes, to respond effectively to violence against children and to provide for safe and child-sensitive counselling, complaint and reporting mechanisms and safeguards for the rights of affected children.

It has been difficult to find a centralized database containing longitudinal and/or disaggregated data that provides a comprehensive understanding of the exact reasons children are being received into alternative care in Palestine. However, it is recognized that children are often victims of multiple forms of violence, which compound their vulnerability, and risk of family separation. The information below therefore, provides a snapshot of a range of protection and other risks that may lead to placement in alternative care.

To be noted is the frequency with which data is disaggregated in terms of findings relating either to West Bank or to Gaza with few documents consolidating information on children across Palestine. It is assumed this is due to the political and administrative divide between these two areas of Palestine

⁵⁹ Kumar, A.K., Stern, V., Subrahmanian, R., Sherr, L., Burton, P., Guerra, N., Muggah, R., Samms-Vaughan, M., Watts, C., & Mehta, S.K. (2017) Ending violence in childhood: a global imperative. *Psychology, Health & Medicine*, Vol. 22 (S1)

⁶⁰ Pells, K. (2012) Risky lives': risk and protection for children growing up in poverty. *Development in Practice* Vol.22 (4) pp.562-673

⁶¹ United Nations General Assembly (2019) 'Promotion and protection of the rights of children' adopted by the General Assembly at its 74th session, 19 November 2019, A/74/395

Orphans

The literature reviewed for this study most often defines an orphan as a child who has lost one parent. For example, Figure 7. depicts the percentage of 'orphan' children in Palestine in 2014⁶² and Figure 8. shows the number of 'orphans' registered with the Ministry of Social Development in 2016.⁶³ However, in both these charts an orphan is defined as someone who has lost either one or both parents.

Region and Gender		One or both parents dead (1)	Living with either parent (2)	Living with father		Living with mother	
				Mother dead	Mother alive	Father dead	Father alive
Total		2.3	0.6	0.4	0.7	1.7	1.7
Region	West bank	2.0	0.3	0.3	0.5	1.6	1.5
	Gaza Strip	2.6	0.9	0.6	1.0	1.8	2.1
Gender	Male	2.2	0.3	0.4	0.7	1.6	1.6
	Female	2.4	0.8	0.4	0.7	1.8	1.9

Figure 7. Percentage of 'orphan' children in Palestine by place of residency according to region and age in 2014⁶⁴

		Both parents dead	Only father alive and lives in the same house	Only father alive and does not live in the same dwelling	Only mother alive and lives in the same dwelling	Only mother alive and does not live in the same dwelling
Palestine	Registered	412	1,539	266	17,561	778

Figure 8. Number of 'orphans' registered with the Ministry of Social Development 2016⁶⁵

A study published by Save the Children in 2018,⁶⁶ drew on data from the Palestinian Multi-Indicator Cluster Survey of 2014 revealing 2.3% of children aged 0-17 years had lost either one or both of their parents. In the Gaza Strip, 2.1% of children aged 0-17 years lived with only their mother although their fathers were alive while this rate was 1.5% in the West Bank.⁶⁷

Abandonment and being born out of wedlock

With regard to children of unknown parentage, it is the responsibility of the Ministry of Social Development to complete a birth notification form. After ensuring that the child has a file containing all the necessary documentation, it is the responsibility of the Ministry of Social Development to pass the file to the Ministry of the Interior, which registers the child and issues a birth certificate.⁶⁸ Procedures are governed by the Civil Status Law No.2 (1999) (Article 22) which requires the following⁶⁹:

1. If a newly born infant with unknown parents is found, he/she should be immediately handed over to an institution prepared to receive and medically care for the newly born infants. The Institutions should notify the competent Police authority
in whose jurisdiction the child was found or the Head of the Local Authority

⁶² P2

⁶³ ibid.

⁶⁴ ibid.

⁶⁵ ibid.

⁶⁶ ibid.

⁶⁷ ibid.

⁶⁸ P3

⁶⁹ P29

2. The Police or the Local Authority should prepare a report about the conditions and circumstances in which the child was found, the place found, date, approximate age, gender, the condition he/she was found in, description, any distinguishing marks, description of the clothes, and any material things, which are found with him. The place where the child was found should also be recorded. The Police or the Local Authority should hand over the child and report to a care setting approved by the Ministry of Social Development. After three months if the child is not claimed or parents found, the care setting, in collaboration with the Ministry of Social Development, record the child in the civil register with a fictitious quadruple name, and a record of their religion as Muslim.

Data contained within a pp presentation provided by the SOS team in the West Bank (unattributed, probable date 2017) ⁷⁰ states the number of children of unknown parentage that had become the responsibility of the authorities that year was 12. It is assumed these were abandoned children. The information in Figure 9. depicting the number of children of unknown parentage and illegitimate birth between 2010 and 2018 was provided in document sent by the SOS team in the West Bank (unattributed and undated). In 2018, 60% of these children were male and 40% female.

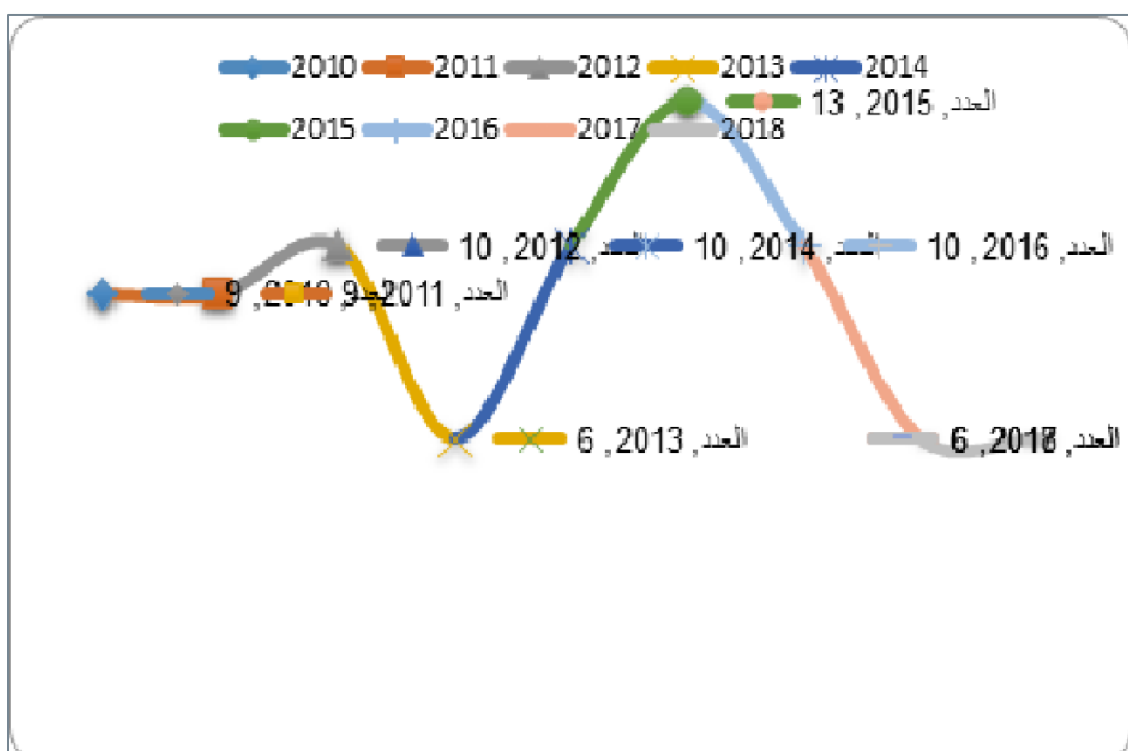


Figure 9. Number of children of unknown parentage and illegitimate birth by year (West Bank)

According to an alternative report submitted by Human Rights Watch⁷¹ to the Committee on the Rights of the Child in 2019, Palestinian authorities require a marriage certificate for women to give birth in a hospital and to register births. In the West Bank, in cases of unmarried pregnant women, the hospital will refer the case to the Ministry of Social Development. If the mother wants to keep the child, the Ministry assesses her social and economic capability, and the safety of both the child and the mother, before allowing her to keep the child. However, if she does not meet the criteria, the child is placed in residential care with the possibility of being placed with an alternative ‘foster’ family. The report goes on to explain⁷² how children born out of wedlock are provided names (first, middle, and surname) by the State but are not given a full family name. Indeed, they are not allowed to take an existing family name, including that of their mother or of the ‘foster’ family (as noted later in this study, foster care is a permanent and not temporary placement). The mother’s name and ID number are however, noted on the child’s registration documents. It was reported⁷³ that as of April 2018, 27 children born out of wedlock were in the Social Development Ministry’s care in the West Bank. In Gaza, authorities add the

⁷⁰ P12

⁷¹ P17

⁷² *ibid.*

⁷³ *ibid.*

name mawla (meaning “in custody of”) to the child’s name before their given surname instead of “bin” (meaning ‘son of’ in Arabic).⁷⁴

Research on ‘foundling’ and ‘abandoned’ children published in 2019⁷⁵ illustrates the misuse of terminology. The study referred to abandoned children as ‘foundlings’ and defined relinquished as ‘abandoned’. For the remainder of the study however, both founding and relinquished children were referred to as abandoned. With this in mind, the researchers calculated the ratio of child abandonment in Palestinian society to be very low (0.03%) in the years between 1999 and 2017. In total, this was estimated children out of an estimated 36,2032 births between these years.

The researchers interviewed mothers that had abandoned their children. This revealed that 44.6% of the mothers were below the age of 20 years old at the time the child was born, and 33.7% had been aged be of 20-30 years. The majority were single (71.7%). Approximately 80% had not completed junior school. Almost 80% of the mothers were living in socio-economic difficult circumstances and 22% had a disability. Findings also showed children were abandoned on the doorsteps of churches and mosques (23.5%), on rubbish sites, dustbins and landfills (18.3%), in parks and open land (16.5%), hospitals (14.8%), and at other sites including Crèche, sewers, and on the street. The majority of children were abandoned during the night (55.6%).⁷⁶

Of 192 children in the study, 52.2% were and 47.8% were girls. Most of the children had been abandoned when only 1 day old (54.8%), followed by those aged of 2-5 days (24.3% of the children). This suggests that most children are abandoned as newborn babies and risk of abandonment decreases as children get older. The study found the vast majority of children had been classified as “illegal child” (80%) due to being born out of wedlock. This situation was attributed to a number of reasons including a promise of marriage (40.2%), family incest (32.6%), prostitution (21.7%) and rape (5.4%).⁷⁷

Violence

Children are at risk of all forms of violence resulting from protection risks within families, at school, in the local community etc. and from ongoing conflict.⁷⁸ Connections have also been made between these two situations with the violence, daily hardships, trauma and dislocation because of occupation integrally linked to family stress and dysfunction.⁷⁹ Figure 10. contains information on some of the risks highlighted in a 2018 UNICEF report.⁸⁰

⁷⁴ *ibid.*

⁷⁵ P29

⁷⁶ P28

⁷⁷ *ibid*

⁷⁸ P7

⁷⁹ *ibid*

⁸⁰ P5



Figure 10. The impact of violence on children in Palestine (published 2018)⁸¹

According to annual reports issued by the Child Protection Network in the West Bank, in 2014 and 2015,⁸² a total of 1,010 children (438 girls and 572 boys) were known to have been subjected to sexual assault, physical abuse, economic exploitation, neglect and ill-treatment. In 2016, this total decreased to 566 (232 girls and 334 boys).⁸³

Violence in the home and severe corporal punishment have been identified as prominent risks to children. Government data reported by Child Frontiers in a 2015, study⁸⁴ revealed that, while only 28.2% of adult respondents in a 2015 survey believed that a child should be physically punished, 79.2% of child respondents aged 11-14 years old reported having experienced physical punishment at home.⁸⁵

Figure 11. contains data published in 2018, collected from respondents for a study undertaken by the Child Protection Working Group in Gaza. It shows the percentage of respondents in different areas of the Gaza Strip that understood home is not always a safe place for children. Data from the same report illustrated in Figure 12. depicts the percentage of respondents that identified domestic violence, severe corporal punishment and harmful traditional practices as risks to children, with domestic violence being the highest risk.

⁸¹ P5

⁸² P3

⁸³ *ibid.*

⁸⁴ P9

⁸⁵ *ibid.*

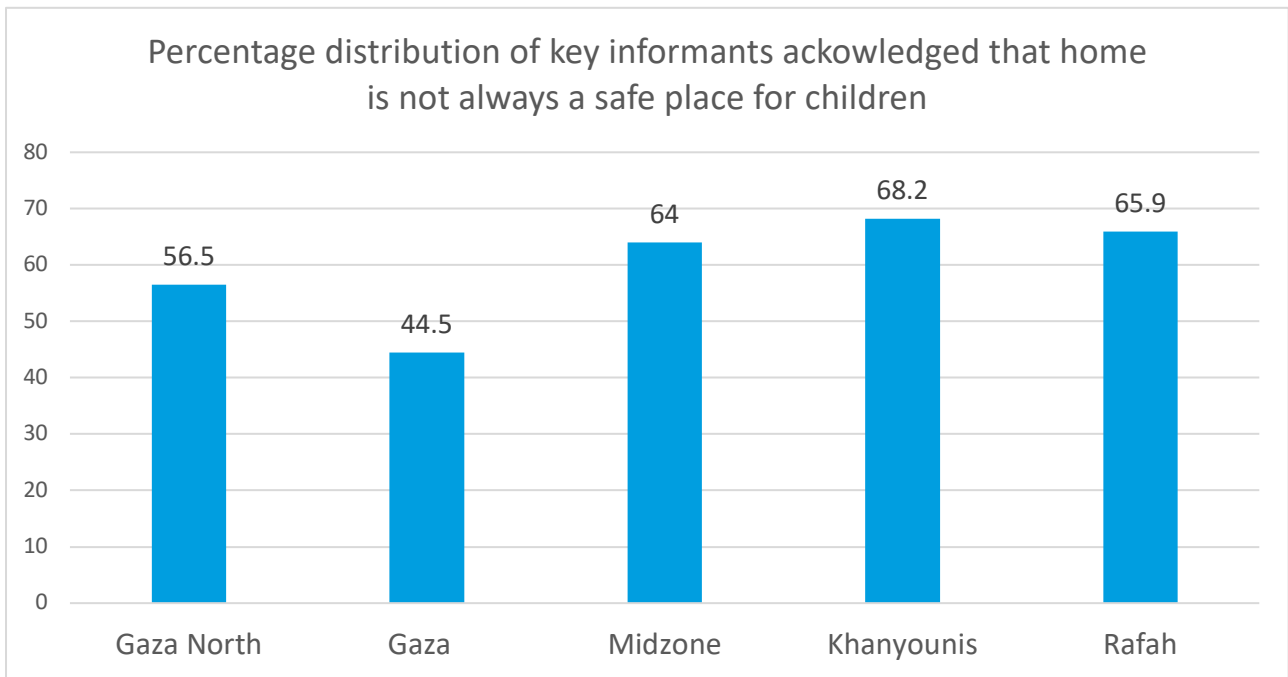


Figure 11. Percentage of key informants in a study that acknowledged home as not always being a safe place for children in Gaza (published 2018)⁸⁶

What are the main risks for children in our area				
Gaza Strip All (n 604)	Urban (n 402)	Rural (n 63)	Camp (n 73)	ARA (n 66)
Domestic Violence (73%)	Domestic violence (71.6%)	Domestic violence (73%)	Domestic violence (84%)	Domestic violence (73%)
Severe corporal punishment - beating (51%)	Severe corporal Punishment (47.5%)	Severe corporal Punishment (50.8%)	Severe corporal punishment (49%)	Severe corporal punishment (70%)
Harmful traditional practices (23.2%)	Harmful traditional practices (20%)	Harmful traditional practices (44.4%)	Harmful traditional practices (30.1%)	Harmful traditional practices (15.2%)

Figure 12. Percentage of key informants that identified protection risks for children in Gaza (published 2018)⁸⁷

The same study published in 2018⁸⁸ also identified the risk of sexual violence being faced by children. Respondents thought this form of violation was increasing. Focus group participants suggested sexual violence is part of wider pattern of violence in the community. When asked about the age of children who suffered sexual abuse, almost three quarters of key informants thought 6 to 14 years old were most at risk with concerns that there were few specialized services available to these children.⁸⁹

The following information was provided in a document sent by the SOS team in the West Bank (unattributed and undated but it is believed the data has been extracted from the State of Palestine Annual Statistical Report for the Year 2017 published in 2018 by the Ministry of Social Development):

The number of children subjected to abuse, neglect and exploitation reported to counsellors of child protection in all departments of social development in the West Bank in 2017 was 1,092. This was an increase on previous years, which was in part, attributed to the use of new government instructions for the reporting of child

⁸⁶ Pg

⁸⁷ *ibid.*

⁸⁸ *ibid.*

⁸⁹ See also P10

protection cases by relevant stakeholders. This required all teachers, doctors, social workers and others entrusted with the care and protection of children must report such concerns. The document also contained a copy of Figure 13. depicting number of reported child protection cases in the West Bank between 2016 and 2017 and Table 1. showing information from 2017. Of the reported cases in 2018, 524 cases were those involving girls and 568, boys. A reported 77% of cases were related to violence within the home. Of all reported cases, 824 children were violated within their family, 93 children by 'foster carers' (as translated from the Arabic), and 175 were children in residential care 'institutions'.

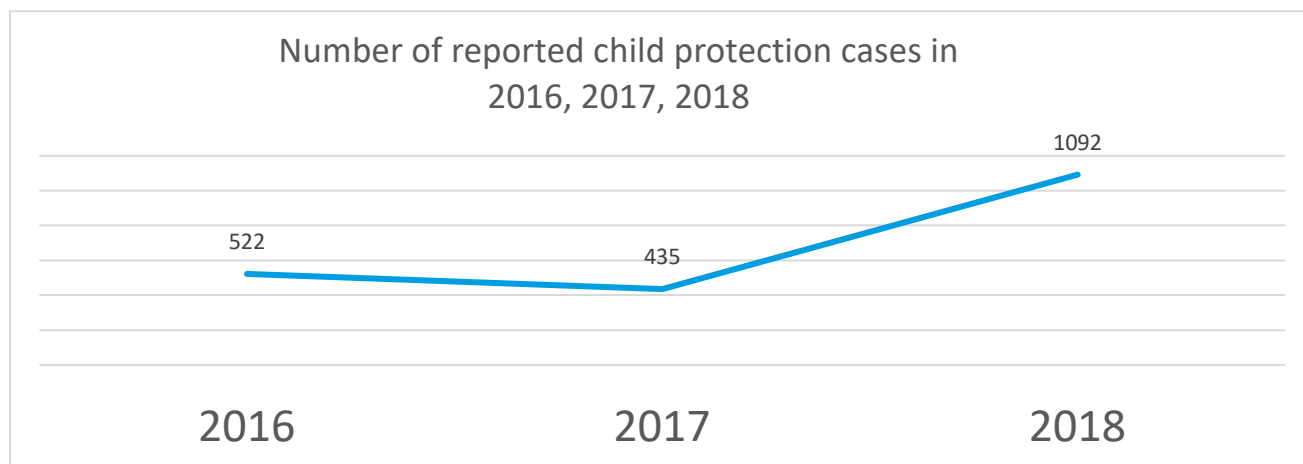


Figure 13. Number of reported child protection cases, West Bank 2016 - 2018

Type of abuse	Number of reported cases	Percentage of reported cases
Complete sexual assault	25	5.7%
Sexual assault and harassment	31	7.1%
Physical assault	45	10.3%
Economic exploitation	46	10.6%
Sexual exploitation	8	1.8%
Neglect and abuse	280	64.45%
TOTAL	435	100%

Table 1. Percentage of reported child protection cases by type of abuse (2017)

⁹⁰ As illustrated in Figure 14, most cases of neglect or emotional abuse, labour exploitation, and physical abuse are reported as being perpetrated by family members.

⁹⁰ p7

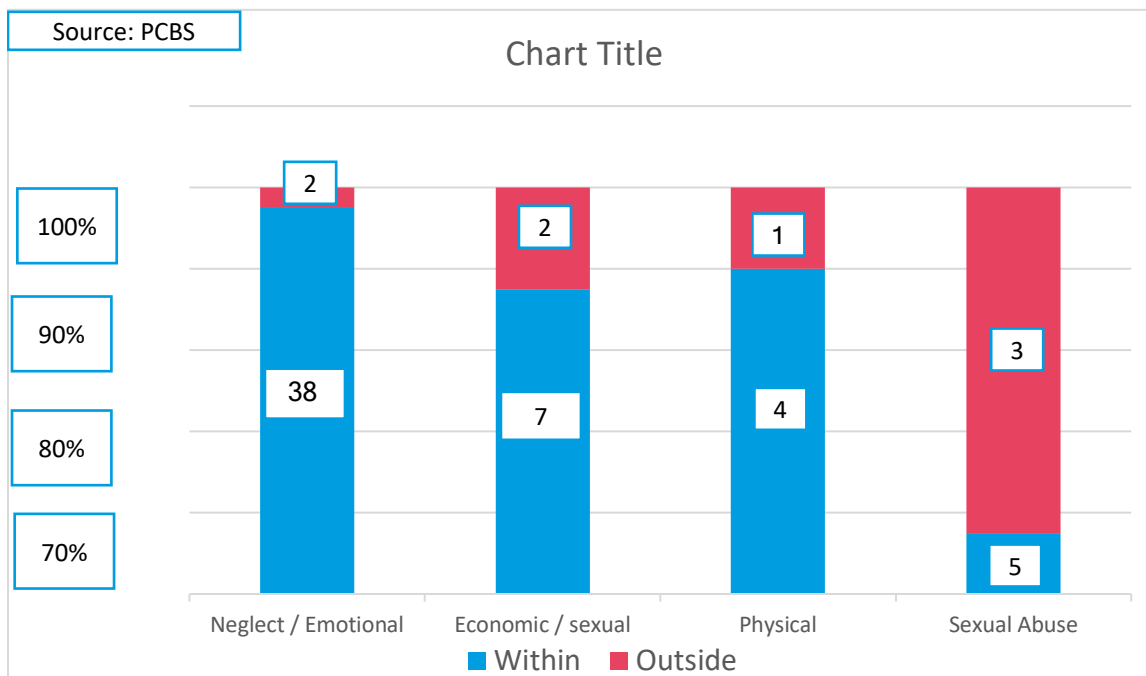


Figure 14. Number of reported cases of violence against children by form of abuse (published 2014)⁹¹

A study published in 2015,⁹² drawing on information in a previous UN Women study, found a correlation between external conflict and domestic violence. Data showed how shortly after attacks by Israel, over 50% of women and children experienced physical abuse (from hitting to beating) and over 70% experienced psychological abuse at home. The 2015 study⁹³ also drew attention to a rise in the number of reported honor killings of women and girls. Further studies from Gaza revealed that of the 317 child survivors reached through a support program, 80% had been perpetrated by family members and 20% by those unknown to the child.⁹⁴

Data in a 2018 Save the Children study⁹⁵ showed a total of 22,222 cases of Gender Based Violence (GBV) had been registered in 2016-2017. The study also revealed the highest rate of violence experienced by women was psychological, followed by social, economic, physical and legal, with sexual violence being the least reported. Furthermore, according to the information management system of the GBV Sub-Cluster Working Group, around 52,000 GBV survivors were detected over the period 2017-2019 in Palestine.

Violence in schools is also a significant issue. An evaluation of the child protection system published in 2015⁹⁶ drew on Ministry of Health data for 2010-2011. Thirty-four percent of students said they had been subjected to physical violence in school in the previous year, while 67 % said they had witnessed physical violence. Almost 29% admitted to using physical violence against others. Moreover, 43.5% of students said they had been subjected to psychological abuse and 73% had witnessed psychological abuse being inflicted on other students. In total 12% of students said, they had been subjected to sexual violence, and more than 23 % knew of others who had experienced such violations. The 2015 study⁹⁷ also acknowledged information from a government survey on violence published in 2011. This survey found 21.4% of students were exposed to physical violence from teachers and approximately 15% had witnessed violence by other pupils.

The Gaza Child Protection Group reporting⁹⁸ on violence in public locations, also identified school as a place where children face violence, either through disciplinary measures taken by adults, or peer violence. Providing data from 2016, the Group illustrated the infliction of psychological violence (27.6%) and physical violence (21.4%) by teachers on students. It is believed however, that the rate of incidents could be even higher. From a group of 229 children from 6 different schools, more than half the child respondents (57.2%) stated that they were frequently subjected to physical violence, while 38% said that they are subjected to this all the time.⁹⁹

⁹¹ ibid.

⁹² ibid.

⁹³ ibid.

⁹⁴ ibid.

⁹⁵ P2

⁹⁶ p7

⁹⁷ ibid.

⁹⁸ P9

⁹⁹ ibid.

Conflict related violence

Generations of children have witnessed, and have been victims of, a range of protection violations due to ongoing violence as a result of military occupation.¹⁰⁰ An evaluation of the child protection system in 2015¹⁰¹ identified information collated in a 2011 Palestinian Authority survey revealing almost half of Palestinian households had been directly exposed to violence by occupation forces or settlers in the period covered by the survey. The 2015 evaluation also identified children being exposed to a variety of different forms of violence and insecurity as a result of the Israeli occupation, including:

- child deaths and injuries as a result of clashes between Palestinian and Israeli security forces, military operations, settler-violence, and explosive remnants of war (ERW)
- arrest, detention and ill-treatment of children by Israeli police and security forces
- displacement, eviction and forcible transfer of children
- harassment and attacks on children as they went to school by settlers
- family separation due to Israeli civil regulations
- denial of access to education and health services
- child labour, including recruitment and use of children in armed conflict
- sexual abuse and gender-based violence against children

A study published by Save the Children in 2017¹⁰² contains data from Defense for Children International (DCI), illustrating an increase of approximately 16% in the number of Palestinian children detained by the Israelis that rose from 2,273 arrests in 2014 to 2,634 in 2015. The report¹⁰³ also tells of 313 Palestinian minors that were being held in Israeli prisons as security detainees and prisoners at that time. Information of ill-treatment during arrest and detention included children reporting injuries from hand being tied upon arrest and frequently remaining tied for extended periods, including during interrogation (93%), and being subjected to different forms of physical abuse during arrest, transfer and/or interrogation (63%).

A 2019 OCHA publication¹⁰⁴ also illustrates the impact of the humanitarian situation affecting thousands of children with some of the concerns highlighted in Figure 15.

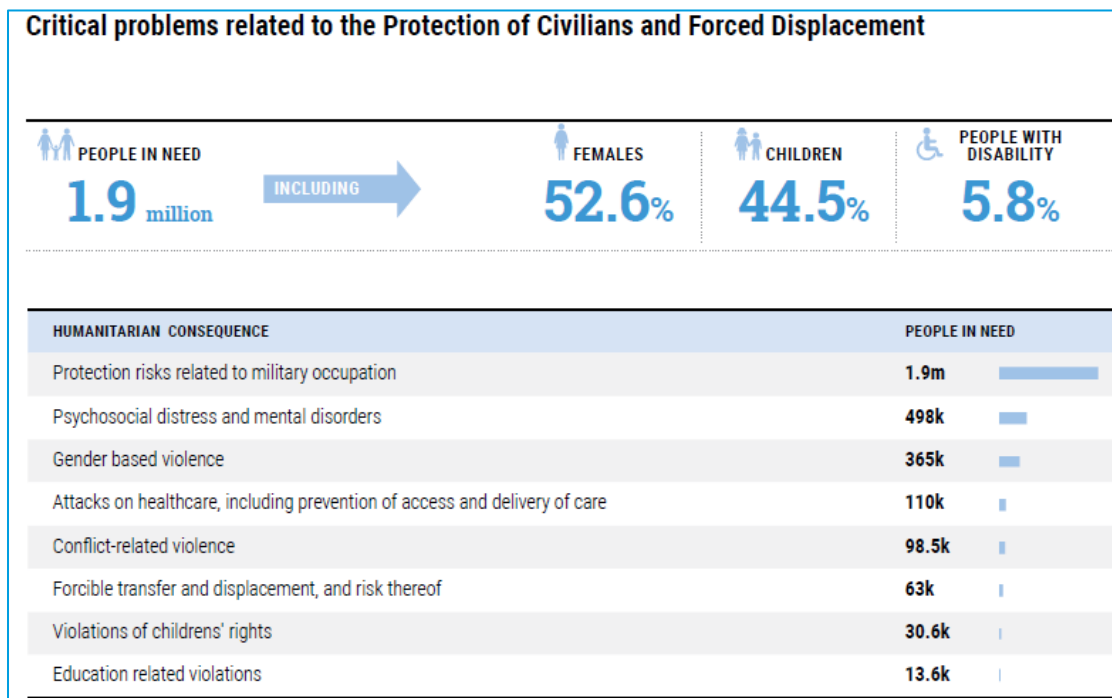


Figure 15. Critical problems related to the protection of civilians and forced displacement in Palestine (published 2019)¹⁰⁵

Loss of family unity and single parent headed households

¹⁰⁰ p7

¹⁰¹ *ibid.*

¹⁰² p2

¹⁰³ *ibid.*

¹⁰⁴ p18

¹⁰⁵ p18

Children are at risk of losing parental care due to circumstances impacting family unity. It has only been possible to find data relating to family breakdown across the Gaza Strip. Information on the situation in 2017 as published in 2019¹⁰⁶ was gathered through focus group discussions and interviews. Almost 70% of respondents said they knew of a child that had been separated from their usual caregivers. The death of a family members was the most cited cause.

Data released by the Ministry of Women’s Affairs¹⁰⁷ estimated that 790 women had become widowed in 2014 and that over 9% of households in Gaza were female-headed. Separation and re-marriage are also cited as reasons children are relinquished into the care of others. Having to re-locate as a result of the conflict can cause families to become separated and, according to respondents in a survey conducted in 2017, a reason that children are placed within the extended family or going into residential care. Of 200 respondents, 2.5% knew of a child that had no adult with a responsibility to care for them.

Poverty

Poverty has been recognized as a reason child are being separated from parental care in Gaza as illustrated in Figure 16.

Why are children separated from their main caregivers in our area? ⁵⁰				
Gaza Strip All (n 415) ⁵¹	Urban (n 282)	Rural (n 41)	Camp (n 49)	ARA (n 43)
Death of a parent (83%)	Death of a parent (86%)	Death of a parent (76%)	Death of a parent (71%)	Death of a parent (81%)
Poverty: sent to extended family (27%)	Poverty: Sent to extended family (31%)	Sent to institution (12%)	Sent to institution (27%)	Sent to safety in extended family (37%)
Safety: sent to extended family (21%)	Safety: Sent to extended family (23%)	Relocation (7.3%)	Relocation (12%)	Sent to extended family due to poverty (35%)

Figure 16. Respondent perceptions of why children are separated from primary caregivers in Gaza (published 2018)¹⁰⁸

As can be seen in Figure 17. in 2019 one quarter of children in Palestine were living below the poverty line.

¹⁰⁶ pg
¹⁰⁷ ibid.
¹⁰⁸ pg

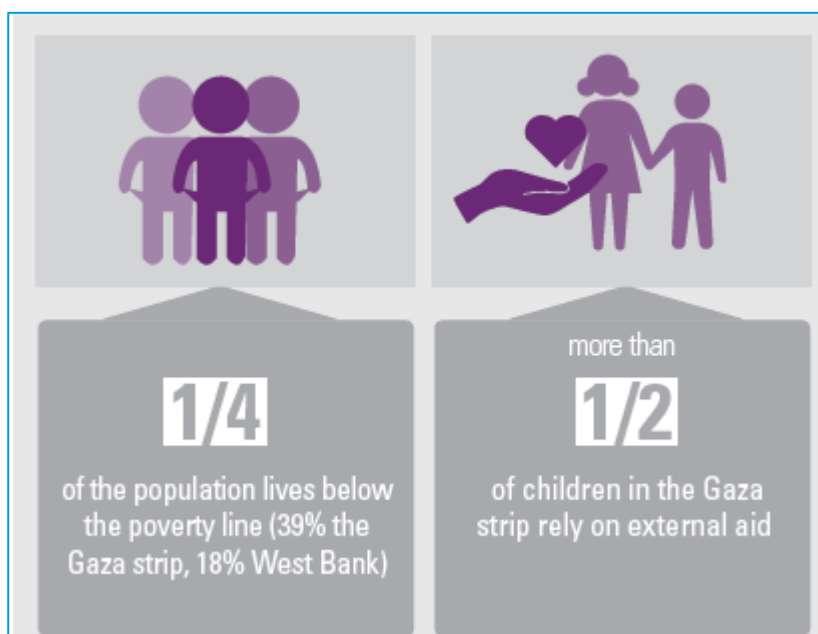


Figure 17. Children living below the poverty line (published 2019)¹⁰⁹

Participants in focus group discussions in Gaza conducted in 2017¹¹⁰ explained how children are sent to live with relatives 'when families cannot meet their needs'¹¹¹ including in times of economic hardship. The same study highlighted different stressors that impacted on the lives of caregivers as illustrated in Figure 18.

What stresses caregivers in Gaza Strip?				
Gaza Strip All (n 604)	Urban (n 402)	Rural (n 63)	Camp (n 49)	ARA (n 43)
Lack of electricity, water (91.6%)	Lack of electricity, water (91%)	Lack of electricity, water (100%)	Ongoing blockade (93%)	Lost livelihood (89%)
Lost livelihood (89.6%)	Lost livelihood (89.3%)	Lost livelihood (91%)	Lost livelihood (90%)	Lack of electricity, water (88%)
Ongoing blockade (82.5%)	Ongoing blockade (80.1%)	Ongoing blockade (89%)	Lack of electricity, water (90%)	Ongoing blockade (79%)
Lack of food (72%)	Lack of food (70.9%)	Lack of food (67%)	Lack of food (77%)	Lack of food (79%)
Ongoing conflict (63.7%)	Ongoing conflict (64.4%)	Ongoing conflict (56%)	Ongoing conflict (70%)	Violence within community (64%)
Lack of shelter (59%)	Lack of shelter (61.7%)	Lack of shelter (54%)	Violence within community (58%)	Lack of shelter (62%)
Violence within community (58%)	Violence within community (58%)	Violence within community (54%)	---	Ongoing conflict (61%)
---	---	---	---	Children's safety (59%)

¹⁰⁹ p5

¹¹⁰ p9

¹¹¹ ibid.

Figure 18. Causes of stress to caregivers in the Gaza Strip (published 2017)¹¹²

Street connected children

It was reported in the State of Palestine's Initial Report submitted to the Committee on the Rights of the Child in 2018¹¹³, that the 'phenomenon of children living on the street is not widespread in Palestine'. The report went on to say how in recent years, the Ministry of Social Development had been made aware of a limited number of children found living on the street due to 'family breakups' and that measures within the Children's Act meant a protection counsellor would establish contact with the family and ascertain whether or not it is possible for the child to be returned to them. If this is not possible, the child is placed in a 'social care institution' until the child's situation is discussed with the child's extended family. 'If in turn, this is not successful, the child will be placed in a care institution until it is possible to place him in an appropriate family situation.'¹¹⁴

Children with disabilities

According to a UNICEF report published in 2018¹¹⁵, there were between 3-7% of children with disabilities as illustrated in Figure 19.

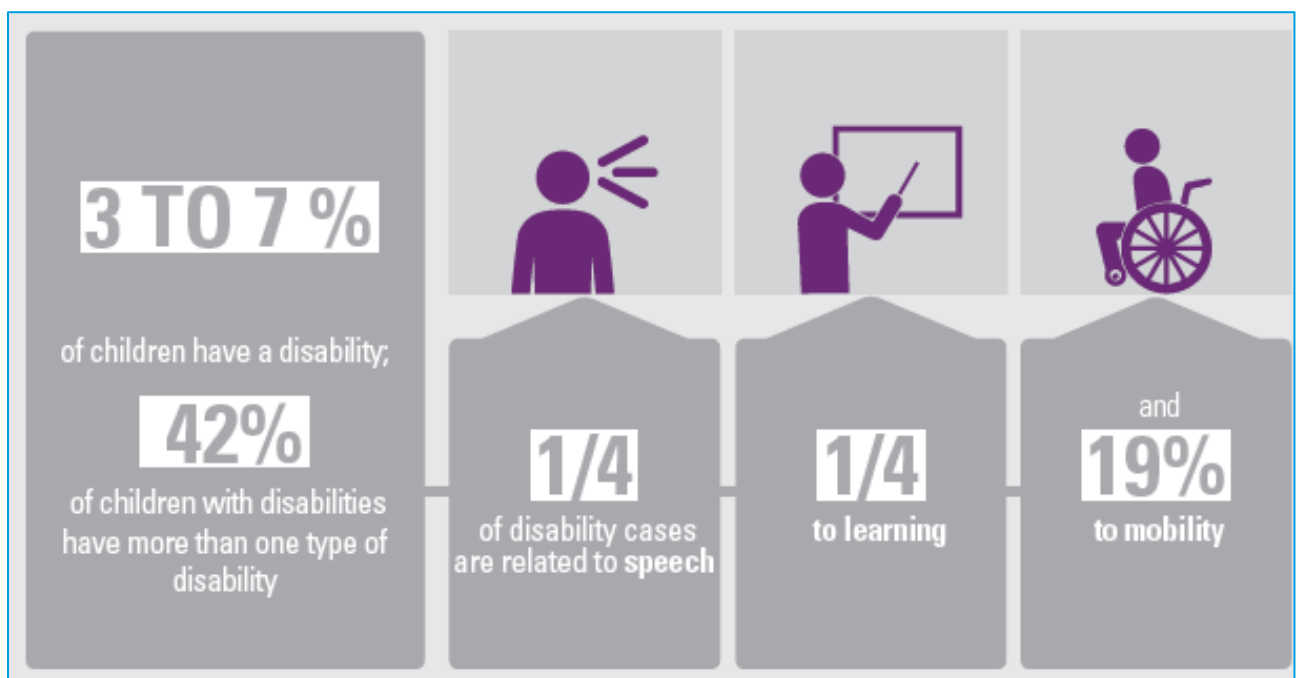


Figure 19. Children with disabilities (published 2018)¹¹⁶

Figure 20. reflects information about children with disabilities in the West Bank published by the Palestinian Bureau of Statistics in 2014.

¹¹² p9

¹¹³ p3

¹¹⁴ *ibid.*

¹¹⁵ p5

¹¹⁶ p5

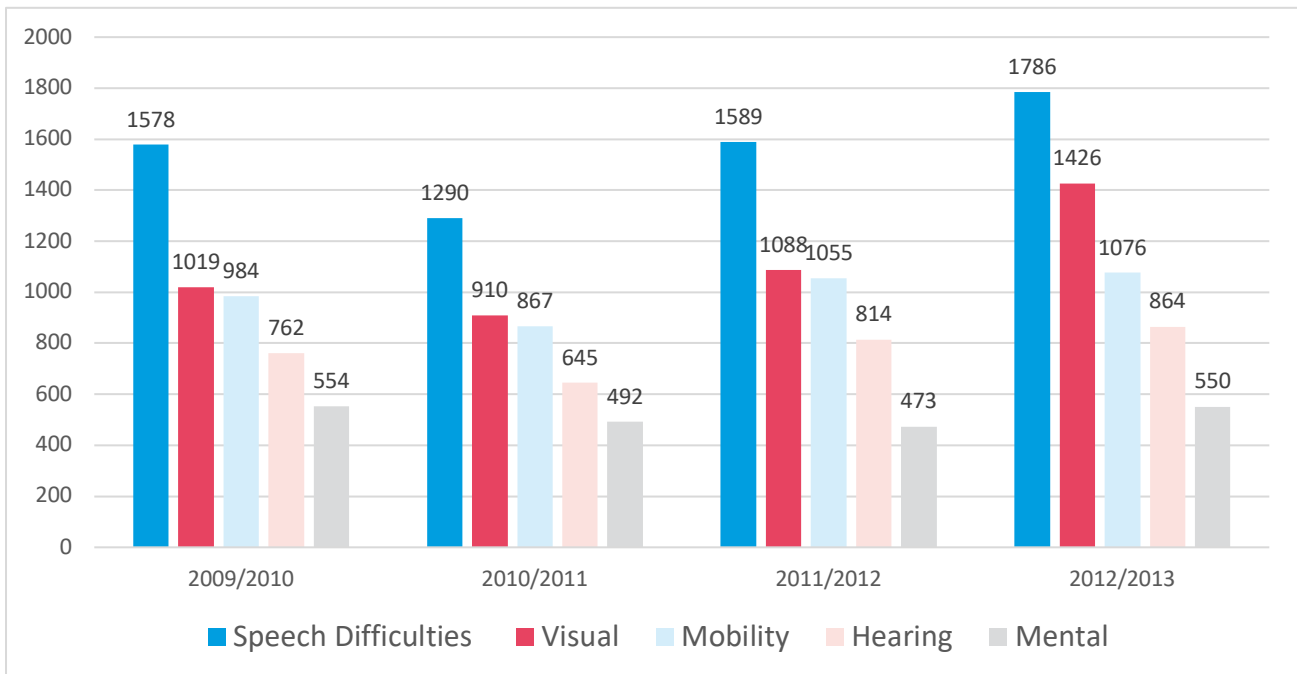


Figure 20. Children with disabilities in the West Bank 2009 to 2013¹¹⁷

A further study published by the Gaza Child Protection Working Group¹¹⁸, highlighted concerns regarding the vulnerability of children with disabilities. The study noted these children were likely to be extremely poor, under-supported with no access to appropriate education services or health care, and high risk to abuse and exploitation. Children with disabilities thought to be most vulnerable included those with the most severe disabilities, girls with disabilities, and those living in more remote areas. Furthermore, the ‘health, schooling and well-being outcomes’ of children with disabilities were noted as being, ‘markedly worse than those of their siblings and peers without disabilities’¹¹⁹

Early marriage

A Save the Children study¹²⁰ published 2014 shows 24.3% of women aged between 20 to 49 years had entered marriage before the age of 18, and 2 % before the age of 15. ¹²¹ A total of 22% of women between the ages of 22 and 24 had given birth to at least one child before the age of 18.

Further data taken from the 2014 UNICEF Multiple Indicator Cluster Surveys (MICS) show a total of 9.3% of girls aged 15 to 19 years were married at the time of the study. ¹²² Approximately 2% had married before the age of 15 years old while 24.2% married before reaching their eighteenth birthday (28.6% in Gaza and 21.4% in the West Bank). A further study found many marriages of girls under the age of 18 years old in Gaza had occurred within the extended family: 55% of the women who married as children had married a first or second degree relative. It was also reported that 44% of women in early marriages were not asked for their consent. ¹²³

Child Labour

As illustrated in Figure 21. data published by Save the Children¹²⁴, shows a considerable increase in the number of working children between 2012 and 2016.

¹¹⁷ P20

¹¹⁸ P9

¹¹⁹ P9

¹²⁰ P2

¹²¹ P7

¹²² ibid.

¹²³ P20

¹²⁴ ibid.

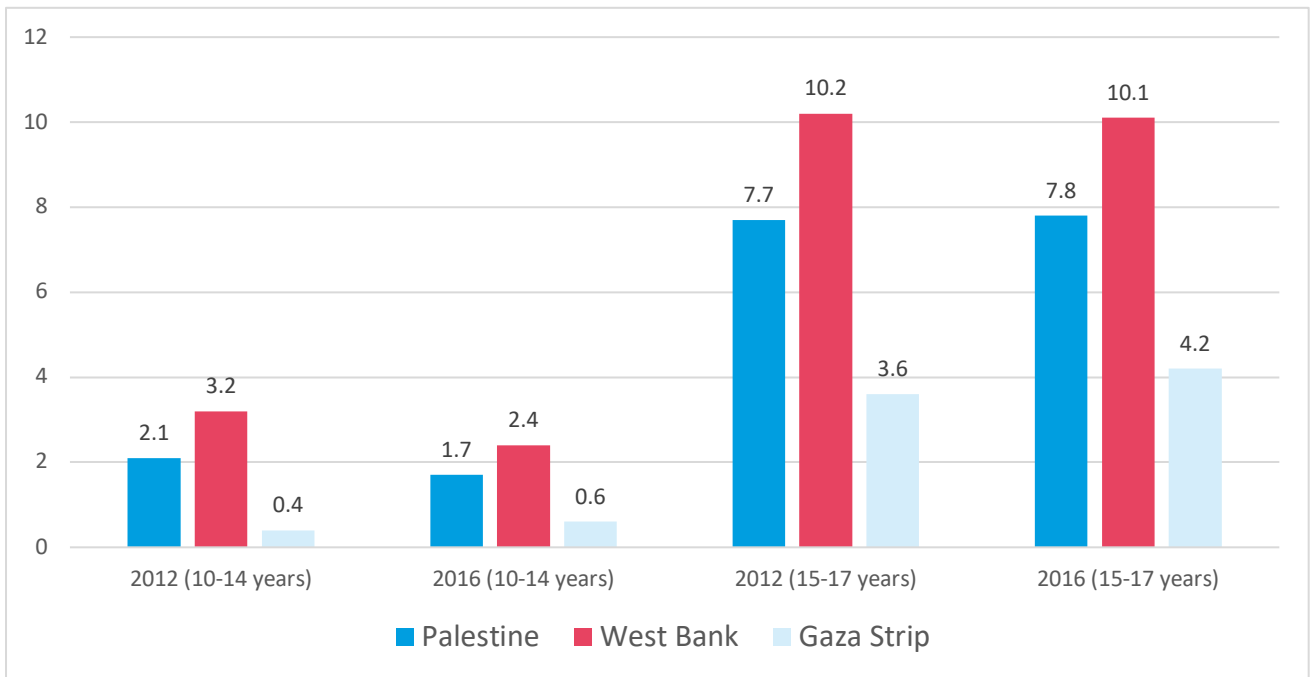


Figure 21. Percentage of working children by region, age (2012-2016)¹²⁵

Of working children surveyed by the ILO in 2013,¹²⁶ 62% were found to be performing hazardous tasks. It is understood that high rates of poverty were a principal driver. A study published by the Child Protection Working Group Gaza in 2018¹²⁷ included data indicating that an estimated 9,700 children were working across the Gaza Strip again attributed to loss of income or livelihood of other primary wage earners in the household.

¹²⁵ P2

¹²⁶ P7

¹²⁷ P9

6. Prevention

The United Nations General Assembly resolution¹²⁸ on the ‘Promotion and Protection of the Rights of the Child’ recognizes the importance of children being raised in a ‘family environment’. Furthermore, the resolution calls on the State to offer families all the support necessary whilst expressing concern,

that millions of children worldwide continue to grow up deprived of parental care, separated from their families for many reasons, including but not limited to poverty, discrimination, violence, abuse, neglect, trafficking in persons, humanitarian emergencies, armed conflict, natural disaster, climate change, migration, death or illness of a parent and lack of access to education, health and other family-support services

The Resolution also recognizes that,

financial and material poverty, or conditions directly and uniquely imputable to such poverty, should never be the only justification for the removal of a child from the care of his or her parents or primary caregivers and legal guardians, for receiving a child into alternative care or for preventing his or her reintegration, but should be seen as a signal for the need to provide appropriate support to their family, benefiting the child directly.

In this respect, it is incumbent on States to invest in combatting the multi-faceted factors that can lead to loss of parental care and making certain that everything possible is done to maintain children with their families in a safe and caring environment. This requires addressing issues of material poverty and lack of access to basic services, including social security, health and education, housing and employment. It also means combatting the discrimination and marginalization that families face on the basis of ethnicity, gender, disability and birth status. If these factors are not recognized and tackled, many children will enter the alternative care system unnecessarily. This approach is grounded not only in the fundamental spirit of the CRC but also in many specific CRC provisions, such as a right to health (Article 24), education (Article 28), support for the role of parents (Article 18), conditions for separating a child from parents (Article 9), right to social security (Article 25) and protection from discrimination (Article 2).

The author of this study acknowledges the need for this wide ranging multi-sectoral approach however, the topic of prevention, could in itself, necessitate an entire report on the different social welfare, education, health and other sector programmes needed, developed and implemented across Palestine. However, as the literature search for this report was specifically focused on the child protection and alternative care system. It is to be noted therefore, that whilst there are many relevant programmes being delivered in Palestine by other sectors, this study has only taken into consideration the literature relevant to the particular research remit.

The Palestinian Authority Strategic Plan for Child Protection 2018-2022 contains a number of indicators related to issues of prevention. The Plan states the ‘vision and the message will be a system to protect Palestinian children designed with an approach for a holistic and integrated, and appropriately balance the services of prevention and intervention early and response.’ This includes an overriding aim of ensuring availability of services to prevent protection risks and offering a high-quality early intervention response. The Plan recognizes the need to eradicate issues that result in protection violations including:

- addressing poverty and socio-economic conditions
- raising awareness of parents on the importance of protecting children
- preventing prolonged and accepted normalization of violence
- preventing family disintegration
- addressing social and cultural norms that impact children’s rights including discrimination against girls
- addressing the acceptance of violence as a means of educating and disciplining children
- working with families to raise awareness of protection concerns
- working with community and religious leaders to address root causes of protection risks

¹²⁸ United Nations General Assembly Resolution ‘Promotion and Protection of the Rights of the Child’, December 2019 ‘A/74/395

- improving access to services for families and children
- promoting the system and building capacity for the early identification of children at risk
- implementing awareness raising programmes to improve awareness and understanding of child rights and specifically the right to protection
- delivery of programmes to enable children to protect themselves
- building the capacity of the social workers in the Palestinian National Program for Cash Assistance to identify vulnerable children and monitor safety, physical and psychological aspects of the children in their homes and making appropriate referrals when needed
- strengthening the capacity of family centers as entry points for early identification of children in need of support and for providing necessary assistance and referral (Gaza).
- reaching the public in a more systematic way and provision of mobile services to reach marginalized and hard-to-reach communities (Gaza).

This is a recent initiative and no evaluation of the Plans implementation or impact has been found during the literature search for this study.

Further information on prevention of violence against children has been principally sourced from an evaluation of the child protection system in Palestine published by Child Frontiers in 2015.¹²⁹ This study explains how a number of different programmes have been developed both by government and non-governmental agencies to prevent the abuse, neglect and exploitation of children. To this end, the following text has been drawn from this one helpful publication.

The Ministry of Social Development holds overall responsibility for the prevention of violence against children. Within this remit, the Ministry has supported the work of the child protection networks at governorate level to prepare and deliver prevention strategies and programmes. Examples have included local awareness campaigns including community discussions held in schools and mosques. Although it has been noted that these efforts lack a structured and strategic approach.¹³⁰

Government, INGOs and NGOs have also co-sponsored awareness raising campaigns and through the mass media. Other given examples of prevention programmes include the work in Gaza through including such actions as awareness raising sessions for parents, caregivers and professional groups (religious leaders, teachers, counsellors, medical professionals and justice officials) on a range of child protection topics.¹³¹

The Ministry of Education has taken steps to prevent violence in schools (both student-to-student violence and corporal punishment) by issuing a violence prevention policy, which has been disseminated amongst teachers, principals and counsellors and backed up with training programmes. The Ministry has also established student conflict resolution committees in schools, and delivered prevention awareness projects for students. School counsellors have been provided with programmes that build children's awareness of and capacity to protect themselves from sexual harassment and on-line abuse and exploitation.¹³²

UNICEF in Palestine is also reported as having identified prevention of violence to be a key component of its Communication for Development strategy. This included commissioning a survey to better understand social norms and attitudes that perpetuate violence against children and how to address these issues.

UNRWA has established a Family and Child Protection Programme including work to address root causes of violence. Reported initiatives have included promotion of good parenting, family management, and positive and non-violent communication as a means to prevent family violence. This included work in refugee camps in the West Bank to establish mother-to-mother and youth peer support groups serving as advocates and educators on child rights, gender equality, gender-based violence, discrimination and other protection issues. Work has also taken place in ten child information points and a mobile library providing resources, for children and parents on such topics as gender discrimination, gender-based violence, abuse and child marriage.

There has been significant investment in psychosocial programmes across Palestine designed to help build resilience of children and families, promote improved parenting and contribute to children's well-being. NGOs played a major role in the delivery of these programmes. Some concerns were noted however, regarding the quality, the reactive rather than a preventative focus, and the brevity of some of these programmes.¹³³

¹²⁹ p7

¹³⁰ p7

¹³¹ *ibid.*

¹³² *ibid.*

¹³³ *ibid.*

A further programme described as being a 'key early intervention initiative' in the 2015 Child Frontiers evaluation¹³⁴ is the targeted Palestinian National Cash Transfer Programme administered by the Ministry of Social Development cash transfers and other assistance (including health insurance, food support, and school fee waivers). In 2014, the Ministry provided cash assistance to 71,455 children in the West Bank and 178,284 children in Gaza. In addition, 29,588 children of social hardship households in the West Bank were exempted from school fees, 38,420 received food assistance, and 32,665 were covered by health insurance. Evaluations of the programme have revealed mixed findings including a study that found the programme had no significant impact on reducing violence while a qualitative review indicated a positive influence.¹³⁵

At the time of the 2015 evaluation¹³⁶, there were 23 Family Centres in Gaza also providing a multi-sectoral space for identifying and providing a range of early intervention services for vulnerable children and families, including counselling and parenting support. They also provide structured case management to vulnerable and at-risk children that included a multi-sectoral package of support. For more serious cases of violence, the Family Centres also have the responsibility to pass the case to Child Protection Counsellors in the Ministry of Social Development.

The Child Frontiers evaluation¹³⁷ also noted issues that negatively impacted on prevention. One such factor being the lack of coordination and communication between key stakeholders Ministry of Social Development social workers, Child Protection Counsellors, child protection networks and school-based counsellors. It was also understood that social workers failed to routinely inform vulnerable families about resources available to them and or to link them with other relevant programmes.

¹³⁴ *ibid.*

¹³⁵ P7

¹³⁶ *ibid.*

¹³⁷ *ibid.*

7. A national child protection system and alternative care

Alternative care should be an integral component of a national child protection system. Within the sphere of national and international programming, the desire to ensure a more comprehensive approach to the reform of national child protection systems has increased across the world across recent years. This includes working towards a multi-sectoral and holistic approach to protect children from all forms of violence and neglect. It also means shifting to a more systematic approach when building a child protection system and addressing all components simultaneously. Years of trying to fix just parts of the system has proven ineffective. It also requires an holistic view of childhood, understanding and mitigating all factors that place children at risk, and working in partnership with the State, children, families, communities, and NGOs to build a protective environment.

A child protection system is comprised of differing components as outlined in Table 2. below.

COMPONENTS OF A NATIONAL CHILD PROTECTION SYSTEM	
Normative Framework	<ul style="list-style-type: none"> ▪ Legislation and Policy ▪ Strategic Plans ▪ Statutory Guidance ▪ Regulations and Standards ▪ Inspection Framework ▪ Monitoring and Evaluation Framework
Data collection and management information systems	<ul style="list-style-type: none"> ▪ Systems of rigorous quantitative and qualitative data collection and analysis upon which inform planning and programming ▪ Data to inform monitoring and evaluation systems
Structures for system delivery, coordination and oversight	<p>Structures at national, regional, local and community level for delivery of child protection and alternative care system:</p> <ul style="list-style-type: none"> ▪ Structures/departments of staff and resources defined and managed by Government for the functioning of protection care system and services within MOSA and other relevant government bodies ▪ Roles and responsibilities of national and local government departments ▪ Budget allocation and resource management to ensure all elements of the system is adequately staffed and resourced ▪ Contracting of non-governmental agencies and services ▪ Roles and responsibilities of national and local non-governmental/community bodies ▪ Interaction with international bodies ▪ Monitoring and evaluation ▪ Coordination across governmental and non-governmental agencies and service providers i.e. social services, education, health, justice, social protection and finance ▪ Coordination at and between national and local level ▪ Coordination between formal and informal systems ▪ Accountability for the development, quality, delivery and monitoring of child protection and alternative care system
Gatekeeping tools, and child protection case management	<p>Case management tools and mechanisms including:</p> <ul style="list-style-type: none"> ▪ Early detection and early intervention plans for children at risk of family separation ▪ Referral mechanisms and processes ▪ Care and protection assessments for well-informed participatory decision making ▪ Decision making, inter-sectoral case planning and individual case management and monitoring ▪ Case monitoring and review

Continuum of protection and suitable care services	<ul style="list-style-type: none"> ▪ Promotion of community-based family support services ▪ Provision of a range of suitable family and community based alternative care options ▪ Reintegration services ▪ Leaving care services ▪ Adoption services ▪ Deinstitutionalization as per UN Guidelines as per UN Guidelines-deinstitutionalization strategy, with precise goals and objectives, which will allow for their 'progressive elimination'
Skilled workforce	<ul style="list-style-type: none"> ▪ Sustainable systems of education, training and skill capacity building of social service workforce and all relevant sector workforce including access to: <ul style="list-style-type: none"> • Higher Education and professional qualifications • In-service training ▪ Supervision and care of workforce ▪ Optimal number of skilled workforce employed to meet needs of the children and families
Attitudes and awareness raising - building a protective environment	<ul style="list-style-type: none"> ▪ Challenges to attitudes that place children at risk and endorse institutionalization ▪ Evidence of building on positive attitudes and actions to create a protective and caring environment for children

Table 2. Components of a national child protection system

This report aims to provide information found as a result of the desk review on each of these components of the national child protection system and alternative care provision as it applies to Palestine.

8. The Normative Framework

The normative framework of a country comprises the legislation, regulations, decrees and statutory guidance and standards that mandate and direct the work of both government and non-governmental bodies. It is important for any organization offering support to children, to gain a full understanding of the provisions in the law and other statutory guidance that governs programming for child protection and alternative care.

Table 3. lists a number of international conventions and treaties that have been acceded by the State of Palestine.

Convention	Year
CAT - Convention against Torture and Other Cruel Inhuman or Degrading Treatment or Punishment	2014
CAP- Optional Protocol of the Convention against Torture	2017
Convention on the Rights of the Child	2014
CEDAW - Convention on the Elimination of All Forms of Discrimination against Women	2014
CCPR - International Covenant on Civil and Political Rights	2017
United Nations Convention on the Rights of the Child (UNCRC)	
CRC-OP-SC - Optional Protocol to the Convention on the Rights of the Child on the sale of children child prostitution and child pornography	2017
CRC-OP-AC - Optional Protocol to the Convention on the Rights of the Child on the involvement of children in armed conflict	2014
CRPD - Convention on the Rights of Persons with Disabilities	2014

Table 3. International Conventions and Treaties

Palestine's legal and judicial system has been shaped over the years by different influences, including Ottoman, British, Israeli, Jordanian, Palestinian (for the West bank), Egyptian (for Gaza) and Sharia law. Israel applies Israeli civil law in East Jerusalem, though it remains occupied territory under international law. For Christians, there are a separate set of codified family laws as promulgated by the particular sect to which they belong This has led to what has been described as, 'a patchwork of different laws, many now outdated.'¹³⁸ Furthermore, the presence of two separate governments in the West Bank and Gaza has resulted in two separate executive and legislative authorities. This has an added complication in the reform of legislation as laws can currently only be passed by presidential decree.

An evaluation published in 2015¹³⁹, considered the legal and justice system to be facing a number of challenges including:

- the government's limited jurisdiction and therefore an inability to uniformly enforce laws uniformly across Palestine
- limited number of fully trained judges, lawyers, and prosecutors
- inadequate infrastructure
- slow speed of judicial decision-making
- lack of legal aid
- limited coordination amongst justice and security sector
- lack of specialized courts, judges, and lawyers specially trained on children's issues
- lack of adequate support for child victims and witnesses of crime
- communities seeking to resolve issues without resorting to the formal justice system
- bias and other barriers that women and girls faced when trying to access justice
- possible threat of stigma and loss of social status for females if they applied to the justice system

¹³⁸ p7

¹³⁹ *ibid.*

The literature suggests that, a number of strategic plans, regulations, statutory guidance and standards related to child protection and alternative care have been issued in Palestine. Some of these are captured in Table 4. below

Legislation, regulations, statutory guidance etc.	Year
The Child Law No 7. (2004) and amendments (2012) (Also known in some publications as the Child Act)	2004/2012
The Palestinian Basic Law 2003 (with amendments of 2005)	2005
Cabinet Resolution No. 11 of 2011 regarding the regulation of nurseries	2011
Cabinet Resolution No. 10 of 2013 of the Foster Family System	2013
Law No. 4 of 2016 on Juvenile Protection	2016
Palestinian Authority Strategic Plan for Child Protection (2018-2022)	2018
draft By-law on Child Protection Procedures and Realization of Children’s Rights (referred to in documents but not confirmed)	

Table 4. National normative framework

The Palestinian Basic Law

The Palestinian Basic Law serves as the principal overarching constitutional legislation. It provides the legal framework for human rights and contained within its key principles are rights to equality, non- discrimination, and to have basic human rights and liberties respected and protected. The Law includes specific guarantees of children’s rights.¹⁴⁰

Article 29 states that maternal and childhood welfare are national duties, and children have the right to:

- Comprehensive protection and welfare
- Be free from all forms of exploitation, and not be permitted to perform work which might damage their safety, health, or education
- Protection from harm and cruel treatment; not to be subject to beating or cruel treatment by their relatives
- Be segregated from adults, in case they are sentenced, and to be treated in a manner which is appropriate to their age and aims at their rehabilitation

The Palestinian Child Law No. 7 (2004)

The principal law governing child welfare and protection is the Palestinian Child Law No. 7 of 2004, amended in 2012. It is to be noted however, that due to the 2012 Child Law amendments being introduced by Presidential Decree from the authorities in Ramallah, they are not fully recognized and enforced in Gaza.

Shari’a courts are not required to apply the Child Law. However, in 2009, the Chief Islamic Justice disseminated a memorandum to all Islamic religious judges, which although not binding, directed them review and take into consideration the Palestinian Child Law when dealing with children’s issues.

It is also understood, that in order to ensure harmonization of all laws in relation to children, the government has drafted amendments to the Education Law, the Labour Law and the Public Health Law in conformity with the amended Child Law.¹⁴¹ This has not been confirmed.

The Child Law is grounded in the UN Convention on the Rights of the Child including children’s right to education, health, protection, birth registration, nationality etc. Article 1 of the Child Law which defines a ‘child’ as every person under the age of 18 years. The Law also incorporates principles of non-discrimination (Article 3), child participation (Article 12) and the best interest of the child. The minimum age for criminal responsibility is 12 years old, 15 for engaging in labour and 18 for military recruitment all in line with international standards.

In line with the CRC, the fundamental role of parents and family to care for a child and hold responsibility for their upbringing is recognized (Article 5), as are the obligations of the State to support families by guaranteeing provision of health, education, and social services for children. Article 9. requires the State to lay down policies

¹⁴⁰ p7

¹⁴¹ p7

and programmes 'to ensure the correct upbringing of children in all fields within a framework of freedom, human dignity, and spiritual and social values, taking into account the basic responsibility and the rights and duties of the parents or those who care for the child.'

Article 20. specifically provides a child with the right to know their parents and receive their care, and 'the child may not be attributed to anyone other than his parents.' If separated, the child has the right to remain in contact and maintain a personal relationship with their parents, if this is in their best interest (Article 21).

Article 31. lays down the right of a child to obtain social assistance, which includes children that are:

- orphans and of unknown parentage
- in social care institutions
- of divorced or abandoned women who have no one to provide for her
- of a prisoner, missing person, or incapable of working due to illness or disability who has not provider
- of families whose homes were destroyed or burned
- children with disabilities or chronic diseases
- children that are twins (three and older)

Article 32 gives children the right to alternative care if their natural family environment permanently or temporarily. The right to alternative care is through, 'a foster (alternative) family' or, 'Public or private social welfare institutions if a foster family is not available.'

Articles 42 to 49 specifically focus on issues of protection. For example, Article 42. requires the State to undertake all necessary legislative, administrative, social, educational and preventive measures to ensure children's right to protection from all forms of physical, violence, physical or moral abuse, sexual abuse, neglect, neglect, homelessness, or other forms of abuse or exploitation.

In Article 44 of the 2012 amended Law, difficult circumstances that threaten a child's physical or mental wellbeing or health and require mandatory reporting. This includes the following situations:

- Loss of his/her parents and being without family support
- Subjected to negligence and homelessness
- Evident and consistent default in his/her upbringing and care
- The apparent and continuous failure for a child's upbringing and care
- Habitual ill treatment
- Exploitation of the child sexually, economically, in organized crime or in begging
- Having the habit to leave his/her place of residence or being absent without prior notification
- Being absent from school without reason
- Subjected to forced marriage

Everyone has a responsibility to report a child of concern to a Child Protection Counsellor (Article 53). Reporting is mandatory for educators, doctors, social workers and others who are entrusted with the protection and care of children and a fine will be imposed on those failing to report. In the 2012 amendment of the Law, every person should notify a Child Protection Counsellor whenever they believe there may be a threat to a child's physical or mental wellbeing or health, or a child is at risk of delinquency. Likewise, everyone must help a child who wants to make a report of abuse to a Child Protection Counsellor either for themselves, a sibling, or any other child from one of the cases described in Article 44. (Article 54).

Article 50 called for the establishment of the Child Protection Department within the Ministry of Social Development and the employment of Child Protection Counsellors (also referred in the literature sourced for this study as Child Protection Officers). Counsellors should take on a prevention and curative role in all cases where children's safety or physical or psychological health is threatened (Article 52). The Minister of Social Development (at that time the Ministry of Social Affairs) was also required to issue regulations that define the specialist role of Child Protection Counsellors (Article 50 of amended 2012 Law).

The Law (including amendments in 2012) stipulates that when a Child Protection Counsellor receives a notification that involves a child is at imminent risk, they should undertake an initial investigation to verify the seriousness of the notification within 24 hours. In all other cases, the investigation must take place within 72 hours (Article 55).

The Law (including amendments of 2012) gives the Child Protection Counsellors the ability to:

- Summon a child and their caregiver to gather information about the reported case (Article 56)

- Enter alone, or accompanied, the place where the child is, and if forbidden entry, seek the help of the police. If the place is a residence, to obtain a judicial order to enter (Article 56)
- Conduct investigations and taking appropriate preventive measures regarding the child including preventing all contact between the child and persons that would threaten their physical or psychological safety and health or expose them to the danger of delinquency (Article 56)
- Take appropriate action if there is a threat to the safety or physical or psychological health of the child (Article 56)
- If it is proved there is no threat, prepare a report and submit it to the Childhood Protection Department, informing the child and the person who cares for the child and the person who made the report. (Article 57)
- Where an investigation determines that a child is at risk, the Child Protection Counsellors may resolve the matter through agreement with the child's parents or caregiver ("measures of a reconciliation nature"), or refer to the case to a competent judge for a child protection order (Article 58).
- Measures of reconciliation may include (Article 59):
 - Keeping the child in his/her family, with periodic monitoring by the Child Protection Counsellors and a commitment from the parents to take steps to remove the threat and abide by certain measures
 - Organize interventions with social services and assistance to the child and family
 - Take all necessary precautions to prevent all contact between the child and the people that threatens the child's safety or physical or psychological health.

If these measures cannot be agreed, the Child Protection Counsellor may, after obtaining permission from a judge, undertake the following within 21 days (Article 59):

- Hand the child over on a temporary basis to whoever can take care of him and who has moral guarantees from among the following:
 - Whoever has guardianship or guardianship over the child
 - A member of the child's immediate family or extended family
 - A temporary foster family that undertakes to take care of them in accordance with standards and controls issued by the Council of Ministers
 - An officially recognized body responsible for caring for children

Other steps can include:

- Banning the child from attending certain places or from practicing a certain work
- Taking one or more measures of reform, including placing the child under "social control" or compelling the child to carry out certain duties, such as joining suitable vocational, cultural, sports or social training courses
- Placing the child temporarily with a suitable public or private family, social, educational or health organization or institution.

If a child protection case is referred to a judge, they may take any measures necessary to protect the child (Article 63). The child's parents or caregiver and the child have the right to come before the judge, and if the child's age and/or maturity do not allow them to participate directly, the judge must assign a suitable person to convey the child's views (Article 66).

Article 65. covers measures that can be taken by the Child Protection Counsellors in cases of imminent danger i.e. every act that threatens the life, safety, or physical or psychological health of the child in a manner that cannot be avoided with the passage of time. In these instances, the Child Protection Counsellors, must take the initiative to remove the child, with the help of compulsory force if necessary, and place them somewhere safe. They must obtain urgent judicial permission to continue the measures taken.

The Child Law also calls for the establishment of the Supreme Council for Motherhood and Childhood for which another law shall be issued to form it, organize it, and define its functions.

There are some noted anomalies in the Law however, for example, the minimum age for marriage is 16 for boys and 15 for girls. Children are also not considered competent witnesses to give evidence under oath until the age of 15 although they are criminally responsible from the age of 12 years old.

Law No. 4. Of 2016 on the Protection of Juveniles

Although this Law predominantly lays out procedures relating to children in conflict with the law, there are also clauses relating to children 'at risk' as well as 'children at risk of delinquency'.

The Law describes a 'Social Welfare Home' as somewhere (translated from Arabic), 'for observation, care and rehabilitation of juveniles and children at risk and risk of delinquency, and it is any correctional, governmental, or private institution approved by the Minister in coordination with the Ministry of Justice, the Ministry of Interior and the Public Prosecution to preserve and observe children, and to shelter, repair and rehabilitate juveniles and children at risk and the risk of delinquency.'

Article 3. requires decisions to be made that take into account the preservation of the child in his family environment with consideration given to preventive action within the family and not separating the child from his parents or guardians unless it becomes clear to the judicial authority that this separation is necessary to maintain the best interest of the child. The child must be allowed to retain contact with their family if separated (Article 4).

However, all other articles refer only to children who are perceived to have committed a crime or children at risk of delinquency. There is no further reference to children 'at risk'. The reading of the Law does imply that children who are in are 'at risk of delinquency' must undergo a process similar to children who are being tried for a crime and therefore, may also be placed in a residential social welfare home as a consequence.

By-Law on Child Protection Procedures and Realization of Children's Rights

Reference¹⁴² has been made, and information supplied about, the draft Palestinian By-law on Child Protection Procedures and Realization of Children's Rights provides guidance on the roles, responsibilities and authority of Ministry of Social Development Child Protection Counsellors when working on child protection cases. However, it has not been possible to source a copy of this By-Law.

It is reported that this Bylaw particularly focusses on response to referrals although it has also been noted that these procedures are more 'orientated towards an investigative and enforcement approach',¹⁴³ rather than working with families to understand and address their concerns.

It is also understood¹⁴⁴ that the Bylaw also require care plans to be developed. These plans may include a voluntary agreement with parents to take actions to protect the child. The case must be referred to a competent judge if an agreement is not reached within 20 days after the Child Protection Counsellors has taken charge of the case, or if any agreement is breached. The Bylaws also require Child Protection Counsellors to provide on-going monitoring, support and periodic review of the agreement and any remedial measures. There should be an inter-sectoral approach to child protection and the role of all competent agencies, including NGOs, should be authorized through memorandums of understanding with the Ministry of Social Development.

Guidelines on the transfer and networking system for child victims of violence (2018)

The system for responding to child victims of violence was reviewed by the Council of Ministers in late 2018 and renamed the **Guidelines** on the transfer and networking system for child victims of violence (2018). Amongst the reports¹⁴⁵ sourced for this study there is information about these guidelines and how they set out the procedures that must be followed when dealing with child victims of violence, neglect or exploitation, the forms that must be completed, and the situations in which a meeting to discuss the situation of the child must be held. If the child is in danger, a meeting to discuss the child's case is held by staff at the Ministry of Social Development and partner organizations and the child is then transferred to a shelter. Protection arrangements are always in line with the provisions of the Children's Act.

It has not been possible to find these specific guidelines but another document was found entitled '**Referral and Networking Manual for Child Protection of Abuse and Violence 2017**'. A chapter in this document refers to referral and follow-up procedures that must be developed for every health facility, programme, or service area managed by the Ministry of Health, either directly or contractually, including a written, circulated and readily available policy for identifying cases of suspected children or victims of abuse and neglect, treating this category and reporting the responsible. The policy should include the following:

- Relevant Palestinian legislation.
- The physical, psychological, behavioral and social standards and indicators on which employees and staff rely

¹⁴² p7

¹⁴³ p7

¹⁴⁴ p7

¹⁴⁵ p3

- Medical staff and other health personnel to become aware of the abuse and neglect of children.
- The procedures they must follow when determining the case, including immediate reporting to the health coordinator in the district.
- The referral to be made according to the previous clause to the health coordinator through the supervisor of nursing in hospitals
- Referral procedures can take place during office hours, after normal work hours, or on weekends, due to the importance of this in protecting the child and achieving their best interest.

Case management procedures in health facilities include the following stages:

- Status determination stage: diagnosing the case that doctors, nurses and health workers. In this stage they may recognize and distinguish the manifestations of abuse and neglect against a child
- The doctor / paramedic / nurse must provide immediate treatment, and then document.
- There should be a record of the case, and the guidance lists the documentation and information needed.
- Based on the results of the analysis of the examinations and the information available in the health facility records about the child and the parents / caregivers, and in the event of confirmation or suspected abuse, the health coordinator in the directorate is informed, who in turn obliges to inform the Child Protection Guide.
- The attending physician determines the child's needs and the necessary care, treatment and protection
- In cases of imminent danger such as attempted suicide or sexual rape, the health coordinator must immediately report to the Childhood Protection Guide and send the notification form (in Appendix No. 2 of the manual) so that the intervention and protection of the child is undertaken as soon as possible, but in other cases that do not require this, the collection of information must be continued in a confidential manner.

Relevant legislation is highlighted in the Manual that should be followed. After the initial examination and based on the tests either:

- The case is closed when it is confirmed that there is no abuse, neglect or danger to the child's life.
- In high-risk cases: The Dangerous Cases form (Appendix No. 2) must be filled out and submitted to the health facility management, and the health coordinator, who in turn informs the Child Protection Guide.

The Child Protection Guide has the right to manage the case with the possibility of consulting the health coordinator in the cases that arise or requires follow-up and / or medical treatment.

The Manual goes on to specify details of this process in different health care settings including in school health facilities.

Informal justice mechanisms and Sharia Law

In addition to the formal justice system, informal mechanisms are utilized by local communities throughout Palestine to resolve disputes and conflicts including cases relating to the violation of children's rights. This system is based on customary norms that have combined with guidance from the Islamic Sharia.¹⁴⁶ It involves community leaders taking on the role of mediation and arbitration, including *islah men*, *mukhtars* and tribal judges.

This informal process does however, work in partnership with the formal system. This includes the referral of cases from the formal to the informal system by police or prosecutors as well as consideration of any informal process that has been undertaken when proceeding with a judicial court case. Public Relation Officers are also assigned to police stations across Gaza with a task of helping link the two systems.¹⁴⁷ In addition, there is a Directorate of Tribal and Reconciliation Affairs and the Police Directorate for Public Relations, under the auspices of the Ministry of Interior.

An evaluation undertaken in 2015¹⁴⁸ noted the lack of opportunity for children to participate in such informal processes and the manner in which the adult representing the child can accept such compensation as financial compensation paid by the family of the offender to the family of the victim (*diyya*), agree to expulsion from place of residence, or in some cases physical punishment. A 2017 report issued by Terre des Hommes¹⁴⁹ found decisions taken within the informal justice system were not necessarily meeting the best interest of the child. Half the decisions (50%) in personal status disputes were found to be fully or partially in the best interests

¹⁴⁶ p7

¹⁴⁷ p9

¹⁴⁸ p7

¹⁴⁹ P21

of children buy decisions dealing with crimes such as sexual assault (41.7%) and fights (34.8%) were less likely to be appropriate.

Further observations on legislation

Further information regarding legislation and the care of children can be found in an alternative report submitted by Human Rights Watch¹⁵⁰ to the Committee on the Rights of the Child in 2019. This includes concerns that the Islamic personal status laws, currently in force in the West Bank and Gaza, does not make the best interests of the child the primary concern when determining which parent the child should live with or guardianship rights. For example, in divorce cases in the West Bank, children are automatically required to live with their mothers until they reach 9 years old if a boy, and 11 years old if a girl. In Gaza, the ages are 7 for a boy and 9 for a girl. This can be extended by a judge for the benefit of the child. However, the child can be automatically removed if the mother remarries. This does not apply if the father remarries. Fathers retain sole guardianship rights even when the child lives with their mother. If the father is absent or dies, this automatically passes to the paternal grandfather or other male relatives.¹⁵¹

Legislation and regulations as they relate to the provision of alternative care are discussed below in the Section 11. It should also be noted that adoption is not permitted in any law in Palestine.

The Palestinian Authority Strategic Plan for Child Protection (2018-2022)

This Plan contains the following aims:

- Provide a common vision for the development of the Palestinian child protection system in accordance with international standards and the values of the Palestinian people
- Promote a coherent and comprehensive approach to child protection for all Palestinian children, in light of the availability of effective mechanisms for coordination, follow-up and accountability
- Ensure the availability of high-quality early prevention, intervention and response services for children and families at risk, including in emergencies
- Empower and support children and families' communities to play a more effective role in ensuring the care and protection
- Increase the available resources and capacities to the maximum possible extent and ensure the availability of adequate human, technical and financial resources to operate the child protection system.

The Plan contains a number of objectives including those in the following domains:

Prevention:

- addressing poverty and socio-economic conditions
- raising awareness of parents on the importance of protecting children
- preventing prolonged and accepted normalization of violence
- preventing family disintegration
- addressing social and cultural norms that impact children's rights including discrimination against girls
- addressing the acceptance of violence as a means of educating and disciplining children
- working with families, communities and religious leaders to raise awareness of protection concerns and addressing root causes of protection risks
- improving access to services for families and children
- delivery of programmes to enable children to protect themselves
- empowering children to fully participate and have their opinion heard

Child Protection Case Management:

- developing consistent and up-to-date referral case management procedures / standard operating procedures for the West Bank and Gaza while enhancing the role of the extended family, community leaders, and advocacy for harmonization of UNRWA child protection protocols and procedures with national referral protocols improving the system and building capacity for the early identification of children at risk
- strengthening and unifying child protection case management methods, tools and processes
- developing a common database for case management for the government and NGOs
- designing a family conference template that fits the Palestinian context and experience

¹⁵⁰ p17

¹⁵¹ ibid.

- developing an easy-to-use Child Protection Procedures Manual to provide detailed step-by-step directions on roles, responsibilities and procedures
- promotion of reporting and referral process among child protection counsellors, school counsellors, and health workers.

Alternative Care:

- implementing an alternative care programme in line with the legal regulations on alternative care, and strengthening supervision over primary care facilities
- if children are separated from parental care, care with relatives should be given priority and other forms of care should be based on a family structure

Improved Coordination:

- improving coordination and cooperation between all stakeholders including health and education and social welfare departments, the judiciary and prosecution, and between agencies of government and non-governmental organizations, governors, local councils, and community leaders
- continuing to engage UNRWA, child protection working group members and other humanitarian institutions in child protection planning
- clarifying roles and responsibilities of all stakeholders to ensure compliance with the law and more consistent protection of children
- enhancing cooperation and communication between social workers in the various directorates of the Ministry of Social Development to improve internal referral of cases

Capacity Building and Workforce Development:

- building capacity and improving training of child protection professionals and other stakeholders including judiciary, police and prosecutors
- improving the capacity of child protection networks
- strengthening Child Protection Counsellors to play a leadership and coordination role in child protection and capacity building in social work skills and working with children
- advocacy to increase the number of child protection counsellors
- raising salaries and increasing the budget allocated to logistics (vehicles and equipment) laptops and other equipment
- building the capacity of the social workers in the Palestinian National Program for Cash Assistance to identify vulnerable children and monitor safety, physical and psychological aspects of the children in their homes and making appropriate referrals when needed

Data Management Information Systems and Quality Control

- improving and consolidating data collection on child protection by all ministries and relevant institutions (police, public prosecution, courts, education, health, work, prisoners' authority etc.)
- developing a national database that includes child protection information from all ministries and institutions participating in the child protection system
- enhancing the capacity of the Ministry of Social Development in the field of analyzing child protection data to prepare appropriate child protection policies and budget.
- establishing a quality control committee for child protection networks and developing a framework for child protection follow-up in cooperation with civil society organizations

There were no evaluations of the roll out of this strategic plan found in the search for literature for this study.

The National Strategy for Justice and Rule of Law 2014-2016

Although this Strategy is not current, it is helpful to note government's commitment to strengthening the rule of law and to enabling justice sector institutions to perform their role effectively including training of relevant stakeholders responsible for justice for children. The Strategy also included specific policy objectives on improving access to justice for children and the establishment of specialized judges and prosecutors for cases of violence against women and children.¹⁵²

¹⁵² P7

9. Data collection and management information systems

The UN Guidelines for the Alternative Care of Children¹⁵³ advise that,

It is a responsibility of the State or appropriate level of government to ensure the development and implementation of coordinated policies regarding formal and informal care for all children who are without parental care. Such policies should be based on sound information and statistical data. They should define a process for determining who has responsibility for a child, taking into account the role of the child's parents or principal caregivers in his/her protection, care and development. Presumptive responsibility, unless shown to be otherwise, is with the child's parents or principal caregivers.

The necessity of accurate and systematic data collection for information on characteristics and trends of child protection and alternative child care is crucial for the development and application of appropriate and evidence-based policy and practice.¹⁵⁴

It is evident from the reports sourced for this study, that individual ministries, as well as international and national NGOs, collate and report on a range of child protection issues. This is particularly led and enhanced by the work of humanitarian and human rights agencies. However, there does not appear to be a single central database that disaggregated information on children in alternative care, including quantitative or qualitative or longitudinal data. This means there is no reliable reporting on the quality of care, comparative data, or disaggregated information about the children themselves.

According to the General Statistics Law No.4. of 2000, the Palestinian Central Bureau of Statistics is considered the official body responsible for compiling data and statistics within the State of Palestine. The Bureau does have a comprehensive database that includes the collation and reporting on children's issues. This includes periodic reports on 'The Status of the Rights of Palestinian Children' which, along with other statistical data relating to families and children, can be found at:

http://www.pcbs.gov.ps/pcbs_2012/Publications_AR.aspx

A study published in 2015¹⁵⁵ recognized this data management system as being an important tool 'for both child rights monitoring, as well as government planning and budgeting.'¹⁵⁶ The authors of the study considered the process for information sharing between Ministry of Social Development Governorate-level Child Protection Counsellors at Governorate and Directorate level in the West Bank to be fairly comprehensive. This in part, was attributed to the requirement of Child Protection Counsellors to submit reports to the General Directorate of Family and Child on every case they are responsible for. The study¹⁵⁷ noted how a standard set of forms, developed as part of the National Child Protection Referral Protocol, were intended to promote the systematic collection, recording and sharing of information. In 2016, a central electronic database was developed within the Ministry of Social Development with Child Protection Counsellors trained to use it. It was noted how no information was being inputted into the system from Gaza.

In the State of Palestine's submission to the Committee on the Rights of the Child delivered in 2018¹⁵⁸, the lack of a database containing information about 'orphans' and the support they were being offered by different entities was noted to be a challenge. The report goes on to outline the plans of the Ministry of Social Development to develop 'statistics on orphans in care institutions in the West Bank, with a view to drawing up intervention strategies and monitoring institutions and associations concerned with orphans in order to ensure that they provide appropriate care.

¹⁵³ UN General Assembly, Guidelines for the Alternative Care of Children : resolution / adopted by the General Assembly, 24 February 2010, A/RES/64/142, available at: <https://www.refworld.org/docid/4c3acd162.html>

¹⁵⁴ AlEissa, M.A. et al. (2009) A commentary on national child maltreatment surveillance systems: Examples of progress. *Child Abuse and Neglect*, 33, pp. 809-814; Boothby, N. and Stark, L. (2011) Data surveillance in child protection systems development: An Indonesian case study. *Child Abuse and Neglect*, 35, pp.933-1001.

¹⁵⁵ p7

¹⁵⁶ *ibid.*

¹⁵⁷ p7

¹⁵⁸ p3

It is also recognized that 'The Palestinian Authority Strategic Plan for Child Protection (2018-2022)' contains objectives that include the improvement and consolidation of data on child protection by all ministries and relevant institutions including the police, public prosecution, courts, education, health sectors etc. The strategy also outlines plans to develop a national database that includes child protection information from all ministries and institutions participating in the child protection system and to enhance the capacity of the Ministry of Social Development to analyze and use data to inform the preparation of policies and budgets. However, the plan to improve child protection data does not stipulate whether this will include enhanced data relating to children in alternative care.

10. Structures for system delivery, coordination and oversight

The UN Guidelines for the Alternative Care of Children¹⁵⁹ urge that,

All State entities involved in the referral of, and assistance to, children without parental care, in cooperation with civil society, should adopt policies and procedures, which favor information sharing and networking between agencies and individuals in order to ensure effective care, aftercare and protection for these children. The location and/or design of the agency responsible for the oversight of alternative care should be established so as to maximize its accessibility to those who require the services provided.

10.1 The role of State agencies

Ministry of Social Development

As noted previously in this study, the term Ministry of Social Affairs and Ministry of Social Development has been used interchangeably across documents reviewed for this study. It also translates both ways on the Palestinian Authority's own website. It may also be, although not confirmed, that the name of the Ministry has changed from Ministry of Social Affairs to Ministry of Social Development. For purposes of this report, the term Ministry of Social Development will be used, as this is how the Ministry is described in the State of Palestine's submission to the Commission on the Rights of the Child.

The Ministry of Social Development has oversight for the social protection sector in Palestine, to be undertaken in partnership and coordination with other relevant ministries and bodies. The Ministry is responsible for providing the necessary social support - including social welfare payments - for families, especially those in vulnerable circumstances.¹⁶⁰ In the State of Palestine's latest submission to the Committee for the Rights of the Child¹⁶¹, the Ministry reported on programmes it had been developing, including those for the protection, care and rehabilitation of vulnerable and marginalized groups. Families experiencing financial stress are assessed by Ministry social workers whose role is to determine their eligibility for cash transfers and other financial assistance.

The Ministry also has responsibility for child protection and children's safeguarding from physical or sexual violence, neglect and exploitation. It also has responsibility for children who can no longer remain with their primary caregiver and the provision of alternative care. This includes licensing and monitoring provision of alternative care. The Ministry is also responsible for social welfare payments including a fund for 'orphans'.

The Ministry of Social Development also has oversight of juvenile justice. One example of this work is the establishment and chairing of the National Committee for Juvenile Justice, Membership includes representatives of the Ministry of the Interior Police Department, the Ministry of Justice, the Ministry of Education, the Supreme Judicial Council, the Office of the Public Prosecutor, the Ministry of Health, the Ministry of Labour, and the Ministry of Women's Affairs. The Committee is responsible for identifying needs and priorities at the national level and developing plans and programmes.¹⁶²

A further role of the Ministry is the development of appropriate policy and strategies. An example being oversight of the drafting the Strategic Plan for the Protection of Children 2018-2022 in partnership with relevant organizations as well as the 2016 - 2020 strategic plan for Juvenile Justice.

There is a responsibility placed on the Ministry to work in partnership not just with other government bodies, but also with NGOS. This includes the ability to contract out services through the application of inter-agency

¹⁵⁹ UN General Assembly, Guidelines for the Alternative Care of Children : resolution / adopted by the General Assembly, 24 February 2010, A/RES/64/142, available at: <https://www.refworld.org/docid/4c3acd162.html>

¹⁶⁰ P3

¹⁶¹ *ibid.*

¹⁶² P3

memorandums of understanding as required in By-laws. These memorandums should determine the roles and responsibilities of the partnership with NGOS. To be eligible, the NGOS must meet certain requirements including being organizations that deliver projects in the sphere of education, health, social and legal services. They must be active and have geographic outreach covering different areas of the country, have the relevant professional experience, undertake to uphold principles of participation, and are an officially licensed body. ¹⁶³

According to an evaluation conducted by Birzeit University in 2006¹⁶⁴, legal responsibilities of the Ministry include:

- Endeavoring to protect the life of children and provide them with care in addition to the respect of their private life and safeguarding them against any arbitrary or illegal procedures in their life, family, home or private correspondence;
- Ensuring children's right to freedom of expression and opinion consistence with public order and morale and guarantee their rights to disclose their opinion in litigations, social or educational procedures pertinent to their circumstances;
- Guaranteeing children the right of respect of their private life and prevent they become subject to any arbitrary or illegal procedure in their life, families, homes or personal correspondence in addition to respecting their legal personality.
- Ensuring children have the right to respectable names that do not degrade them or which are not inconsistent with religious faith and ensure they are immediately registered in the civil register upon birth.
- Ensuring the right of children to best level possible of free health and vaccination services and providing health counselling on children's health, nutrition and protection.
- Taking all necessary measures to protect children against contagious and serious diseases.
- Protecting children against environmental pollution and endeavor to fight pollution.
- Supporting the school health system to enable it plays a broad role in prevention and health counselling.
- Ensuring children enjoy the right to provision of nutrition, clothing, housing, medical treatment and education.
- Ensuring children's rights to decent living standard that is appropriate to their physical, mental, spiritual and social growth.
- Guaranteeing substitute care for children deprived permanently or provisionally from natural family environment through a foster family or social care institutions.

General Directorate of Family Affairs and the Child Protection Department

Following an institutional review carried out between 2010 and 2012, the Ministry of Social Development consolidated its child protection services and programmes in one unit, the Childhood Protection Department, situated within the Ministry's General Directorate of Family Affairs. The aim was to ensure a coordinated and systematic approach to all children's issues, including child protection, children without parental care, children in conflict with the law, vulnerable children, and early childhood care and development. ¹⁶⁵

The Child Protection Department

This Department has overall responsibility for promoting inter-agency coordination including the functioning of a child protection referral system between government and non-government service providers. ¹⁶⁶ It has not been possible to find more information about this particular department.

Child Protection Units

Child Protection Units are situated at governorate level. According to a study published in 2015 ¹⁶⁷ at that time, each Unit was staffed by at least one Child Protection Counsellors with support staff. The Child Law requires Child Protection Counsellors, the equivalent of social workers, to investigate referred cases of child abuse and take appropriate action in protecting the child. ¹⁶⁸ Child Protection Counsellors report technically and professionally to the General Directorate of Family and Child, and report administratively to the Directorate in the governorate where he/she works. Child Protection Counsellors are also required to submit monthly periodical reports on their work to the Directorate.

¹⁶³ p7

¹⁶⁴ P22

¹⁶⁵ p7

¹⁶⁶ ibid.

¹⁶⁷ ibid.

¹⁶⁸ ibid.

Reports indicate that staff of the Child protection units take on more of an investigative and ‘enforcement’¹⁶⁹ role alongside the police rather than, a source of guidance, support and assistance for children, families and communities.¹⁷⁰ The need to need to strengthen the skills and abilities of Child Protection Counsellors has also been identified in the Ministry’s ‘Strategic Plan for the Protection of Children 2018-2022’.

The Ministry also has a separate unit of social workers at governorate level responsible for cash transfers. They are required to work in coordination with the Child Protection Counsellors. However, several reports reviewed for this study suggest this cooperation is weak. There are also objectives in the ‘Strategic Plan for the Protection of Children 2018-2022’ to rectify this.

Child Protection Networks

Amongst the responsibilities of the Childhood Protection Department is the coordination of child protection networks that were established by the Ministry of Social Development and with the support of UNICEF in 2009.¹⁷¹

At the central level in the West Bank, the Ministry of Social Development chairs the Child Protection Network Steering Committee. This Committee is responsible for oversight, planning and coordination of the child protection networks that operate at governorate level. Representing a multi-sectoral approach, the Steering Committee members include general directors from the Ministry of Education and Higher Education, Ministry of Health, Ministry of Labour, Ministry of Interior represented by Public Security Force, Ministry of Justice, NGOs, UNRWA, Palestine Red Crescent Society, and UNICEF.¹⁷²

According to the State of Palestine’s latest submission to the Committee on the Rights of the Child,¹⁷³ the child protection networks were established in order to,

coordinate the provision of services and streamline efforts by governmental and non-governmental entities to protect and care for children who have been subjected to various forms of violence. The network operates through technical committees that have been established in all the country’s governorates, which provide protection, care and follow up services to child victims of violence, in accordance with the intervention plan drawn up for the child in question and the child’s best interests.¹⁷⁴

Child Protection Networks at governorate level are managed and coordinated by the Ministry of Social Development Child Protection Counsellor. A ‘core team’ of selected network members meet for a case conference in response to an identified or reported case of a child in need of protection, with relevant participants invited by representatives of the Ministry of Social Development depending on the nature of the case and the child and family’s needs.

There is a **National Child Protection Referral Protocol**, which defines the role of the network. This includes¹⁷⁵:

- Coordinating between partner institutions in the Network and implement the agreed upon procedures
- Receiving children victims of violence from all official NGO partners in the Network nationwide
- Providing protection, care and follow up to children victims of violence as per the intervention plan
- Providing legal protection for Network workers
- Monitoring the professionals, assess their training needs and enhance the capacity of workers in the field of child protection and care within partner institutions
- Organizing awareness-raising campaigns for families, children and local communities and producing educational leaflets on child and family care and protection
- Publishing statistics and reports on cases of all forms of violence against children.

It is understood¹⁷⁶ that although networks are operational in both the West bank and Gaza although the Gaza networks have different terms of reference, which defines their function as:

- Preparing a child protection prevention and response strategy supported by Governorate annual plans
- Establishing community feedback mechanisms to inform the Child Protection Networks of key child protection issues at the community level

¹⁶⁹ *ibid.*

¹⁷⁰ *ibid.*

¹⁷¹ P14

¹⁷² P7

¹⁷³ P3

¹⁷⁴ *ibid.*

¹⁷⁵ P7

¹⁷⁶ P7

- Identifying key challenges and bottlenecks (legal, policy, service delivery, social norms)
- Working collaboratively to identify solutions to bottlenecks
- Supporting systematic referral of child protection cases for case management, and support coordinated, integrated, multi-actor interventions
- Identifying sector training and capacity building needs and coordinating with other stakeholders to deliver priority trainings
- Supporting the delivery of agreed awareness raising initiatives.

An evaluation of the Networks in 2015¹⁷⁷ expressed concerns regarding the inconsistency in the capacity and functioning of different networks in part due to the individual interest and capability of the Ministry Child Protection Counsellor. This, wrote the researchers, 'suggests that the CPNs are not functioning as effectively as they could in building broad-based partnerships and referral pathways amongst child protection service providers.'¹⁷⁸ A similar conclusion had been reached in a study conducted 5 years earlier.¹⁷⁹ An UNWRA study published in 2014¹⁸⁰ noted how the networks in Gaza only address an average of 25 cases per year. In 2018, Save the Children reported on how NGOs do not consistently refer cases they monitor and respond to through the local network.¹⁸¹

The networks are described in the Ministry of Social Development's 'Plan for Child Protection 2018-2022' as undertaking the protection of children through coordination between providers of services as well as strengthening the use of a more structured case management system. The Plan refers in particular to the role of the networks in the West Bank, which directly handle the management of individual cases whilst it notes the Gaza network is undertaking more of a coordination and planning role. The Plan further recognizes the need to strengthen and build the capacity of the Child Protection Networks in strategic planning, supervision and mechanisms, data collection, analysis and information sharing. There are also plans to establish a quality control committee for child protection networks. Furthermore, the Plan contains the objective of: (translated from Arabic)

Emphasis will be placed on structuring and institutionalizing the relationship between formal and informal actors in child protection aiming to build on tribal support mechanisms, while ensuring the flow of family and societal interventions in the best interest of the child. Fostering relationships with family and community leaders will also help build public confidence in the child protection system, increasing official reporting and providing child protection services. This will be done by expanding membership in child protection networks to include governors and community leaders, build trusting relationships with community and religious leaders, and defining roles and responsibilities based on an understanding of joint design of the family conference model for case management and experience (appropriate to the Palestinian context) that engages extended family members and the increased engagement of community leaders in the case management process (in appropriate cases).

Child Protection Centres

The Ministry of Social Development manages a small number of child protection centres for child victims of violence, abuse or neglect who require emergency and temporary protection. In 2015¹⁸² there were reportedly three such centres, one in Beitunia (Ramallah) for boys aged five to 18 years, a Girls' Care Home in Bethlehem, and the Beit Al Amal shelter for girls in Gaza. There were also three women's shelters in the West Bank (one in Bethlehem, one in Nablus, and one in Jericho) to provide temporary care, and psychological and legal counselling services for girls who are victims of violence. There is no confirmation whether all these centres are still operational under the auspices of the Ministry.

The Palestinian Network for Child Rights

The Palestinian Network for Child Rights was established in 2006 as an initiative prompted by the non-governmental organization Defense of Children¹⁸³ The Network has published a detailed child protection policy

¹⁷⁷ *ibid.*

¹⁷⁸ *ibid.*

¹⁷⁹ P14

¹⁸⁰ P23

¹⁸¹ P2

¹⁸² P7

¹⁸³ P15

which provides (translated from Arabic): “a framework of principles ,standards, and directives” upon which individual and institutional practice is built according to the following fields:

- The establishment of institutions " safe for children" and "friendly to him" (according to the safety and environmental protection from abuse of sexual, psychological ,and physical)
- Reduction of ill - treatment
- Staff recruitment and training
- Management systems strengthening
- Guidance on appropriate and inappropriate behavior / situation
- Guidance on the means of communication for children
- Discrimination allegations regarding ill-treatment, and reporting and responding
- Disciplinary measures addressing violations of health and safety, physical harm and dealing with information related to children, the use of appropriate administrative procedures and the ramifications of misconduct

The networks child protection policy objectives include:

- Raising children’s awareness of their rights and protection
- Raising the awareness of workers of all Network organisations regarding mechanisms to protection children that have been abused
- Protecting children who are within the work of the organisations of the network who are at risk inside and outside those institutions
- Ensuring the participation of children in protection procedures
- Ensuring all cases that are mishandled are reported to the competent authorities
- Ensuring support services for cases of abuse are implemented according to protection measures in organisations
- Ensuring monitoring of the prevention and curative measures for child protection within the member organisations

The policy goes on to outline different forms of abuse and to require members of the Network to adhere to published State protection regulations including the use of child protection case management protocols.

The National Council for the Child:

In the most recent State of Palestine, submission to the Committee on the Rights of the Child in 2018,¹⁸⁴ the National Council for Children was is described as being formed in accordance with a statute, issued by the Council of Ministers that sets forth its objectives, composition, duties and mandate. That mandate includes proposing strategies and public policies on the care and protection of children before their submission to the Council of Ministers for ratification and implementation. The National Council for Children actually began to function in May 2018. According to its statute, the Council for Children should meet every two months.

The Council includes all government bodies that work with children and has the Independent Commission for Human Rights as observer, in addition to civil society and academic institutions. It also has the role of monitoring the implementation of the Convention on the Rights of the Child.

The Council is mandated to undertake the following tasks and powers:

- To propose the state’s general strategies and policies in the field of child care and protection, and submit them to the Council of Ministers for approval and follow-up on their implementation
- To propose a comprehensive national plan related to childhood affairs, and submit it to the cabinet for approval
- Follow up and coordinate efforts between the various official and private bodies, bodies and institutions working in the field of childhood, to protect and care for the child
- Adopt standards for protecting the rights of the child in line with international charters and agreements
- Contribute to the preparation and protection of legislation related to children.
- Evaluating the parties involved in implementing the general strategies and policies for childhood, and making recommendations with the aim of improving and developing their participation in the best interest of the child
- Follow up with the competent authorities to draw up reports on the child's condition, in accordance with the requirements of the International Convention on the Rights of the Child
- Ratify internal and external agreements related to the field of childhood

¹⁸⁴ P3

- Form sub-committees to follow up some of the specializations and tasks assigned to it

However, in the State of Palestine submission to the Committee on the Rights of the Child in 2018,¹⁸⁵ there is recognition of some of the challenges still facing the Council. These include lack of coordination among institutions that monitor and follow up on complaints from children and that action that will enable wide-scale access by children to mechanisms by which they can submit complaints is still in its early stages.

The Submission also highlighted further challenges the Council has faced in meeting its goals. These include, 'economic difficulties, legislative dysfunction, poor coordination and follow-up among partners, lack of effective participation by children in past years and an increasing population, particularly in the occupied Gaza Strip.'¹⁸⁶

The Ministry of Health

The Ministry of Health has trained medical and nursing staff and psychologists on the mechanisms of early detection of abuse, violence and neglect in children, in addition to the country's transfer and networking system. The Ministry also has a system for collecting and corroborating information on cases of abuse, violence and neglect in six governorates.¹⁸⁷ As noted in Section 8, there are specific identification and referral protocols that should be followed by health workers if they suspect/detect a case of child abuse.

The Ministry of Education

The role of school counsellors includes certain tasks akin to some of those of a social worker. This includes the responsibility to refer children who are thought to be at risk of harm to a Ministry of Social Development Child Protection Counsellor. Indeed, some reports acknowledge that a significant percentage of referrals received by the Counsellors have come from School Counsellors.

Information gathered during focus group discussions and interviews, members of Child Protection Networks identified School Counsellors as playing a 'significant role'¹⁸⁸ in working to support children and, when necessary, working with parents both in resolving protection issues as well as offering parenting advice. It was also understood that School Counsellors mostly refer cases to the Child Protection Network in situations of parents not responding to their interventions.

School Counsellors

There has been investment by the Ministry of Education in hiring School counsellors, including 200 new counsellors hired in 2015/2016.¹⁸⁹ However, it was understood their number remained limited, with an average of approximately 724 students per counsellor. Training for school counsellors has focused primarily on basic counselling and psycho-social support skills, though in practice they are playing a much broader role in case management and engaging with children and families than envisioned in the referral protocol and MOUs. School counsellors have not all received training on how refer cases, and many of them intervene directly with families, rather than following written procedures. Concerns have been raised that even when cases are referred to the Ministry of Social Affairs, no action is taken.¹⁹⁰

10.2 The role of the judiciary

After approving the Law on the protection of Palestinian Juveniles, the Supreme Judicial Council was assigned the role of appointing specialized juvenile judges and provision of a specialized court.¹⁹¹ It has been noted in one report sourced for this study, that as of 2017¹⁹², there was still only one court for justice for children. Furthermore, no specific evaluation of the knowledge and capacity of judges making decisions about children

¹⁸⁵ p3

¹⁸⁶ *ibid.*

¹⁸⁷ *ibid.*

¹⁸⁸ p7

¹⁸⁹ p7

¹⁹⁰ p7

¹⁹¹ p13

¹⁹² p7

in need or protection and alternative care have been found. What has been noted in a 2017 report ¹⁹³ is that at that time, judiciary had not received any specialized training related to appropriately handling cases of child victims and child witness of crime. During court proceedings and as a follow up, there is no mandatory social workers support sanctioned by the court- in situations when the child partakes in court hearings/proceedings.

Matters relating to family status, such as marriage, divorce, alimony and child custody, are dealt with the Sharia Courts for Muslims and Church Courts for Christians. The Sharia courts have been largely excluded from development assistance. However, UNICEF has partnered with the Higher Sharia Judicial Council to train Sharia Judges on child protection and best interest determinations, which the judges then applied in their judicial decisions. The Sharia courts in the West Bank have reportedly shown considerable flexibility and willingness to exercise their judicial discretion in favor of creating more equitable outcomes for women and children (UNDP & UNW 2014).

In a report issued by the Child Protection Working Group in Gaze in 2018,¹⁹⁴ the following recommendations were offered:

Consider conducting full legal review and analysis for strengthening the legal environment) including unifying laws and alignment with international standards) for children's access to justice and legal protection in Gaza Strip, with special focus in the regulations pertaining child victims and child witness. Consider culturally and technically appropriate awareness raising and capacity building for working with child victims, witnesses and child offenders for all actors involved in justice sector policy makers, police officer, prosecutors, judiciary, probation service, and social service. Consider in-depth training with informal justice actors as well as strengthening of bridges among formal and informal leading to ensure fulfillment of children's rights at all times in community- based dispute resolution mechanism.

10.3 The role of the Prosecutor's Office

The Prosecutor's Office plays a role in certain child protection cases, particularly those involving violence, the decision to remove children from parental care and recommendations for prosecution of the perpetrator.

On February 8th 2016, the Public Prosecutor issued a decision to establish a Juvenile Prosecution Department to look into cases of juveniles and children at risk and the risk of delinquency. This included a role in conducting investigations and pleading in a manner that ensures confidentiality and respect for the rights of the child. The Office specializes in appealing judgments and the retrial of cases of jurisdiction and working in cooperation with the Ministry of Social Development through the Child Protection Guide to follow up children's cases. The members of the Juvenile Prosecution Office total 34 in 2017. ¹⁹⁵

In 2015 it was recognized how the Attorney General's Office in the West Bank had created a Gender Unit, with 15 prosecutors officially assigned to deal with violence against women and children¹⁹⁶ However, concerns were expressed that there was similar police or prosecutorial specialization in Gaza.

10.4 The role of the Police

Family Protection and Juvenile Unit of the Palestinian Police Force

The Family Protection and Juvenile Unit was established within the Palestinian Police Force in 2008 and became operational in 2009. ¹⁹⁷ The Unit has branches across Palestine. The goal of this unit is to offer protection and support to women and children. According to the Unit's website¹⁹⁸, the unit,

¹⁹³ p9

¹⁹⁴ p9

¹⁹⁵ p13

¹⁹⁶ p7

¹⁹⁷ p3

¹⁹⁸ Sourced at: https://www.palpolice.ps/en/contact-family-protection-unit?_cf_chl_jschl_tk__=e786c39e24f108704f6a0344d654266b2da4f9a7-1611400227-0-AY495OIMDUHHFjBg6k3AZSKXnSHf0jLuc_Xe17WHsvS3YrvT65O_eugJAOhljB3VHGQ707VweFmbyqMpfH4c6JqOJlr3W5zdAOB9J5yVcwq-N24JZICKqgn_lqNnDiTfCOK2BaS8CCbVJoe9yqKfNHN9jnzY9oXvBVpr-

works through a qualified staff of which the majority are holding high university degrees in Human sciences .They receive and deal with battered women and children as well as sexual assault cases where they take complaints and then investigate with the aggressors and take legal measures against them with confidentiality. The work of this unit is not only limited to converting cases to the judiciary, it also works to maintain the social relations and family bonding where there is a correctional role to provide other services through a network of professional relationships with partner institutions and ministries. In addition to this unit, the Juvenile Police was created to deal with children of both genders who are in conflict with the law according to international standards. A qualified and specializes staff holding scientific degrees in Human Sciences is prepared to rehabilitate juveniles through comprehensive training program to deal with this specific age group. The unit began its work in 2009 in four district of the West Bank, and in 2011, the project was circulated to the rest of the districts.

The model was based on the Public Security Directorate Family Protection Department in Jordan¹⁹⁹. Staff are specialized and qualified personnel wear civilian clothing while performing their duties with the aim of creating a more child friendly approach. The Bureau for the Protection of the Family and Adolescents ensures the personal security of child victims of abuse, their families and child protection counsellors during the intervention process, and also ensures that members of the child protection network are protected while carrying out their duties.

The Police have also developed a standard procedure manual that addresses the procedures that officers must follow when working with children. A report on domestic violence in Palestine issued by UN-ESCWA, noted how, in 2013, the Chief of Police adopted the first ever Strategy, Regulation and Standard Operating Procedures for dealing with survivors of violence, including case reporting, risk assessment and case management.²⁰⁰ The UN-ESCAW evaluation acknowledged this strategy as being aligned with international human rights standards and how it had led 'to an increase in the number of survivors of violence accessing services from the Family Protection Units.'²⁰¹ By 2018, the Unit had 100 trained specialist officers reported to be handling over 3,500 cases each year.²⁰²

The Unit has received support from international organisations including EUPOLL COPPS, UNICEF and UN WOMEN. The capacity of staff within the Units have benefitted from support not only in physical resourcing the units but also with training. For example, EUPOLL COPPs has continued to provide capacity building and support²⁰³. However, reports of a few years ago were suggesting that as well as remaining under resources, and the use of Standard Operating Procedures requiring attention, more training is required.²⁰⁴

What has been noted is the manner in which the Units have reportedly contributed to an increase in the number of family violence cases that are reported to the police with an increase of 3,662 cases in 2013 from 1,755 in 2011. However, it was understood that very few of these cases actually went to prosecution, with evidence collection, coercion and diversion to informal justice cited as key factors.

Furthermore, the role of police in Gaza was reported as weak when dealing with child victim and child witness. This was seen to be exacerbated by poor or non-existent use of child-friendly procedures particularly related to cases that require special care and protection measures.²⁰⁵ Information gathered during focus group discussions in Gaza told of challenges that included the lack of child friendly interview rooms or medical examination rooms for children who are victims of sexual abuse and the concern of re-victimization of children during any investigation process. These observations also noted the absence of social worker or psychologist presence during interviews.²⁰⁶

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¹⁹⁹ Authors own note as she supported the establishment of these units whilst UNICEF Chief of Child Protection in Palestine

²⁰⁰ P24

²⁰¹ P24

²⁰² Sourced: <https://eupolcopps.eu/en/node/5425>

²⁰³²⁰³ Sourced: <https://eupolcopps.eu/en/node/5425>

²⁰⁴ P7

²⁰⁵ P9

²⁰⁶ P9

10.5 The role of non-governmental organisations

There is a significant presence of UN agencies and international and national NGOs across Palestine. As a consequence of many years of Israeli military occupation, community-based and national organisations have played a principle role in the development and delivery of services for children and families, as for example, those that responded to protection violations committed by Israeli forces as well as filling the gap in services that were not offered by the Israeli military administration that governed the West Bank and Gaza strip. As a result, human rights-based organisations for example - including child protection organisations - have continued to undertake roles of reporting, advocacy and delivery of front-line support services. In addition, there has been a strong presence of UN agencies including UNWRA, UNICEF, UNHCHR, UN WOMEN and OCHA. Delivery of financial and technical support by these bodies have addressed both humanitarian and development aspects of programming.

Documents supplied in Arabic by the SOS team in Palestine list a significant number of NGOs playing various roles in relation to child protection. This includes documents for example, that list all those agencies noted as playing a role in child protection case management across Palestine - including responsibilities of networking, referral and delivery of a range of multi-sectoral services. Many work in partnership, including through memorandums of understanding with government departments.

A 2018²⁰⁷ mapping of organisations providing protection services working in East Jerusalem alone, found 3,000 people working in 49 organisations. There are most noticeably a very large number of agencies delivering Mental Health and Psychosocial Support services (MHPSS) to children and their families across Palestine.

The **Child Protection sub-cluster** with inter-agency child protection working groups in West Bank and Gaza is under the designated leadership of UNICEF. This sub-cluster is a member of the Protection Cluster²⁰⁸ which in turn is part of the Humanitarian Coordination Structure in Palestine. This is a global UN led 'cluster approach' activated around the world led by OCHA. The Palestinian cluster was established in 2009 under the leadership of OHCHR. The cluster has the responsibility to coordinate protection activities of international and national humanitarian and human rights organisations. The cluster involves those working in displacement, violence, legal support, child protection, GBV, MHPSS, mine action and human rights defense. The Child Protection sub-cluster²⁰⁹ is particularly active in regular reporting procedures, ongoing assessments and evaluation, coordination of response especially in situations of crisis and coordination of humanitarian and coordinated sector funding requests through the systematic 'Cluster Approach' for appeals.

It is apparent that the non-governmental sector plays a significant role in the development and delivery of all aspects of the child protection system as either a direct service provider, supplementing work not fulfilled by the authorities and/or building the capacity of Ministries to respond effectively. UN and international agencies are playing a significant role in the latter.

There are a number of studies highlighting the important role community and religious leaders, as well as community child protection committees, can play. The trust and respect afforded family elders, village and tribal leaders, religious leaders and informal justice actors by their communities, is recognized as an important factor in their ability to advocate for, and be partners in, strengthening child protection systems.²¹⁰ However, as in the report published by TdH in 2013²¹¹, there are also concerns such as those regarding the role of customary and religious leaders and informal justice practices in the child protection system. The concerns include their involvement in the process that emphasize reconciliation and community harmony over the best interest of the child. Furthermore, observations have been made in terms of decisions by elders lack regard for children's views, informal justice institutions have become politicized and can be unduly influenced by parties from stronger or more powerful families, and in some cases, informal justice may even be putting children's lives at risk.

A further study on child protection,²¹² that gathered information through a series of focus groups discussions, found that in some locations, larger families have family committees made up of elders and wealthy people from the family who make decisions in family matters. It was also explained how cases such as severe physical abuse of a child might generally be resolved by the extended family or community leaders by speaking with

²⁰⁷ p8

²⁰⁸ Sourced at: <https://www.humanitarianresponse.info/en/operations/occupied-palestinian-territory/protection>

²⁰⁹ Sourced at: <https://www.globalprotectioncluster.org/themes/child-protection/>

²¹⁰ p7

²¹¹ *ibid.*

²¹² *ibid.*

the father, explaining the impact of his/her behavior on the child, and trying to understand and help address the underlying causes behind the violence.

The same study ²¹³ found the quality and level of child protection specialization in NGOs varied significantly with a tendency, particularly amongst smaller organisations, to only provide services on a project by project basis, often in accordance with donor priorities, rather than develop their specialization and provide services on a permanent basis.

What is very significant is the lack of information in mapping, evaluations, studies and other reports, of those organisations managing alternative care services.

²¹³ *ibid.*

11. Gatekeeping and child protection case management

Gatekeeping is an essential component of a national child protection and alternative care system.²¹⁴ It involves a systematic process and use of tools and procedures that enables all those involved in the protection and care of children to make choices that are in the best interests of each child and meets their individual needs, circumstances and wishes.²¹⁵ Shared gatekeeping tools and processes enable multi-sectoral teams working together on case management should ensure:

- careful identification and referral of children and families at risk
- comprehensive and rigorous multi-sectoral assessments of circumstances and needs and wishes
- decision making procedures taken in consideration of the best interests of each child with full and meaningful participation of children, families and involvement of other relevant stakeholders
- development of child and/or family Support Plans that identify the community-based support services to be provided in a timely manner. If alternative care is necessary, each child should have an individual Care Plan.
- oversight and delivery of support services and/or alternative care.
- ongoing case monitoring and review of Support Plans/Care Plans and the changing situation of the child and their family
- procedures that facilitate and support family reunification or other permanent solutions for a child including adoption

It is important that all the above procedures respect a child's right to participate (see CRC Article 12) in decisions that affect their lives. This is a central premise to making effective and appropriate decisions about their protection and well-being. In addition, importance should be placed on the development of multi-sectoral assessments and other shared gatekeeping tools and mechanisms accompanied by joint training on these tools so that policy, practice and responsibility is owned by all relevant stakeholders and agencies (social welfare, education, health, judiciary, housing, employment etc.). This also helps create a holistic child-centered approach to child protection and alternative care.

Furthermore, in setting thresholds and parameters as part of assessment and decision-making processes, the 2019 UNGA Resolution on the Promotion and protection of the rights of children²¹⁶ clearly states that,

financial and material poverty, or conditions directly and uniquely imputable to such poverty, should never be the only justification for the removal of a child from the care of his or her parents or primary caregivers and legal guardians, for receiving a child into alternative care or for preventing his or her reintegration, but should be seen as a signal for the need to provide appropriate support to their family, benefiting the child directly.

In light of the above guidance, this desk review has considered gatekeeping in Jordan and the use of child protection case management processes and tools as illustrated in Figure 22. below.

²¹⁴ Gale, C. & Csaky, C. (2014) (2015) Making Decisions for the Better Care of Children: The role of gatekeeping in strengthening family-based care and reforming alternative care systems. Better Care Network and United Nations Children's Fund (UNICEF)

²¹⁵ Cantwell, N.; Davidson, J.; Elsley, S.; Milligan, I.; Quinn, N. (2012) Moving Forward: Implementing the Alternative Care Guidelines for Children. UK: CELCIS, University of Strathclyde

²¹⁶ United Nations General Assembly (2019) 'Promotion and protection of the rights of children' adopted by the General Assembly at its 74th session, 19 November 2019, A/74/395

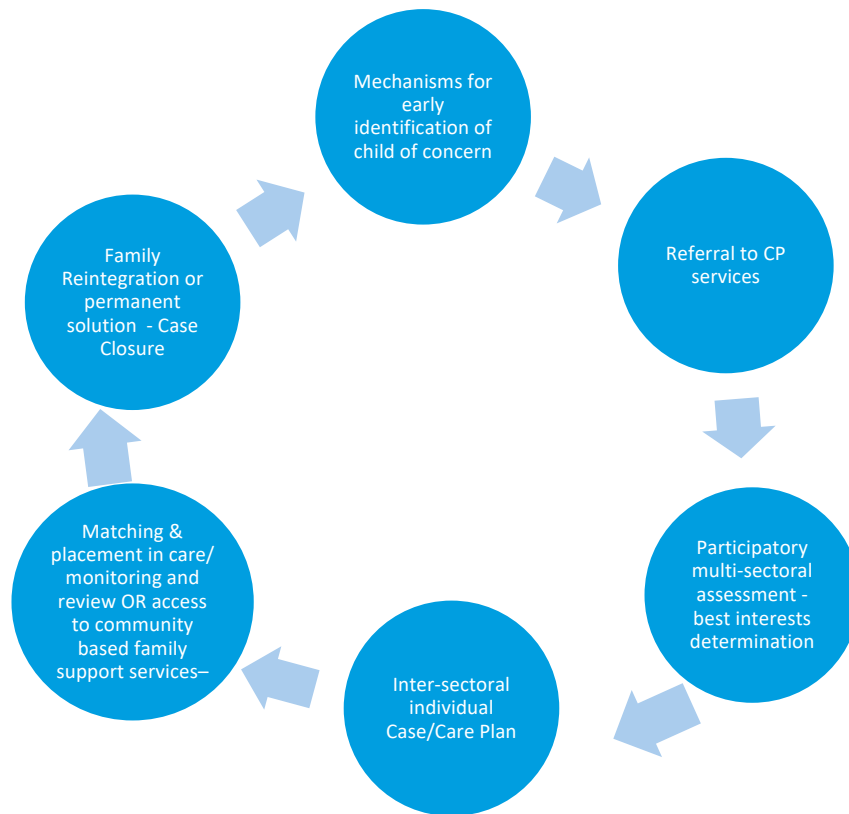


Figure 22. Steps of child protection case management

11.1 Referral, assessment and care planning

(in relation to child protection case management in Palestine, a care plan is what would more widely be referred to as a case plan)

Different protocols for child protection case management have been developed in different geographical areas of Palestine and by different agencies depending on location and the population lead agencies hold responsibility for.

The Ministry of Social Development in the West Bank has been recognized as achieving ‘significant progress’²¹⁷ in the development of the National Child Protection Referral Protocol 2017 outlined in Section 8 specifically in reference to health settings.²¹⁸ It is also understood that the Ministry has signed Memorandums of Understanding with the Ministry of Education and Ministry of Interior (Police) and Ministry of Health to ensure referral across sectors.

The Child Protection Protocol outlines the steps of a multi-disciplinary case management process, with standardized forms to be used to facilitate the different steps of registration, assessment, case planning and inter- agency referral. Under the protocol, all protection cases should be referred to the Ministry Child Protection Counsellor (also referred to in other documents as the Child Protection Officer or the Child Protection Guide).

As per the Child Law of 2004 (with amendments in 2012), once a case has been referred to the Child Protection Counsellor, they should conduct a preliminary assessment with the involvement of the child and their caregivers. If it is understood the child may be at imminent risk, the initial investigation should be undertaken within 24 hours. In all other cases, the initial assessment must happen within 72 hours. If access to the child is denied, the Counsellor can request assistance from the police. However, the Child Law stipulates that if it is necessary to enter a dwelling, a judicial order should be issued.

²¹⁷ p7

²¹⁸ ibid

Based on this assessment the Counsellor must take a decision regarding any initial steps to protect the child. This might include emergency removal of the child if the child is considered to be in imminent danger. Otherwise the Child Law allow for two pathways to be followed.

The first is to allow the child to remain in their family if the risk is not considered to be high. The Counsellor can work with the family to undertake (“measures of a reconciliation nature”). This includes a signed commitment from parents to prevent/stop any risk to the child. The Counsellor can also take steps to ensure the child does not come into contact with the people that may threaten the child although it is unclear in the Law what these steps entail.

If it is deemed possible for a child to remain in the care of their parents, within 21 days, the Counsellor should also convene a multi-agency case conference to develop a ‘care plan’ with members of the Child Protection Network. Based on the agreed plan, the child and family should then receive support as per assessed needs. This might include financial support, parenting advice, counselling, mental health or MHPSS services, The Counsellor should also undertake regular monitoring visits.

However, a second pathway applies when it is has been assessed that a child cannot remain in the care of their parents. In these circumstances, the Child Protection Counsellor may temporarily place the child with:

- Someone that has guardianship of the child
- A member of the child’s extended family
- A temporary ‘foster’ family in accordance with standards and controls issued by the Council of Ministers
- An officially recognized organization providing alternative care (described in the Child Law as a suitable public or private family, social, educational or health organization or institution

These steps must have the endorsement of a judge. The child’s parents or caregiver and the child have the right to come before the judge, and if the child’s age and/or maturity do not allow them to participate directly, the judge must assign a suitable person to convey the child’s views. The case may also come to the court via the Office of the Prosecutor especially if the police have been involved. A study²¹⁹ has noted however, that although there should be involvement of children, parents, extended family in the development of plans, this is not always undertaken in a robust manner.

If cases of serious violence, as for example sexual abuse are reported, a child might be immediately removed and placed in a State managed ‘protection centre’ (of which there are two in the West Bank). The child might also be sent for a forensic medical examination, and a report made to the Family and Juvenile Protection Unit within the police force for investigation and prosecution of the abuser.²²⁰

11.2 Care/case plan review and monitoring

If the child is to remain with their own family, once a ‘care plan’ has been developed the Child Protection Counsellor is responsible for monitoring progress through follow-up visits to the child and their family and ongoing evaluation of the case if necessary through multi-sectoral ‘case meetings’.²²¹ The frequency of visits depends on the case circumstances and it has been reported that this may be, ‘as frequently as once per week, or once every one or two months’.²²²

As mentioned above, there have been different case management protocols developed according to location and lead agencies. For example, in Gaza, the development of the 2016 ‘Inter-Agency Standard Operating Procedures for Prevention of and Response to Gender-Based Violence and Child Protection’ has been led by the inter-agency Child Protection and GBV Working Groups in partnership with the Ministry of Social Development and with support from the Norwegian Refugee Council. The Procedures also include case management forms and the use of case conferencing. The procedures outline detailed guiding principles, procedures, roles and responsibilities in the prevention of and response to both child protection and GBV. They require a multidisciplinary approach to case management, containing similar but more detailed procedures than those in the West Bank.²²³ The steps of case management include identification and registration of cases, initial assessment and safety plans, comprehensive assessment and case plan development, following up and review, and case closure. They also include a set of forms to help facilitate registration and assessment, and

²¹⁹ P7

²²⁰ P7

²²¹ P3

²²² P7

²²³ *ibid.*

for care plans. Once again, it has been noted that these forms are different from those in the National Child Protection Referral Protocol used in the West Bank therefore creating challenges when trying to consolidate data and reporting across Palestine as a whole.

An evaluation in 2015²²⁴ also noted further differences including the use of risk levels in the Gaza SOPs at initial referral stage. Only those cases that rate as level 1 ('very dangerous' cases such as sexual abuse in the family), and Level 2 ('dangerous' cases such as severe to moderate physical violence) are necessarily referred to Ministry workers for case management. Level 3 and Level 4 cases can be managed by NGOs. In practice, it has also been recognized that NGOs tended to receive cases directly from families or children themselves whilst Child Protection Counsellors mainly receive referrals from the police or Ministry of Education school counsellors.²²⁵

It is understood that whilst the Gaza Standard Operating Procedures are more comprehensive and less "enforcement" oriented, they are complex and lengthy (at close to 300 pages) and therefore, do not lend themselves as being easy to use by front-line workers.²²⁶

It has also been noted that, whilst the Child Law requires mandatory reporting of children thought to be at risk, the Gaza Standard Operating Procedures call attention to instances when reporting may expose children to further risk, especially if sexual abuse is involved. The Procedures therefore, recommend that decisions about reporting be made on case-by-case basis, taking into account the best interest of the child and a consideration if reporting could increase risk of harm to the child. It is understood that there is underreporting of serious cases of abuse, as for example of sexual abuse, due to families preferring to either keep such incidents secret in order to hide the shame, and/or address the situation themselves either within the family or their local community.²²⁷ This is coupled with an observation that NGOs may not involve the Ministry Child Protection Counsellor as frequently as is warranted in such cases.

When a case is referred to the Ministry of Social Development, an inter-agency case conference should be arranged with attendees including representatives from the Ministries of justice and health, Sharia courts, international experts, religious leaders and members of a reconciliation committee. Decisions of the panel are binding, and "endorsed" if and when necessary by a judge.

A further system of child protection has been developed by UNRWA. A 2014 mapping of the UNRWA's response to child protection²²⁸ raised a number of concerns. As a result, UNRWA developed a Child Protection Framework in 2016²²⁹. The three pillars of the Framework are illustrated in Figure 23.

²²⁴ *ibid.*

²²⁵ *ibid.*

²²⁶ p7

²²⁷ p9

²²⁸ P25

²²⁹ P26

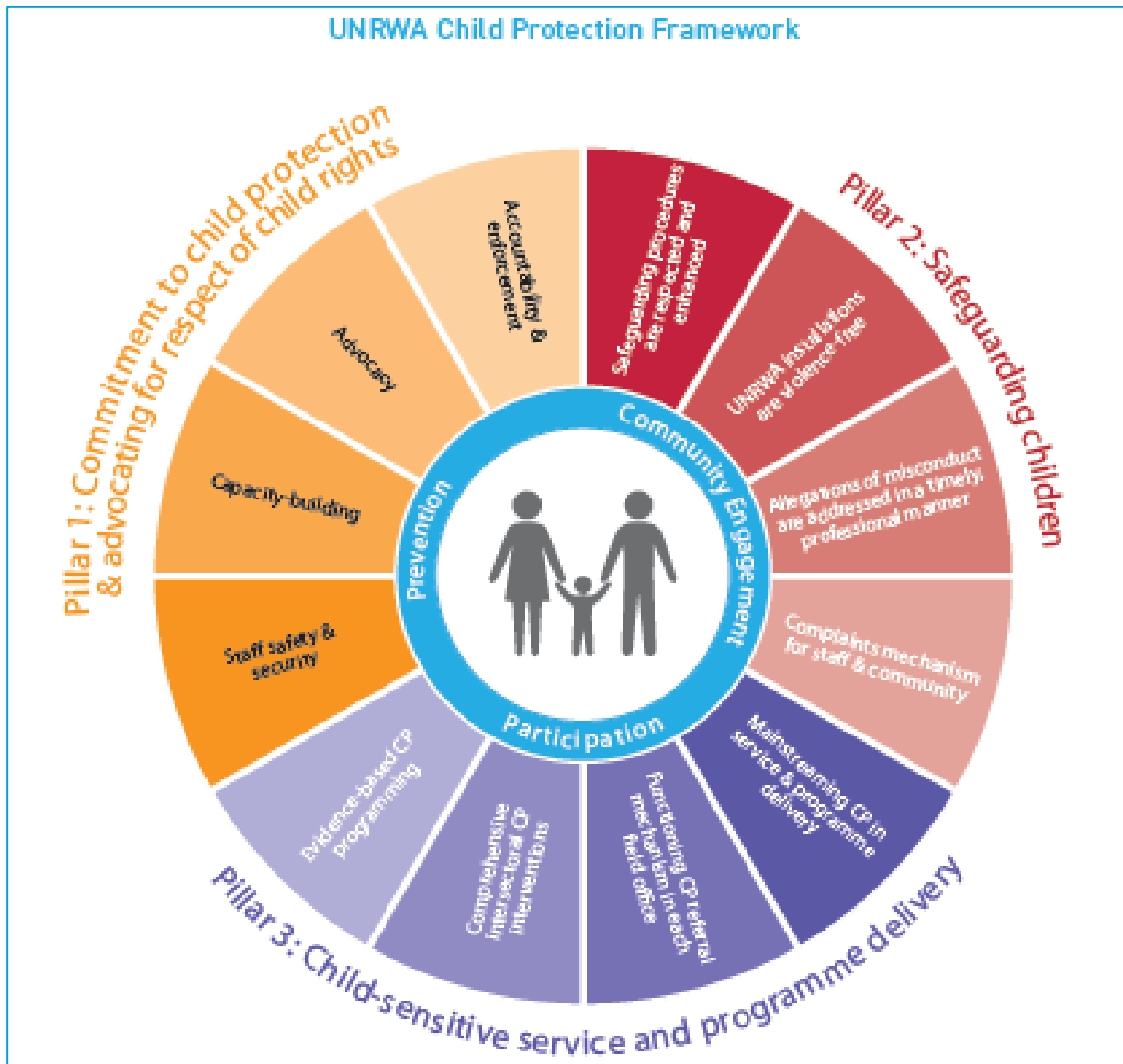


Figure 23. The three pillars of the UNRWA Child Protection Framework (published 2016)²³⁰

UNRWA has been expanding the role it undertakes responding to child protection cases within the population they are responsible for. These cases are now being managed in accordance with the UNRWA case management procedures. However, although there is reference within the UNRWA Framework to working in coordination and cooperation with host governments, there is still a concern regarding the lack of referral of children into the national child protection system.²³¹

Overall, across Palestine, the number of officially reported child protection cases remain low, especially for some forms of abuse such as sexual abuse. This is indicated in Table 5 and Table 6, depicting 2015 data for the West Bank and 2016 data for Gaza respectively. This may in part, be due to the findings reported above about the lack of reporting by families, especially those of sexual abuse, coupled with the observation that NGOs and UNRWA do not always refer cases to the Ministry Child Protection Counsellors. Furthermore, reports have been made regarding some lack of trust between NGOs and State agencies that may also be impacting on the lack of referrals.²³² There has also been recognition for a need to improve training of school counsellors who play an important role in the referral of cases.

²³⁰ P25

²³¹ P7

²³² P7

Gender	Forms of Abuse					
	Neglect/ Emotional Abuse	Physical Abuse	Exploitation		Sexual Abuse	
			Sexual	Labor	Harassment	Full Assault
Boys	155	17		54	8	9
Girls	133	13	7	5	28	17
Total	288	30	7	59	36	26
Total Numbers of Cases						446

Table 2. Reported cases of violence, abused and exploitation of children (West Bank) 2015²³³

Individual Protection Cases								
	Separated from parents or usual caregivers	Alone or without caregiver	Harmed by family or community violence	Severely distressed	Physical injuries	Begging / Exploitive Labour	Domestic Violence	Sexual Abuse
Boys	8	0	3	9	4	14	0	0
Girls	9	0	7	6	1	4	0	0
Total	17	0	10	15	5	18	0	0
Total number cases								65

Table 3. Protection cases as reported in the Child Protection Working Group Monitoring report (Gaza) 2016²³⁴

²³⁵ A report in 2015 stated those providing protection services to children and families are not required to be accredited or certified by the Childhood Protection Department. However, this has not been mentioned in any other documents and it has not been possible to verify this requirement.

²³³ *ibid.*

²³⁴ *ibid.*

²³⁵ *ibid.*

12. Continuum of protection and suitable care services

12.1 Informal care

Informal Care as defined by the UN Guidelines for the Alternative Care of Children is a privately made arrangement when a 'child is looked after on an ongoing or indefinite basis by relatives or friends at the initiative of the child, his or her parents or other person without this arrangement having been ordered by an administrative or judicial authority or a duly accredited body'.²³⁶

The Guidelines describe kinship care as 'family-based care within the child's extended family or with close friends of the family known to the child'.²³⁷ It may be formal or informal in nature (it is considered formal when it has been ordered by a competent administrative body or judicial authority.)

No dedicated report on informal care in Palestine was sourced during this study although it is understood that most extended family members will automatically take on responsibility the children who are no longer in the care of their parents. This is not only when children are orphaned or there are breakdown within the immediate family unit for example, but it is also understood that issues of child abuse and neglect are most often dealt with within the family rather than resorting to formal protection mechanisms.²³⁸

Information provided in a TdH report in 2018²³⁹ considered the situation of children described as 'unaccompanied and separated' in Gaza (this term has been used in the TdH study as not only applying to refugee and migrant children as per the usual definition). The study gathered information in 2017 through focus group discussions as well as drawing on a previous study in 2014. In total 68.7% of 604 respondents said they had heard of, or encountered a child that had become separated from their usual caregivers. The final report went on to discuss reasons for separation including death of a parent, which often resulted in the remaining parent unable to face the challenges of being a sole caregiver. Divorce and remarriage, especially of widows, were also cited. Respondents said in these cases the children often went to live with grandparents. Other reasons included poverty, loss of livelihood, and loss of the family home often due to Israeli bombardment. Safety in terms of moving children out of dangerous areas was also mentioned. According to focus group participants, informal kinship care is the reason they believe the numbers of children in institutional care to be low.

12.2 Formal alternative care

Formal Care as defined by the UN Guidelines for the Alternative Care of Children is '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'.

The provision of alternative care for children is the responsibility of the Ministry of Social Development. In the State of Palestine's latest submission to the Committee on the Rights of the Child, alternative care is described as being for those children separated from their parents due to violence, or in order to provide them with protection, or for other reasons' as well as 'orphans and other children deprived of family care.'²⁴⁰

Formal arrangements for children without parental care in Palestine include placement in a residential setting or with an alternative family. This for example, is illustrated in Table 7. which contains information extracted from a document provided by the SOS team in the West Bank (unattributed and undated but it is believed the data has been extracted from the State of Palestine Annual Statistical Report for the Year 2017 as published in 2018 by the Ministry of Social Development).

²³⁶ UN General Assembly. *Guidelines for the Alternative Care of Children (2010) resolution / adopted by the General Assembly, 24 February 2010, A/RES/64/142.*

²³⁷ *ibid.*

²³⁸ p7

²³⁹ p9

²⁴⁰ p3

This data shows the number of children placed in alternative care in 2018 as the result of child protection measures and whether or not they remained with their family, were placed with an alternative family (referred to as a 'foster' family), or placed in a residential setting.

Type of protection measure	Number	Percentage
Protecting the child within the family	824	75.5
Child protection in a foster family	93	8.5
Child protection in an institutions	175	16
TOTAL	1092	100

Table 4. Distribution of children subjected to violence, neglect or exploitation and measures taken to protect them (believed to be published in 2018)

12.3 Residential care

It has not been possible to find a report that provides a compendium of longitudinal, quantitative and qualitative data in relation to the use of residential care in Palestine. This means information is missing in terms of exact number, size and quality of residential care settings, which children they are mandated to accept and details of children in their care.

Due to this lack of centralized information, the data contained within Table 8. has been collated from information sourced in a number of documents. This table illustrates the complexity of sourcing data as well as the inconsistency both in terms of terminology, including as it relates to the different settings run by the State and those by NGOs or 'private' organisations in Palestine.

Year of reported data/ year of publication	Age Group	Care setting as described in the literature'	Number of residential care settings	Number of children	Source
2014		'temporary residential centres' for 'victims of violence'	2	61 boys 36 girls	²⁴¹
2015		temporary residential centres' for 'victims of violence'	2	34 girls 20 boys	²⁴²
2016		temporary residential centres' for 'victims of violence'	2	44 girls	²⁴³
2017		'temporary residential centres' for 'victims of violence'	2	42 girls	²⁴⁴

²⁴¹ p7

²⁴² p3

²⁴³ ibid.

²⁴⁴ ibid

				70 boys	
2017		'non-governmental institutions to take care of orphans'	19 in West Bank 4 in Gaza	2,800	245
2018		'alternative care institutions'		657	246
2018		'5 private child care institutions'	5		247

Table 5. Data on children in residential care (extracted from a variety of sources)

A child rights report issued by the Palestinian Authority in 2010²⁴⁸ stated the vast majority of children in Palestine reside within families with less than 0.5% of children residing within orphanages, shelters, reform institutions, or in foster care.

The most information that has been found regarding provision of residential care run by the Ministry of Social Development, relates to the two 'protection centres'. The Beituniya Centre for boys is situated in Ramalah and the centre for girls is in Bethlehem. These centres are meant to be used as a last resort for children who require short-term protection supposedly for a period up to six months, although it is, reported children do stay longer, until a more permanent solution can be found.²⁴⁹ Numbers of children in residential care, as indicated in the table above, remain quite low. If return to their family is not possible, then these children should be placed in family-based alternative care or into a residential care setting. Further information on these two centres has been provided in the State of Palestine's submission to the Committee on the Rights of the Child provided to the Committee in 2018.²⁵⁰ The centres are described as being available for the 'protection of child victims of violence'. It is the duty of the Child Protection Counsellor to ensure the development of 'intervention plans when the children arrive at the centres, and to monitor their implementation. The CRC submission²⁵¹ goes on to state how,

Children at the centres remain in contact with their parents through telephone calls or visits, provided that this is in their best interest. A child at one of the centres is evaluated regularly, in accordance with his or her intervention plan, and implementation of the plan is assessed by the child protection counsellor who remains in contact with the child's family. Child victims of violence and neglect are placed in those centres in order to provide them with temporary emergency protection and a series of services, including psychological and social rehabilitation services, which are provided in coordination with relevant social and psychological support institutions. The Girls' Care Home provided shelter and rehabilitation services to 34 girls in 2015, to 44 girls in 2016 and to 42 girls in 2017.

A document provided by the SOS team in the West Bank (unattributed and undated but it is believed the data has been extracted from the State of Palestine Annual Statistical Report for the Year 2017 as published in 2018 by the Ministry of Social Development), also provides information on the number of children that 'received protection and care services at the for the year 2018' in these centres. This included 37 boys referred for protection and emergency care which, as illustrated in Figure 24. including approximately 70% having been subjected to economic exploitation and 30% to neglect and abuse.

²⁴⁵ ppt received from SOS team in West Bank - no source reference / containing data for 2017

²⁴⁶ p3

²⁴⁷ ibid.

²⁴⁸ p29

²⁴⁹ p7

²⁵⁰ p3

²⁵¹ ibid.

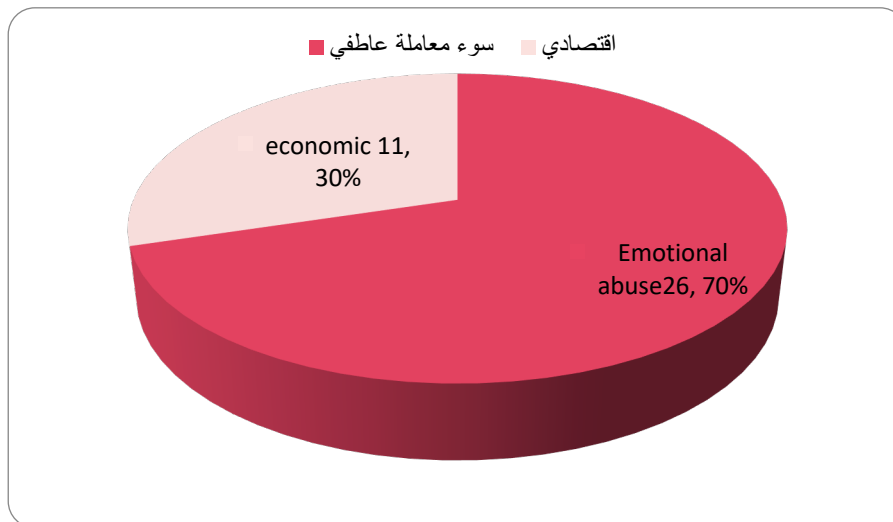


Figure 24. Reasons for placement of boys in a residential Child Protection Centre in West Bank (2018)

Thirty-four girls were referred to the centre in 2017 for reasons as illustrated in Figure 25.

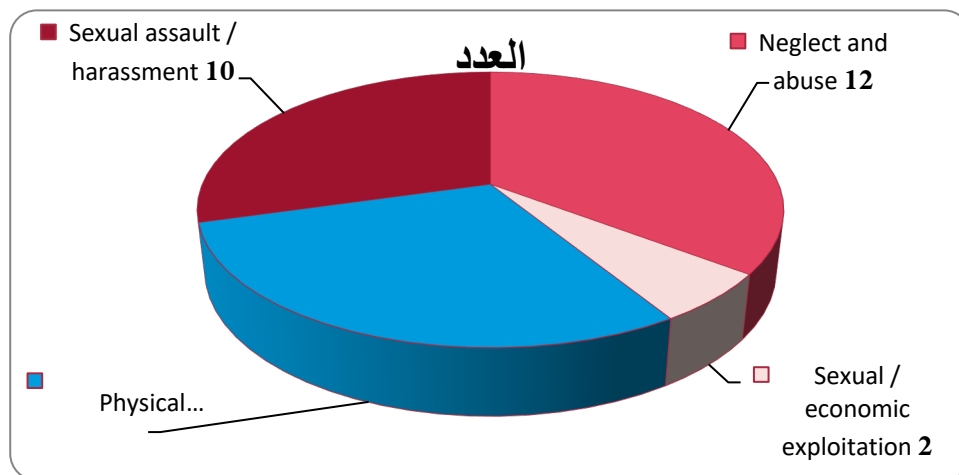


Figure 25. Reasons for placement of girls in a residential Child Protection Centre in West Bank (2018)

Residential care has also been referenced in the State of Palestine's submission to the Committee on the Rights of the Child in 2018. The submission states there are 5 'private child care institutions in Palestine' however, no other details are provided as for example, who manages these settings or their location. These 'institutions' are described as providing,

comprehensive protection and care to children deprived of a family environment, and provide many forms of care, including, in particular, healthcare, legal assistance, social and psychological care and educational support in both kindergarten and school. Each child receives the particular care that he or she requires, and those institutions provide the services of specialized staff, including nannies, (who can act as the child's mother) kindergarten teachers, specialists (in nursing, pediatrics, social and psychological services, occupational and motor therapy), as well as kitchen, cleaning and maintenance and other support staff.

However, data contained within a pp presentation in Arabic entitled 'Analyzing Child Rights) provided by the SOS team in the West Bank (unattributed, containing data for 2017), showed 23 non-governmental institutions taking care of 'orphans' in Palestine, of which 19 are situated in the West Bank, and 4 in Gaza. According to the ppt, these institutions provide care and shelter services for a total of 2,800 'orphaned children'.

In January 2020, AL-HAQ, an independent human rights organisation situated in the West Bank, provided a 'Submission to The Committee on The Rights of The Child on The First Periodic Review of The State of Palestine 83rd Session' (2020)²⁵². In this submission, the organisation commented on the '**Directives Concerning Social Care Homes**' issued in December 2018. It has not been possible to find a copy of this Directive but it is understood they contain a definition of Social Care Homes as being. '[a] home for observation, care, and rehabilitation for juveniles and children at risk and risk of deviancy, for the purpose of reserving and observing children, and to accommodate, reform, and rehabilitate juveniles and children at risk and those at the risk of deviancy, educationally and professionally, to rehabilitate and reintegrate them into society. These homes are organized according to directives issued by the Minister (Ministry of Social Development) in this regard'.

The submission also notes the Directive includes children and juveniles in care aged between 12 to 18 years old in the West Bank, including juveniles (arrested and convicted children) and children at risk and risk of deviancy. The submission notes concerns that the Directives contain an article prohibiting children from leaving the social care home to participate in any individual, group activity, or training, except when granted a judicial permission in coordination with the Directorate (Directorate of Social Development in the governorate) and the Child Protection Department (Department affiliated with the General Directorate of Family Affairs within the Ministry of Social Development) while duly defining and providing the name of the juvenile, the nature of the activity to be participated in, and its duration". However, it is not clear whether this is in reference to all social care homes or to the Dar Al-Amal Home for Observation and Social Welfare in particular, which accommodates children in detention.

A newspaper article²⁵³ contains an interview with the Minister of Social Development Ibrahim Al-Shaer speaking about the issue of instructions for social care homes, based on the decree of the Juvenile Protection Law No. (4) 2016.

The article goes on to say (translated from Arabic) that these instructions, according to the ministry statement that day, are,

aimed at establishing and organizing social care homes in order to protect and reform juveniles and children at risk of delinquency and delinquency for the age group between 12-18 years old. The instructions deal in detail with the subordination and specific determinants of the executive management and the staff working in the care centres, in addition to how to receive juveniles and the conditions for their admission, referral points from the Public Prosecution and the judiciary, and child protection counsellors and the procedures for the work of these centres taking into account the rights and best interests of children, the mechanism for working juvenile files, in addition to basic health and social services. And educational, social rehabilitation services and extracurricular activities. These instructions also regulate vacations and visits, and how to organize records, legal notes and social reports for children. All social welfare institutions are corrected according to these instructions in accordance with the law and principles. Minister Al-Shaer said: "The issuance of these instructions came as a result of the experience of implementing the Juvenile Protection Law, and we look forward to standardizing and developing work and establishing clear rules in organizing and managing this file, in a way that serves the interest of children and responds to their rights guaranteed by the law.

12.3.1. Quality of residential care

The responsibility of registering, licensing, supervising, and monitoring these institutions resides with the Ministry of Social Development.²⁵⁴ As with neighboring countries, it has been a challenge to find evaluations of quality of care for children in residential settings in Palestine.

Perhaps indicative of quality of care and the impact on outcomes for children can be seen in a research paper published in 2007.²⁵⁵ The study examined the level of emotional problems among 115 children aged 9-16 years old (average age of 13.4) years, living in two 'orphanages' (the authors recognized this term was a misnomer

²⁵² P27

²⁵³ Sourced at: <https://nn.najah.edu/news/Palestine/2018/12/27/183413/>

²⁵⁴ P29

²⁵⁵ P30

due to most children having at least living parent) in Gaza. Reasons for admission were related to the death of a father and inability of remaining family to care for them. Children did retain contact with their families including visits during the school holidays (88.8%) and being visited in the home (94.75). The study found children 'demonstrated high rates of anxiety, depressive and post-traumatic stress reactions.'²⁵⁶ However, these findings were not only attributed to the care in the residential setting but also children's experiences before being admitted to care as well as the distress of separation.

12.4. Deinstitutionalisation

Although the Child Law places an emphasis of children being raised in a family, there have been no plans or reports found during the literature search for this study indicating the existence of any national deinstitutionalization plan or indeed, any reference at all to closure of any form of residential care.

12.5. Family based alternative care

The most commonly used term for family-based alternative care is 'foster care'. Foster care, described in the UN Guidelines for the Alternative Care of Children as 'Situations whereby children are placed by a competent authority for the purposes of alternative care in the domestic environment of a family, other than children's own family, that has been selected, qualified, approved and supervised for providing such care.'²⁵⁷ The Handbook 'Moving Forward'²⁵⁸ produced as a tool to assist with implementation of the Guidelines, identifies the use of foster care as a form of short- or longer-term placement, depending on suitability and circumstances. In reality, the term 'foster care' used in different countries to describe a range of formal, and sometimes informal, care settings.

There is no foster care in Palestine that meets the requirements laid out in the UN Guidelines for the Alternative Care of Children.

Cabinet Resolution No. (4) of 2014 regarding temporary alternative families provides for a system of alternative family care, which applies, to children that have been 'exposed to danger and the risk of delinquency temporarily, especially the following groups':

1. The child who cannot be provided guidance by their family, and the competent authorities are unable to infer his place of residence
2. The child who, according to the request of the Child Protection Councillor through an assessment (translated from Arabic as 'social research'), decides it impossible for the child to be cared for in their family of origin for urgent and temporary reasons.
3. The child whom the judge decides upon the request of the Child Protection Counsellor that staying with his family exposes the child temporarily to danger or exploitation (Article 2)

Article 3. Outlines the necessary attributes of an alternative family including:

1. The family must be Palestinian and their religion conforms to the religion of the child, unless the child is of unknown religion, then it is a condition that the family in this case be Muslim
2. That the family consists of a spouse of good conduct and has not been convicted of a felony or misdemeanor that violates honour and trust.
3. The age of each of the spouses is not less than 25 years and not more than 55 years
4. The couple must be able to care for and be aware of the child's needs.
5. The number of children in the family should not exceed two, and a family is not allowed to take care of more than one or two siblings without the approval of the General Administration.
6. That the alternative family dwelling is in a suitable environment in which there are educational, religious, medical and sports institutions, and health conditions are available in the dwelling
7. That the surrogate family undertakes to provide the child with all his needs like the rest of its members
8. That the members of the surrogate family be free from contagious and dangerous diseases and mental illnesses
9. That the circumstances and time of the surrogate family allow it to take care of the child

²⁵⁶ P30

²⁵⁷ UN General Assembly. *Guidelines for the Alternative Care of Children (2010) resolution / adopted by the General Assembly, 24 February 2010, A/RES/64/142*

²⁵⁸ Cantwell, N., Davidson, J., Elsley, S., Milligan, I. & Quinn, N. (2012) *Moving Forward: Implementing the 'Guidelines for the Alternative Care of Children'*. UK: Centre for Excellence for Looked After Children in Scotland. Centre for Excellence for Looked After Children in Scotland, University of Strathclyde, Glasgow: Scotland.

10. The public administration in special cases, and based on the guide's recommendation, may deliver the child to a woman who meets the conditions set forth in Paragraph 1 of this Article

Article 4. requires priority be given to the extended family but not someone who is already a legal guardian of the child, unless the extended family lacks the criteria and requirements specified in Article (3) of the regulations.

Written requests to offer alternative family care must be made on specific forms issued by the Ministry of Social Development. These requests are then placed on a register, which should be reviewed on a monthly basis. Upon receipt of an application, the Department within the Ministry must conduct an assessment taking into consideration the 'cultural level' of the family and family relationships. Motivation of the family should be explored and the manner in which they intend to care for the child. Conditions of the local neighborhood are also expected to be taken into account as well as the condition of the family's home.

Once the assessment is finalized, the application and assessment are considered to determine suitability. The Department will then submit a recommendation to the 'General Administration' (there is no explanation in the Resolution regarding which administration this refers to). The application is studied by this Administration and the family should be informed of a decision within 3 days. If all the requirements are met, an alternative family care contract is issued to the family containing all the obligations and details to meet conditions laid out in a plan for the child. If a family is rejected, they can appeal within 15 days.

The alternative family cannot hand over the child to anyone else nor can they take the child out of the country without written consent from a judge. The child however, can be transferred to the care of another alternative family if the original carers decide they are no longer willing to offer care or, if monitoring of the family reveals they are not competent or have violated the conditions laid out in Article 3 of the regulations.

Each child must have a file containing:

- The request submitted by the foster family that it wants to take care of the child
- Alternative family case research forms, reports of tracing results, and documents indicating the correctness of the data contained in the forms
- The birth certificate of the child or an approved copy
- A photograph of the child and a photo of each of the alternative parents
- The care contract concluded between the public administration and the alternative family
- Copies of the periodic monitoring reports
- Details of any payments given to the alternative family and any money, aid, or financial or in-kind gifts provided to the child by the alternative family

The Child Protection Counsellor must conduct regular monitoring visits (Article 15). During these visits the Counsellor should observe the child's 'condition' within the alternative family, the status of the family and their commitment to care for the child to the required standards, and any identify any situations that mean the child is not settling in and adapting to their new circumstances. The Counsellor should also visit the child whilst they are at school and help overcome any difficulties relating to the child remaining in school once they reach the age of 15 years old.

Article 17. allows either one of the child's birth parents or their guardian to request the child's return if the circumstances that led to the separation have been addressed. It is then a decision to be made by the Ministry department whether or not to return the child based on a report by staff of the Ministry (entitled a 'Guide in the regulation but this term has been used in other reports to signify a Child Protection Counsellor).

There is nothing in the regulations to stipulate the maximum time a child can remain in the alternative family. There is nothing in the regulations regarding the careful matching of a child with a family. There is nothing in the regulations taking into account the participation, decisions and wishes of a child.

What is slightly confusing is there is also a further regulation for 'foster' care, the **Cabinet Resolution No. 10 of 2013 of the Foster Family System**. Under this regulation, 'foster care' can be provided for children of unknown parents, 'illegal' children, meaning a child born out of wedlock, and children without family care. This Resolution also names the Ministry of Social Development as responsible for its application. Once again, this form of family-based alternative care does not meet the definition of foster care as laid out in the UN Guidelines for the Alternative Care of Children for it is not seen as a temporary measure. Indeed, 'foster' carers are provided an agreement of permanent custody. In recognition of the wording in the Resolution as it translates from Arabic,

the term 'foster care' will be used in this section of this study whilst recognizing it to be a temporary form of care.

Although this is a foster care resolution, Article 4. states how:

1. The Ministry shall deposit the child of unknown parentage in the Social Welfare Institution after taking the procedures for naming and registering him in the civil registry under a fictitious quadruple name within a maximum period of three months from the date of its placement.
2. The name of the real mother of the child must be recorded if she is known in the Ministry's records for illegitimate children, provided that it is compatible with the records of the Ministry of Interior. Her name is not entered in the child's civil registry unless she so desires

The Ministry is also responsible for maintain records including those of:

- children of unknown parentage
- illegal children
- children without family care
- families under study
- families rejected by the committee
- Follow-up records of the foster child

Under Article 7. The following conditions must be met in the family/applicant including:

- The applicant must be Palestinian
- Spouses are living together
- Have the same religion as the child
- Have a monthly income not less than 2000 NIS
- Has not been convicted of any felony or misdemeanor and is of good reputation and morals
- Has a good level of physical, mental and psychological health, enabling them to bring up the child properly
- Will provide all forms of educational, health, psychological, material and social care
- Will accept the supervision of the Ministry's representatives and allow them to visit, to speak with the child, and to follow up all developments according to the conditions and standards necessary to ensure the best interest of the child until complete stability.

The Ministry gives priority to fostering a child to families residing in the Palestinian territories, have an appropriate level of educational, cultural and social attributes, and in cases of sterility of one or both spouses as long as ten years have passed since they were married. A foster family can submit an application to foster another child, provided that the Minister approves and two years have passed since the fostering of the first child. The two foster children must be of the same sex. The family are put back on the waiting list and in terms of place on this list, are treated as if a new family.

To make an application to foster a child, the family must follow a set of procedures that include filling in an application form and attach relevant documents including identity card and marriage certificate, evidence of health and family finances. They must also sign a pledge that they will care and protect the child. This is followed by an interview with the specialized staff from the Ministry who will assess the family and submit a report to their Director. It is the responsibility of the Director to make recommendations to the Committee for Foster Care within one week of receiving the assessment. There is also details of a procedure for families submitting an application but residing outside Palestine.

The decision whether or not a family can foster is made by a Committee comprising

- Director General of the General Administration of Family and Childhood, MoSD (Chair)
- Director General of Supervision and Inspection, MoSD
- Director of the Legal Affairs Unit, MoSD
- A representative of the Ministry of Endowments and Religious Affairs
- A representative of Dar Al Iftaa
- A representative of the Sharia judiciary
- A representative of the Ministry of Interior

The Committee can request assistance from other specialists and the 'Guide' (also referred to in other documents as the Child Protection Counsellor) must attend meetings to provide information about a

prospective family. The Committee must consider the information that has been placed in the file of a child and discuss with the member of the Ministry staff (the 'Guide') that has compiled information. The Committee should interview the family and submit their decision to the Minister. If the decision is to accept the family, they are informed and placed on the waiting list. Rejected families are also informed. Further stipulations in the regulations include the keeping siblings together.

Article 20. stipulates a special committee should be formed to hand over the fostered child to the foster family, which includes the head of the foster families' section, a representative of the Legal Affairs Unit and the 'Guide' in charge of the case. An official report of the 'delivery' must be made on a specified form. The committee must provide the foster family with any pertinent documents related to the child.

In the first instance, there is trial period of three months during which the family are monitored through a series of visits to be undertaken at least twice a month. Once this period ends, if the family is proven eligible based on an assessment report, this is recorded and a procedure is undertaken related to 'permanent custody'. The foster family are provided with a permanent custody agreement. They also receive the child's birth certificate with a fictitious quadruple name if this is not to be the name of the foster family. They are also issued a Palestinian passport and a free health insurance card for the child.

The child and family should be visited by a 'Guide' each month during the first year then twice a year for the next five years. These visits should take into consideration the health, social and educational status of the child. The family should also be spoken with. Notes on the visit should be written up.

There is an allowance paid to the foster carers which, under Article 25. is paid according to the child's age, needs, and stages of education. However, if the foster care does not require the money, the Ministry should open an account in the name of the child and the monthly care allowance is deposited as savings.

The foster carers can terminate the agreement to care for the child if:

- The paternity of the fostered child is established according to a decision issued by the competent court, or his paternity or maternity is recognized by a written declaration certified by two known witnesses
- it is proven that both foster spouses have become physically or mentally ill in a manner that makes it difficult to care for the child according to medical reports from an official authority
- it is proven that one or both foster spouses are corrupt in a manner that is with him, it is considered inappropriate for them to continue embracing the child
- it is proven that the fostered child has been mistreated or abandoned in a manner that allows him to be exposed to danger or delinquency, the child shall be withdrawn and placed in the social care institution, and the Ministry shall inform the official authorities and follow up the case as the primary person responsible for the custody of the child
- the two foster parents die. In this case a relative of the foster family may apply for a new fostering as per the rules

As mentioned above, these regulations clearly indicate this is 'permanent' care. There is nothing in the regulations regarding the careful matching of a child with a family. There is nothing in the regulations taking into account the participation, decisions and wishes of a child. There is nothing in the regulations about an assessment that would ensure the chosen family will be matched so as to meet the needs, circumstances and best wishes of the child.

The National Council for Family Affairs has published an 83-page **Handbook on Foster Care** in 2013 (in Arabic). The Handbook contains a copious amount of information on why it is virtuous to foster a child and how this meets the teachings of Islam. There is also information on what is expected of foster parents and what to consider before entering offering care to a child. It advises foster parents about information they should seek about the child before they foster them and what to ask the institution where the child is residing. This includes finding out about the child's personality and behavior and any information about people 'related to him or his biological parents, past history in institutional care, general physical development, and comparison with peers' (translated from Arabic). It also provides advice on how to receive the child when they first arrive in their home.

The Handbook provides a considerable amount of information on child development and child psychology and how to raise a foster child. This includes problems they may encounter due to the child having been fostered such as behavior, stress etc. as well as how to tell a child they have been fostered if this is decided upon by the family.

During the search for literature for this study, very little data on children placed with alternative families was found. However, from the small amount of information that has been found, the numbers seem to be very low. According to the Palestinian Central Bureau of Statistics (2015) the number of children that were 'fostered' in 2010 was just 7, falling to 4 in 2011 and 1 in 2012, this fell to only 4 and rose slightly to 8 in 2014.

A report issued by the Ministry of Social Development in 2018²⁵⁹ (published in Arabic) contained the information seen in Figure 26, which translates as the 'number of fostered children and children outside legal marriage'

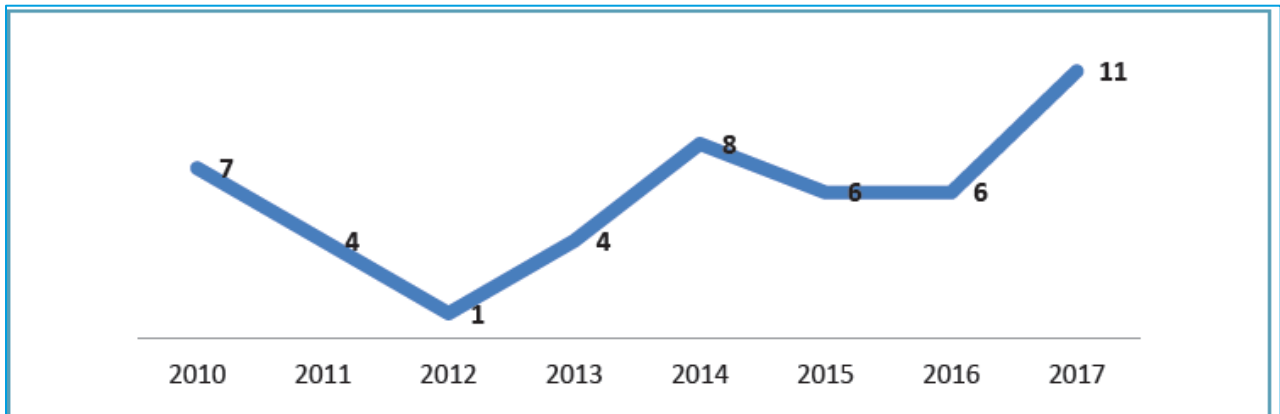


Figure 26. Number of fostered children and children outside legal marriage 2010 to 2017

²⁵⁹ P33

13. Reintegration, ageing out of care and adoption

13.1 Reintegration

Global best practice on reintegration is articulated in the Guidelines for the Reintegration of Children,²⁶⁰ endorsed by international and national organisations. The guidelines state that reintegration should be seen as a process, involving: assessment, preparation, gradual reconnection with families, and post-reunification follow-up support. The guidelines indicate that reintegrating children require a full package of support, covering: efforts to address stigma and discrimination; child protection measures to counter abuse and violence; support accessing health and education services and with catch-up schooling; and household economic strengthening. Each child has differing needs and support should be tailored accordingly. Children often need support for many months and sometimes years after they have returned home.

There was no information in any of the documents sourced for this study that provided evidence of children being reunified once they have been placed in alternative care even though legislation does emphasize that care should be temporary.

13.2 Ageing out of care

Global guidance on support for care leavers is also articulated in the Guidelines for the Alternative Care of Children²⁶¹ and the UN General Assembly resolution 'Promotion and protection of the rights of children'.²⁶² These highlight the importance of a multi-sectoral response covering life skills; education and training, and access to services. The transition process should be supported by 'a specialized person' and undertaken in a participatory manner, considering difference in age, gender and experiences before or during separation.

The UN Guidelines for the Alternative Care of Children²⁶³ call on:

Agencies and facilities should have a clear policy and should carry out agreed procedures relating to the planned and unplanned conclusion of their work with children to ensure appropriate aftercare and/or follow-up. Throughout the period of care, they should systematically aim at preparing children to assume self-reliance and to integrate fully in the community, notably through the acquisition of social and life skills, which are fostered by participation in the life of the local community.

The UN Guidelines also urge that all efforts should be made to ensure a participatory process in planning the pathway and transition from care to independent living should begin well before a young person is leaving care. In particular the UN Guidelines call attention to provision of a 'specialized person' who can be there to support young ageing out of care as well as a focus on additional support for those with special needs including a disability. There should also be access to ongoing education and vocational training opportunities.

Likewise, the 2019 UNGA Resolution on the Promotion and protection of the rights of children²⁶⁴ requires States to ensure,

²⁶⁰ Delap, E> & Wedge, J. (2016) *Guidelines of Children's Reintegration*. Inter-agency Group on Children's Reintegration

²⁶¹ United Nations General Assembly. (2009). Guidelines for the Alternative Care of Children. Resolution A/RES/64/142.

²⁶² United Nations General Assembly (2019) 'Promotion and protection of the rights of children' adopted by the General Assembly at its 74th session, 19 November 2019, A/74/395

²⁶³ UN General Assembly, Guidelines for the Alternative Care of Children : resolution / adopted by the General Assembly, 24 February 2010, A/RES/64/142, available at: <https://www.refworld.org/docid/4c3acd162.html>

²⁶⁴ United Nations General Assembly (2019) 'Promotion and protection of the rights of children' adopted by the General Assembly at its 74th session, 19 November 2019, A/74/395

adolescents and young people leaving alternative care receive appropriate support in preparing for the transition to independent living, including support in gaining access to employment, education, training, housing and psychological support, participating in rehabilitation with their families where that is in their best interest, and gaining access to after-care services consistent with the Guidelines for the Alternative Care of Children.

Most notably, it has not been possible to find any information in any of the literature sourced for this study that provides details of the process of those ageing out of care.

13.3 Adoption

Adoption is not possible under the Law in Palestine. Information in this report illustrates how 'foster care' can be a permanent placement for a child without the legal guarantees of adoption.

14. A skilled workforce

The 2019 UNGA Resolution on the Promotion and protection of the rights of children²⁶⁵ urges States,

to strengthen child welfare and child protection systems and improve care reform efforts, which should include increased multisectoral collaboration, inter alia, between child welfare and health, education and justice sectors, active coordination among all relevant authorities, improved cross-border systems and improved capacity-building and training programmes for relevant stakeholders

The Resolution also asks States to ensure,

adequate and systematic training in the rights of the child, including by encouraging States to take the Guidelines for the Alternative Care of Children into account for professional groups working with and for children, including with children without parental care, including specialized judges, law enforcement officials, lawyers, social workers, medical doctors, care professionals, health professionals and teachers, and coordination among various governmental bodies involved in the promotion and protection of the rights of the child

14.1 Social workers

The equivalent of a 'social worker' responsible for child protection case management as well as children placed in alternative care are Child Protection Counsellors employed by the Ministry of Social Development. Counsellors work under the day-to-day supervision of the Director of the Family and Child Department at governorate level

A report published in 2013,²⁶⁶ said there would usually be one Child Protection Counsellor assigned to each Governorate with a few being the exception and perhaps having two. The role of the Child Protection Counsellor requires a range of skills including the ability to conduct assessments (described as investigations), prepare reports, present information to committees and judges, and monitor the situation and behavior of children.²⁶⁷ It is also understood that the Counsellors have a responsibility to submit monthly reports to their supervisor and provide information on new cases in addition to developments related to existing cases. These reports are examined before being submitted to the Head of the Child Protection Department. Monthly meetings are held between the Counsellors and the Head of the Child Protection Department to discuss the work of the Childhood Protection Network, organize work, and share information related to work obstacles and achievements. The role of the Child Protection Counsellor as mandated for in the Child Law (2004 with amendments in 2012) has also been described in previous Sections of this report.

Child Protection Counsellors should possess at least a BA in social work or psychology.²⁶⁸ However, it has been noted that social work degrees do not usually cover practical and technical aspects of child protection, the child protection system in Palestine or case management. As such, social workers graduates do not necessarily have the level of knowledge and skills required to identify and respond to child abuse cases effectively.

Although recognition ²⁶⁹has been given the ongoing capacity building programmes the Ministry has implemented, including training delivered by NGOs also highlighted the need for further improvement in capability and knowledge. In particular, this related to further skills in psychosocial support, understanding family dynamics, child development and working with children in difficult circumstances.

²⁶⁵ United Nations General Assembly (2019) 'Promotion and protection of the rights of children' adopted by the General Assembly at its 74th session, 19 November 2019, A/74/395

²⁶⁶ P14

²⁶⁷ *ibid.*

²⁶⁸ P14 and P7

²⁶⁹ P7 and P14

The manner in which ‘social workers’ under the supervision of the Family and Child Department must sometimes take on dual roles, has also been noted in a number of reports. It was identified how, in 2013²⁷⁰, those ‘social workers, with responsibility to deliver financial aid to families were also required at times to undertake the role of Child Protection Counsellors and Behavior Monitors (the latter working with children at risk of ‘delinquency’ and children in the juvenile justice system). This undertaking of dual roles was also acknowledged in a 2015 study²⁷¹ including the manner in which, in the West Bank, some staff are specialized exclusively on child protection, whilst others have a dual designation as both a Child Protection Counsellor and a Women’s Protection Officer.

In 2015, the Ministry of Social Development reportedly²⁷² had 22 Child Protection Counsellors: 17 in the West Bank, and at that time, 5 in Gaza.

The number of Child Protection Counsellors is thought to be insufficient in addition to which, the distribution of Child Protection Officers in relation to the population size of a governorate is assessed as inadequate with examples of Hebron, Nablus and Ramallah and all of Gaza thought to be ‘significantly under staffed’.²⁷³ Some indication of these ratios is illustrated in Figure 27. (CPO indicates a Child Protection Counsellor). It was calculated that in 2015, there was approximately one Child Protection Counsellor per 170,525 people in the West Bank, and one per 370,111 people in Gaza).⁶

Governorate	# CPOs	# Dual CPO/WPO	# WPOs	Estimated Population ⁴	Ration CPOs ⁵ /Population	# Child Protection Cases 2015
Jenin	2			318,958	1 / 159,479	63
Tulkaram	1			185,314	1 / 185,314	13
Tubas		2		66,854	1 / 66,854	5
Nablus	1		1	389,329	1 / 389,329	54
Qualqilya	1	1		113,574	1 / 75,716	36
Salfit		1		72,279	1 / 144,558	24
Ramallah	1		1	357,969	1/ 357,969	76
Jericho		1		53,562	1 / 107,124	29
Jerusalem		2		426,533	1/ 426,533	27
Bethlehem		2		221,802	1/221,802	43
Hebron & Yatta		2		729,194	1/729,194	76
North Gaza	1			377,126	1/377,126	
Gaza	1			645,204	1/ 645,204	
Dier Alballah	1			273,381	1/ 273,381	
Khan Yunis	1			351,934	1/ 351,934	
Rafah	1			233,490	1/ 233,490	

Figure 27. Ration of Child Protection Staff in relation to the estimated population ²⁷⁴

²⁷⁰ P14

²⁷¹ P7

²⁷² *ibid.*

²⁷³ *ibid.*

²⁷⁴ P7

A situation analysis published by Save the Children in 2018²⁷⁵ also found the number of the specialized staff to be inadequate 'to cover all areas and needs'.

In 2015, a study commissioned by UNICEF,²⁷⁶ also found the Ministry of Social Development lacked adequate human and financial resources. This was reportedly, 'hampering the proper functioning of the child protection system as envisioned.'²⁷⁷ At the time of this report, it was assessed that the Ministry's budget was generally sufficient to cover staff salaries and basic operational costs but not for funding of services.

It is also understood that lack of resources is specifically hampering the work of Child Protection Counsellors including lack of access to transport in order to reach children and families. In focus group discussions conducted in 2015,²⁷⁸ Counsellors identified the possible dangers they faced including having to cross checkpoints and travel at night. They also felt they did not always receive the adequate support they needed especially in the handling of complex cases such as sexual abuse. Issues of burn out were also reported. There was however, a recognition of the dedication of many of the Counsellors, often spending their own limited resources and putting themselves at risk in order to protect children.²⁷⁹

The study in 2018²⁸⁰ also found access and movement issues limiting the ability of workers to reach children and impacting on the support made available as well as lack of provision of specialized services. Transportation costs were again identified once more as an issue of concern.

14.2 The Judiciary

It is very clear that through legislation, child protection orders and decisions on placement in alternative care should be made by a judge. However, although there are many references to the requirement for specialized courts to be made available to children in many of the strategic plans reviewed for this study, a reference to such courts suggest there is reality only one court in the West Bank with responsibility justice for children. This places responsibility for such decision making on other members of the judiciary however, no further specific evaluation of the capacity of these judges has been found during the review of literature for this study. Although it is noted, there are many reports available on the criminal juvenile justice system.

Note was made in one report issued in 2018,²⁸¹ that the judiciary had not received any specialized training related to appropriately handling cases of child victims and child witness of crime.

²⁷⁵ P2

²⁷⁶ P7

²⁷⁷ *ibid.*

²⁷⁸ *ibid.*

²⁷⁹ *ibid.*

²⁸⁰ P2

²⁸¹ P9

15. Attitudes and awareness raising

Although the information contained in the Sections of this study above, highlight the growing realization and concern for children experiencing circumstances that can lead to their referral into the child protection system and the possibility of placement in alternative care, there remains ongoing societal attitudes and practices that challenge the systematic identification and reporting of, as well as acceptance of support for, children experiencing protection concerns.

Patriarchal norms are reportedly not only contributing to the perpetration of violence against females, but also in preventing support that would offer understanding and support when such violations have occurred.²⁸² This means cases of violence are not being reported but rather, families themselves are attempting to address such problems in order to preserve the family's honour and dignity as well as the reputation of the females involved. This is exacerbated by the unacceptance in Palestinian culture of officials 'interfering' in family issues.²⁸³ Girls also face challenges accessing justice with pressure being placed on them to maintain secrecy about any abuse.²⁸⁴

Focus groups discussions in 2015 also highlighted the consequences a girl might face if sexual abuse was revealed. This included, 'being ostracized by the community, not being able to marry, being forced out of school, at risk of suicide or honour killing.'²⁸⁵ Again the general consensus was such cases would be handled privately within the family, and especially if the abuse had been committed by another family member. As with physical abuse, most groups were of the view that the police would be involved only as a last resort.

Corporal punishment is also often seen to be a socially acceptable means for teachers and parents to discipline students and improve their performance.²⁸⁶

Specifically impacting on the provision of alternative care are the restrictions imposed by legislation influenced by the Sharia laws and beliefs that it is not acceptable to allow for adoption as per international standards. Furthermore, stigma attached to children that have been placed in care due to having been abandoned and/or abused impacts on not only their eligibility for alternative family care, but can negatively affect their opportunities in terms of marriage, employment and position in society for the rest of their lives.

²⁸² P18

²⁸³ P2 and Roseveare 2015

²⁸⁴ P7

²⁸⁵ P7

²⁸⁶ p7

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**SOS CHILDREN'S
VILLAGES**

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