

# Key Drivers Contributing to Child-parents Separation

Uruguay

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## Key Drivers contributing to Child-Parents Separation Uruguay

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## Foreword

For over 10 years, SOS Children's Villages in Uruguay has been undergoing a profound programmatic transformation, closely linked to the fulfilment of children's rights, particularly the right to grow up in a family.

Our mission is: *"To provide a protective environment for children and adolescents and support them in building their future."* Our primary objective is reflected in our vision: *"Children and adolescents have a family with whom they grow up with love, respect, and security, in an environment that promotes harmonious development towards a full and socially integrated adult life."*

The organization's mission to provide a protective environment for children has always been shaped by the loss of family care. Fulfilling our mission, therefore, requires us to work closely with families to ensure the care and protection of children.

The loss of family care is a tragic event that profoundly affects the lives of children, often with extremely harmful consequences. Providing a protective environment for children is not something that should happen *after* family care is lost, but rather before. The emphasis must be on prevention, which can only be achieved by actively working with families.

As part of the child protection system, we understand that the greatest challenge is ensuring that protective measures are activated *before* the loss of family care occurs. The goal is not to sustain a system focused on responding only after family care has been lost, but to develop a system that is strong in prevention and integrated protection.

For this reason, research like this is of fundamental importance, as it helps us better understand the factors contributing to the loss of family care. This understanding is essential, not only for analysis but to drive actions that prevent such occurrences. This is a task that involves the entire system as a whole.



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Our gratitude specifically goes to the professional stakeholders who kindly participated in interviews as well as the adult family members who gave their time to attend our research workshops and share with us their knowledge and ideas.

Most importantly, we want to offer our thanks to all the young people who shared with us their ideas about, and understanding of, family life that helped make our research findings so rich and informative. Their voices, and their recommendations for change that will positively impact the lives of other children, young people and their families, have been a primary contribution to the conclusions in this report.



## Definitions

<b>Abandonment</b>	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.
<b>Adoption</b>	A child who is officially 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'. <sup>1</sup>
<b>Alternative care</b>	Care provided for children who are not living with parents. According to the UN Guidelines, this is care that is formally arranged including foster care, kinship care and placement in small scale residential settings or, informal care. All care in residential institutions even if not formally arranged, is alternative care.
<b>Care Leavers</b>	Children and young people who have left alternative care
<b>Child</b>	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. <sup>2</sup>
<b>Children without parental care</b>	For the purposes of this report, this is children not in the care of both parents. The UN Guidelines for the Alternative Care of Children note this to be 'All children not in the overnight care of at least one of their parents, for whatever reason and under whatever circumstances'. <sup>3</sup>
<b>Family based alternative care</b>	Refers to care arrangement whereby a child is placed in the domestic environment of a family, as opposed to institutional or residential care. <sup>4</sup>
<b>Formal care</b>	'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'. <sup>5</sup>
<b>Foster care</b>	'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'. <sup>6</sup> This also applies to a formally arranged placement with family members i.e. formal kinship foster care..
<b>Gatekeeping</b>	A process by which the situation of a child is carefully assessed and decisions made about protection and care that is in their best interests. This requires adherence to the 'necessity' principle; no child should be separated from parental care and placed in alternative care unless necessary for their protection. Children should be placed in the most suitable alternative care, which should not include residential institutions, that meets their needs. This is a temporary measure and all efforts made to reunite a child with their parents, or other primary caregiver, as quickly as possible.
<b>Informal care</b>	Any private arrangement provided in a family environment, whereby the child is looked after on an ongoing or indefinite basis by relatives or friends also known as 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. <sup>7</sup>
<b>Institutional care</b>	'Large residential care facilities', <sup>8</sup> 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. <sup>9</sup>
<b>Kafala</b>	A means of providing care for children as recognised under Islamic law and in Article 20 of the Convention on the Rights of the Child and in the UN Guidelines for the Alternative Care of

<sup>1</sup> United Nations General Assembly 2009

<sup>2</sup> based on Article 1 of the UN Convention on the Rights of the Child 1989

<sup>3</sup> United Nations General Assembly 2009

<sup>4</sup> European Expert Group on the Transition from Institutional to Community-based Care 2012

<sup>5</sup> United Nations General Assembly 2009

<sup>6</sup> *ibid.*

<sup>7</sup> *ibid.*

<sup>8</sup> *ibid.*

<sup>9</sup> NGO Working Group on Children Without Parental Care 2013

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	Children. This may include providing financial and material support to a child in parental or alternative care, or may be an arrangement closer to adoption or fostering where a child is taken to live with another family <sup>10</sup>
<b>Kinship care</b>	'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.' <sup>11</sup> 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.' <sup>12</sup> Formal kinship care is care in the same settings ordered by an administrative or judicial authority or duly accredited body. <sup>13</sup>
<b>Orphan</b>	For purposes of this report the term orphan refers to a child whose both parents have died
<b>Other primary caregiver</b>	Legal or customary primary caregiver of a child who is not their parent.
<b>Reintegration</b>	The process of a separated child making the transition back into his or her family <sup>14</sup>
<b>Relinquishment</b>	A process by which a parent/s or others with or without parental authority decide not to raise a child and hand them over to another 'carer' e.g., a child voluntarily taken to a residential facility. Relinquishment unlike abandonment is when the identity of the mother or father, or other caregivers are known.
<b>Residential care</b>	'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.' <sup>15</sup> A distinction is often made between residential institutions (described above) and small group homes. Small group homes are settings in which children are cared for in small groups, usually of up to four to six children at most <sup>16</sup> , with consistent caregivers responsible for their care, in a community setting. This form of care is different from foster care in that it takes place outside of the natural 'domestic environment' of the family, usually in facilities that have been especially designed and/or designated for the care of groups of children. <sup>17</sup>
<b>Separated children</b>	Children who have been separated from both parents, or from their previous legal or customary primary caregiver, but not necessarily from other relatives. These may, therefore, include children accompanied by other adult family members. <sup>18</sup>
<b>Small residential care settings</b>	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.' <sup>19</sup>
<b>Street connected children</b>	Children living and/or working on the streets
<b>Violence against children</b>	For this report the term 'violence against children' will be used to denote all forms of abuse and exploitation including and physical, sexual, and emotional abuse, serious neglect and deprivation. <sup>20</sup>
<b>Young person</b>	There is no legal or internationally agreed definition of 'young person'. The United Nations for statistical purposes, has defined 'youth', as persons between the ages of 15 and 24 years. <sup>21</sup> In some countries, a young person is someone up to the age of 34 years (as for example, Uruguay). For the purposes of this report a young person is defined as persons aged 18 to 25 years.

<sup>10</sup> Cantwell and Jacomy-Vite 2011

<sup>11</sup> United Nations General Assembly 2009

<sup>12</sup> ibid. Article 29b.i.

<sup>13</sup> ibid.

<sup>14</sup> Inter-agency group on Children's Reintegration 2016

<sup>15</sup> ibid. Article III, 29c. iv.

<sup>16</sup> UNICEF 2020

<sup>17</sup> United Nations General Assembly 2019

<sup>18</sup> United Nations Committee on the Rights of the Child 2005

<sup>19</sup> UNICEF 2020

<sup>20</sup> Please see: <https://data.unicef.org/topic/child-protection/violence/>

<sup>21</sup> Please see: <https://www.un.org/esa/socdev/documents/youth/fact-sheets/youth-definition.pdf>

## Glossary of terms

Adverse Childhood Experiences	ACEs
UN Food and Agriculture Organization	FAO
Instituto del Niño y Adolescente del Uruguay	INAU
Non-Governmental Organisations	NGOs
Sistema Integral de protección a la infancia a la adolescencia contra la violencia	SIPIAV
Trauma Informed Practice	TIP
United Nations Convention on the Rights of the Child	UNCRC
UN Guidelines for the Alternative Care of Children	UN Guidelines
United Nations Children's Fund	UNICEF
World Health Organisation	WHO

## 1. Background

Clearly enshrined in the United Nations Convention on the Rights of the Child (UNCRC) is the right of a child, 'for the full and harmonious development of his or her personality', to 'grow up in a family environment, in an atmosphere of happiness, love and understanding.'<sup>22</sup> This is further endorsed in the 2019 UNGA Resolution, Promotion and Protection of the Rights of Children<sup>23</sup> and the UN Guidelines for the Alternative Care of Children (UN Guidelines).<sup>24</sup> In relation to alternative care, the handbook written to accompany the UN Guidelines, 'Moving Forward',<sup>25</sup> refers to the important principles of 'necessity' and 'suitability'. These principles recognise the primacy of preventing separation and removal of a child from the care of their parents. A further important premise is no actions should deprive a child of parental care unless it has been rigorously assessed as a necessary safeguarding measure. All decisions must always be in a child's best interest. The UN Guidelines echo the UNCRC in highlighting the importance of efforts being primarily 'directed to enabling the child to remain in or return to the care of his/her parents, or when appropriate, other close family members.'<sup>26</sup> To this end, the 'State should ensure that families have access to forms of support in the caregiving role.'<sup>27</sup>

Over recent years, researchers have made efforts to gather information about children living in 'vulnerable'<sup>28</sup> situations and risk of separation from parental care, as well as on the efficacy of family strengthening.<sup>29</sup> However, these studies often highlight a lack of information, due in part, to inadequate national child protection data management systems that fail to gather information on the reasons why children are in alternative care, or at risk of being so.<sup>30</sup> As a result, there are perceived gaps in evidence that would help inform the development of effective universal and specialist programmes and services to address the underlying drivers of child-parents separation.

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<sup>22</sup> United Nations General Assembly 1989

<sup>23</sup> United National General Assembly 2019

<sup>24</sup> United Nations General Assembly 2009

<sup>25</sup> Cantwell et al. 2012

<sup>26</sup> *ibid.*

<sup>27</sup> *ibid.*

<sup>28</sup> Nankervis et al. 2011

<sup>29</sup> Delap and Reale 2013; EveryChild 2009; Laumann 2015; Lodder et al. 2021; Namey & Brown 2018; Ortea et al. 2022; Wilke et al. 2022

<sup>30</sup> Martin & Zulaika 2016; Petrowski et al. 2017; Willi et al. 2020

Studies have also examined the detrimental impact of adverse experiences in childhood, including separation of a child from parents, as well as the effects of placement in alternative care.<sup>31</sup> Such studies illustrate the way these events can have harmful life-long consequences for children. However, despite efforts to develop national child protection systems that encompass the principles of 'gatekeeping'<sup>32</sup> and prevention of child-parents separation, children across the world continue to lose parental care. Furthermore, some studies suggest many children experience separation from their parents that could have been prevented.<sup>33</sup> It is such findings that highlight the need for urgent action to prevent the placement of children in alternative care everywhere.

Drivers of separation are thought to be complex and varied with studies placing emphasis on differing antecedents.<sup>34</sup> To develop effective and relevant strategies and programmes of service delivery that help prevent the placement of children in alternative care in different parts of the world, it is essential to gain a much clearer understanding of those drivers contributing to child-parents separation in differing contexts. It is particularly important to collate such evidence by listening to the views of children, young people, and adult family members.

This study has been prompted therefore, by a recognition that 'more research is needed to understand the effective approaches to antecedents to placement'<sup>35</sup> in alternative care. This is coupled with an understanding that the most detailed information that currently exists, overwhelmingly originates in high income countries and therefore, a need to gather further primary evidence of risk factors as relevant to different countries, contexts, and socio-ecological systems.<sup>36</sup> It is with this understanding, that our research was undertaken in Uruguay as well as El Salvador, Denmark, Cote d'Ivoire, Indonesia, Kenya, Kyrgyzstan, Lebanon and Uruguay.

## 2. Aim and Scope of the Study

The primary aim of the international research aim was to address gaps in evidence relating to the key drivers that contribute to the separation of children from their parents and placement in alternative care.

To collate this evidence, the following questions were considered:

- What are the key challenges facing families that create conditions in which child-parents separation and placement in alternative care is more likely to occur?
- Who are the children already in alternative care?
- What are some of the gaps in multi-level and multi-sectoral approaches and service delivery that could help prevent child-parents separation?
- What are the ideas of children, young people, family members, and other key stakeholders, about the current support to families and how it could be improved?

Alternative care is recognised in the UN Guidelines as both informal and formal care.<sup>37</sup> The difference being the former is a private arrangement that has not been ordered by an administrative or judicial authority or other

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<sup>31</sup> Bruskas & Tessin 2013; De Swart et al. 2012; Gale 2018; Howard et al. 2023; Simkiss 2019; Stein 2005; Stein 2012

<sup>32</sup> Casky, and Gale 2015

<sup>33</sup> Chaitkin et al. 2017

<sup>34</sup> Bryson et al. 2017; Family for Every Child 2014; Laumann 2015

<sup>35</sup> Wilke et al. 2022

<sup>36</sup> Gale 2018; Martin & Zulaika 2016; Petrowski et al. 2017

<sup>37</sup> United Nations General Assembly 2009

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accredited body. Traditionally, alternative care includes a variety of settings including kinship care, foster care, other forms of family-based placements, as well as residential care, either in a small group setting or in large institutions, and supervised independent living arrangements.

We realise that around the world, interchangeable definitions are being used in relation to children in alternative care. Some of the literature refers to separation of a child from parents, or another primary caregiver, or legal guardian. Some refers to the process of separating children from their parents as 'child-family' separation. Indeed references to separation from parents and from family are both used in the UNCRC. Furthermore, it is acknowledged that the cultural construct and concept of 'family' can denote different household arrangements including the social norm that different members of the extended family are considered a child's primary caregiver. As Kendrick highlighted, over 'recent years, there have been significant developments in sociological and anthropological thinking in terms of the nature of family and intimate relationships'<sup>38</sup> with growing acceptance of differing concepts of what form a 'family' takes in different geographical and cultural contexts.

The UN Guidelines however, clearly define children in alternative care as those being no longer in the care of a parent/s.<sup>39</sup> In this regard, Article 9 of the UNCRC also notes how 'States Parties shall ensure that a child shall not be separated from his or her parents against their will, except when competent authorities subject to judicial review determine...that such separation is necessary for the best interests of the child'.<sup>40</sup> In addition, Article 3 of the UN Guidelines require efforts to be primarily directed toward 'enabling the child to remain in or return to the care of his/her parents'. Article 32 of the UN Guidelines clearly states how 'preventing the need for alternative care' should first and foremost be through 'promoting parental care'. This includes policies to 'promote the right to have a relationship with both parents', and to, 'strengthen parents' ability to care for their children' (Article 33). Most importantly, we are aware of research that reflects the voices of children and their clearly articulated wish to remain with, or to return to, their 'parents'.<sup>41</sup>

Taking the differing guidance and terminology into consideration, it was decided to use the term 'child-parents separation' in this report in reference to situations where children lose parental care e.g. when being separated from both parents, and placed in alternative care.

While discourse on the prevention of placing children in alternative care has been explored in previous research and reports,<sup>42</sup> our preliminary desk review found very little evidence that this topic had been directly informed by the voices and perspectives of children, young people, parents, and other primary caregivers themselves. Neither has the available research sufficiently provided for these voices to be jointly heard from different countries and contexts across the world. It was considered important therefore, that the scope of this study included efforts to address these gaps by collating information from different stakeholders across diverse socio-economic locations, and most especially, from children and young people. To this end, participatory research methodology has allowed for the participation of children, young people, and adult family members living in different socio-political and cultural environments in a further six low, medium and high income countries. Unfortunately it was not possible to secure the participation of children in Uruguay but young people and adult family members did join our research workshops. Gathering the knowledge of professionals from a

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<sup>38</sup> Kendrick 2012

<sup>39</sup> The UN Guidelines define children without parental care as all children not in the overnight care of at least one of their parents, for whatever reason and under whatever circumstances

<sup>40</sup> United Nations General Assembly 1989

<sup>41</sup> SOS Children's Villages 2020

<sup>42</sup> Casky & Gale. 2015; Family for Every Child 2014

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range of government and non-governmental agencies holding a responsibility to protect and support children and families in these countries has also been an important contribution to the collation of evidence.



### 3. Executive Summary

#### 3.1. Background

This study *Key Drivers Contributing Child-Parents Separation in Uruguay* was conducted by independent international and national researchers and facilitated by SOS Children's Villages Uruguay and SOS Children's Villages International.

Over recent years, researchers have made efforts to gather information about children living in 'vulnerable'<sup>43</sup> situations and at risk of being separated from parental care, as well as on the efficacy of family strengthening.<sup>44</sup> However, there are still perceived gaps in the evidence that would help inform the development of effective universal and specialist programmes and services to address the underlying drivers of child-parents separation. With this in mind, this study set out with an aim of helping address the need for further research 'to understand the effective approaches to antecedents to placement'<sup>45</sup> in alternative care. The study was also built on the understanding that the most detailed information that currently exists on this topic overwhelmingly originates in high income countries thus leaving gaps in knowledge and primary evidence as relevant to different contexts, and socio-ecological systems.<sup>46</sup> It is in reference to this background, that the research was undertaken in Uruguay with the aim of collating evidence in consideration of the following questions:

- What are the key challenges facing families that create conditions in which child-parents separation and placement in alternative care is more likely to occur?
- Who are the children already in alternative care?
- What are some of the gaps in multi-level and multi-sectoral approaches and service delivery that could help prevent child-parents separation?
- What are the ideas of children, young people, family members, and other key stakeholders, about the current support to families and how it could be improved?

We believe the decision to place a child in alternative care is particularly influenced by two factors: the circumstances in which they are living, and the decision making of those with responsibility for child safeguarding judgements. To this end, we focussed on issues that directly impact households as well as the role of decision makers and factors that influence their determination whether or not to place a child in alternative care. Our research was informed by an ecological framework such as that developed by Bronfenbrenner,<sup>47</sup> as well as an understanding of the national child protection system.

Research methodology included a desk review, and participatory workshops with care experienced young people and adult family members. Unfortunately, unlike in other countries in our global study, it was not possible to secure the participation of children in our research in Uruguay. Nevertheless, based on the accumulated research findings to date, in our opinion, the majority of responses provided by young people are most probably relevant to children's experiences.

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<sup>43</sup> Nankervis et al. 2011; OECD 2017

<sup>44</sup> Delap 2013; EveryChild 2009; Laumann 2015; Lodder et al. 2021; Namey & Brown 2018; Ortea et al. 2022; Wilke et al. 2022

<sup>45</sup> Wilke et al. 2022

<sup>46</sup> Gale 2018; Martin & Zulaika 2016; Petrowski et al. 2017

<sup>47</sup> Bronfenbrenner 1977 See also: Bronfenbrenner 1986; Bronfenbrenner 1994

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In addition semi-structured interviews were conducted with, and an online survey completed by, professional stakeholders. In total 24 young people and 36 adult family members took part in research workshops in two locations in Uruguay, one in an urban and one semi-rural setting. A total of 10 professional stakeholders contributed to the research. In addition, 23 professional stakeholders responded to an online survey administered through Qualtrics.

We recognise that responsibilities to address drivers of child-parents separation and prevention of placement of children in alternative care is primarily that of the Government of Uruguay through the provision of national and local socio-economic programmes and services. This is a significant responsibility. Our research has not included an in-depth analysis of all these different aspects of government responsibility but has considered some of the gaps in provision. We also recognise that UN and other international bodies play a significant role in service provision alongside national and international NGO, CBOs and private enterprises, and these differing roles and responsibilities should be a consideration when reading the conclusions below.

Overall our findings highlight two distinct influences related to placement of children in alternative care. The first is the impact of the wider society that families live in and how this impacts the circumstances within a family that can subsequently lead to children being placed in alternative care. The second is the functioning of the national child protection system in which gatekeeping decisions are made. Below are our recommendations. We appreciate this list may appear daunting. However, we also believe that strong partnerships between government and non-governmental agencies can bring about change when responsibility is shared and each organisation works to its own strengths and expertise.

### 3.2. Research findings, conclusions and recommendations

The recommendations in this section of the report have been informed by the information young people, and adult family members provided during research workshops. These findings have been triangulated with the knowledge and understanding provided by professionals holding responsibility to protect children and support families, as well as information gathered during a desk review.

The research framework, analysis of findings, and development of recommendations have been guided by the UNCRC and the 2019 United Nations General Assembly Resolution, 'The promotion and protection of the rights of children' as well as the UN Guidelines for the Alternative Care of Children. Recommendations are therefore addressed in reference to children's rights. Although these rights are indivisible, and all are essential to the well-being of children, we have chosen to develop recommendations based on a certain number of rights thought most applicable to the findings of the research and prevention of child-parents separation.

With regards such guidance, it is the responsibility of States Parties, and other bodies and organisations, to address drivers of separation and do everything possible so that children can remain with their parents in a safe and caring environment. This requires a society that is free from violence. It means combatting stigma, discrimination and marginalisation that individuals and families face on the basis of such issues as ethnicity, gender, disability, sexual orientation, and birth status etc. It requires a strong national economy with programmes of poverty alleviation. The safety and security of all citizens, and systems and delivery of a range of basic and specialist services such as education and health as well as utilities, employment, and adequate shelter are also important. There should be a social protection system that provides for individuals and families when in need of such support including unemployment, sickness and disability benefits, pensions and other social safety nets. Furthermore it requires a strong child protection system, including the systematic application



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of gatekeeping mechanisms and a well-resourced and trained social services work force. It is also incumbent on governments to develop the necessary normative framework for child protection and family support. Overall, this approach is grounded not only in the fundamental spirit of the UNCRC but also in many specific UNCRC 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), rights for children with disabilities (Article 23), and protection from discrimination (Article 2).

We recognise that responsibilities to address drivers of child-parents separation and prevention of placement of children in alternative care is primarily that of the Government of Uruguay through the provision of national and local socio-economic programmes and services. This is a significant responsibility. Our research has not included an in-depth analysis of all these different aspects of government responsibility but has considered some of the gaps in provision. We do recognise the efforts being made by the Government of Uruguay to protect children and ensure their well-being. We also recognise the significant role that UN and other international bodies play in service provision and policy development alongside national and international NGO, CBOs, and these differing roles and responsibilities should be a consideration when reading the conclusions below.

The remainder of this report contains a significant number of recommendations and we appreciate this may appear daunting. However, partnership working between government and non-government agencies can bring about change when responsibility is shared and each organisation works to its own strengths and expertise.

### Protection

Articles of the UNCRC that afford children the right to protection include, safeguarding from violence, abuse and neglect (Article 19 and Article 37(a)), from sexual exploitation and abuse (Article 34) and, from sale, trafficking and abduction (Article 11, Article 35, Article 36, Article 39).

In particular, Article 19 requires:

States Parties shall take all appropriate legislative, administrative, social and educational measures to protect the child from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s) or any other person who has the care of the child.

Recognition is given to Government of Uruguay to programmes aimed at preventing violence against children. A conclusion of our research however, is the continuation of violence against children is a primary cause of children's placement in alternative care. Young people, along with other research participants, identified the presence of violence within families and specifically wrote about experiencing and witnessing violence in the home. Violence in the home is also resulting in children running away from their families or placing them in other positions that could activate a referral to child protection teams within the Institute del Nino y Adolescente del Uruguay( INAU) or coming into contact with the police. This includes becoming street connected, involved in child labour and exposed to drugs and alcohol.

The high prevalence of violence against girls and women is a concern. We believe domestic violence, which is predominantly experienced by women, is one factor contributing to risks of children being placed in alternative care. Children can become direct victims of this violence thus prompting child protection authorities to respond

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and remove them from parental-care. Furthermore, female victims of domestic violence can face particularly difficult situations if without family and community support networks. For example, they can struggle if, as a result of domestic violence, they become the single head of household with all the pressures and challenges this can bring. Research shows for example, how female-headed households face specific challenges in terms of poverty, lack of employment and other socio-economic opportunities.

It should not be overlooked that some men are also struggling within the family home, especially with societal expectations that place responsibility on them to adequately provide for their families. This can also affect their mental health which, as previously mentioned in this study, can result in violence against children and partners. Men also need support that will help them maintain strong and caring family relationships.

The issue of inter-generational violence is further concern. It has been recognised that violence can be a learnt behaviour<sup>48</sup> through 'observation, learning and imitation'<sup>49</sup> of adults, and/or being a victim.<sup>50</sup> Our perception is, with each generation in which families in Uruguay repeatedly experience and witness violence, and lack strong attachment to each other, that ongoing family dysfunction and breakdown will continue. It means within each generation there is the concern of an ever weakening ability to parent in a loving and caring and protective manner in some households. Situations that can then lead to acts of violence, either between adults, and/or towards children.

Disability, either of a child or a parent is also a reason for placement in care. This may be when parents are unable, or no longer willing, to provide care. A small number of children are also living in alternative care because they are orphans or abandoned.

### Recommendations

- There is a need for further investment in violence prevention programmes for adults and for children. Especially programmes that would help break any inter-generational cycle of violent behaviour. This might include violence prevention programmes that reach children at an early age through the school curriculum and which, comprise not just one-off 'civic' lessons, but continuous learning that promotes positive messages and behaviour throughout a child's school life. Violence prevention should also be built into family strengthening programmes that work with all members of the family.
- Article 2 of the UNCRC guarantees children protection from discrimination. Violence prevention programmes should include efforts to combat factors that contribute to the presence of abuse and exploitation including discrimination, stigmatisation, and lack of equality. They should incorporate clear messages that promote tolerance and understanding. Issues of gender equity, stopping discrimination against persons with disabilities, and acceptance of those identifying as LGBTQI+ etc. are examples of topics to be included in such programmes.
- To help inform policies and programmes that promote safe and united families, all professionals who hold responsibility for the well-being of children would benefit from a better understanding of the factors

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<sup>48</sup> Moylan et al. 2010

<sup>49</sup> Conteras & del Carmen Cano 2016:44

<sup>50</sup> Conteras & del Carmen Cano 2016; Bevans & Higgins 2002

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contributing to violence in the home in Uruguay. This includes programmes that raise awareness of the negative impact of adverse childhood experiences (ACEs),<sup>51</sup> and trauma-informed practice (TIP).<sup>52</sup>

- Those living in situations of domestic violence and gender-based violence require access to additional support and services. For example, those seeking safety need access to monetary support and housing, as well as counselling and psychosocial services provided within a caring and safe environment. When not able to access support from family and the wider community, and with no-where else to go, crisis shelter centres, and other support services, for women and their children could offer immediate protection and help prevent situations from deteriorating to the stage where children may be separated and placed in alternative care. The building of stronger understanding within the community and help in creating supportive social networks for women and girls is also important.
- Men should be actively involved in family strengthening and other programmes that help them understand the importance of, and how to maintain, strong and caring family relationships. This should include awareness on issues of gender parity and prevention of domestic violence.
- Article 42 of the UNCRC requires States Parties to make the principles and provisions in the Convention 'widely known, by appropriate and active means, to adults and children alike.' Efforts to increase the awareness of child rights amongst the general public as well as the harm to children when they lack love, affection and are victims of violence - including impact of separation from parental care - can help strengthen the protective environment in the home and community.

### Adequate standard of living and well-being

Article 27 of the UNCRC requires States Parties to recognise the right of every child to a 'standard of living adequate for the child's physical, mental, spiritual, moral and social development.' The Article also calls on States Parties to take appropriate measures to support and assist parents with their responsibility toward children and 'shall in case of need provide material assistance and support programmes, particularly with regard to nutrition, clothing and housing.' Other articles within the UNCRC also include a right to health (Article 24), education (Article 28 & 29) and survival and development (6).

The 2019 United Nations General Assembly resolution<sup>53</sup> on the 'Promotion and Protection of the Rights of the Child' calls on States to 'improve the situation of children living in poverty, in particular extreme poverty, deprived of adequate food and nutrition, water and sanitation facilities, with limited or no access to basic physical and mental health-care services, shelter, education, participation and protection' (Article 1). Furthermore, the resolution clearly says that,

financial and material poverty, or conditions directly and uniquely imputable to such poverty, never should 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

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<sup>51</sup> Please see: <https://www.eif.org.uk/report/adverse-childhood-experiences-what-we-know-what-we-dont-know-and-what-should-happen-next>. See also: SOS Children's Villages International and CELCIS, Centre for Excellence for Children's Care and Protection, University of Strathclyde 2021; SOS Children's Villages International 2022

<sup>52</sup> SOS Children's Villages International 2022 Safe

<sup>53</sup> United Nations General Assembly Resolution 'Promotion and Protection of the Rights of the Child', December 2019 'A/74/395

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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.

Analysis of the research findings show issues related to poverty are a driver contributing to children's placement in alternative care in Uruguay. Concerns raised by young people and adult family members during our research signalled areas of their lives in which they are impacted by issues related to poverty. Interviewees confirmed that poverty is a factor related to placement in alternative care. Such evidence is also found in published reports on child protection in Uruguay.

Poverty is an inter-generational as well as a multi-dimensional issue with measurements of poverty taking into account not only financial means, but other factors that contribute to well-being.<sup>54</sup> Our research findings also suggest a correlation between the ability to cope with daily challenges such as meeting household costs and finding adequately remunerated employment etc., with stress and tension within households. Persons with disabilities face particular challenges. As a result, the situations that many parents face, can exacerbate feelings of distress, anger, poor mental health, and for some, an inability to cope. This may even lead to violence within the family including against children. Furthermore, lack of sufficient community-based support services that families can be referred to as a prevention measure, and an alternative to placing a child in alternative care, was highlighted by many interviewees.

Although we have seen how issues related to poverty contribute to family breakdown and the presence of violence, nevertheless, it is recognised that there are families living in very difficult circumstances who are supportive and caring of one another and create a safe environment for children. This illustrates how strong loving relationships are an important factor in helping families stand up to the impact of poverty and other shocks experienced by households. And this in turn can contribute to a violence free household.

It is clear that not one agency alone can respond to the multi-dimensional aspects of poverty leading families into crisis. Although there are many government policy documents and strategies calling on a multi-sector approach to working with families, gaps in such coordination have been identified.

### Recommendations

- It is beyond the remit of this report to provide detailed recommendations as to government efforts to strengthen the country in terms of financial growth and stability. It would be possible however, for different actors to instigate advocacy that promotes change and share information that would help government policy makers, and others, gain a better understanding of universal efforts needed to prevent children's placement in alternative care. Especially information that takes into account the multi-dimensional aspects of poverty and the impact this has on families. This requires improved multi-sectoral cooperation and coordination between Government and non-governmental bodies and agencies, UN entities, academics, faith-based leaders, the private sector, and donors, including those responsible for education, health, security, social protection and social welfare, justice, and child protection. A child-centred approach should be adopted.
- There should be a concerted effort together, and within each organisation, body, or department, to assess and recognise where each can most effectively contribute: whether it be direct service provision, advocacy

<sup>54</sup> Please see: [https://www.worldbank.org/en/topic/poverty/brief/multidimensional-poverty-measure#:~:text=The%20Multidimensional%20Poverty%20Measure%20\(MPM,the%20%242.15%20international%20poverty%20line;https://ophi.org.uk/video-poverty-in-el-salvador-from-the-perspective-of-the-protagonists/](https://www.worldbank.org/en/topic/poverty/brief/multidimensional-poverty-measure#:~:text=The%20Multidimensional%20Poverty%20Measure%20(MPM,the%20%242.15%20international%20poverty%20line;https://ophi.org.uk/video-poverty-in-el-salvador-from-the-perspective-of-the-protagonists/)

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to effect change, signposting so that families know how and where to receive the support they need, fundraising, or even leading/supporting such coordinated response. Organisations should also look at the breadth of their outreach to ensure they are reaching vulnerable families including those residing in hard to reach and rural areas.

- Families need informed and coordinated access to service provision in a way that will address the inter-related challenges they face. This should be available in a universal manner to address a concern that support often comes too late and so that vulnerability of families might be prevented. To this end additional consideration should be given to providing families with helpful signposting to basic and specialist services as well as ensuring joined-up provision in a way that overcomes barriers of access.
- Supporting families with the responsibility to adequately provide for everyone in the household should include increased access to sustainable income generation schemes and help in obtaining stable, well remunerated employment. Such programmes require highly skilled facilitation and should be undertaken by organisations that have the particular focus and specialism to implement them.
- Increased efforts are needed to ensure full access to health care services including those offering psychosocial and mental health, and counselling programmes. This should also be a consideration in the delivery of family strengthening programmes.
- As in line with national legislation, children should not be placed in alternative care solely for the reason of poverty. Alternative care should only be used when absolutely necessary for children in need of protection that cannot be provided in their own homes.
- It is suggested that a review of expenditure on alternative care is undertaken and the use of evidence applied to developing legislation, policies and strategies that refocuses the funds currently used to run residential institutions toward programmes that allow children to remain safely in their own homes. This should include concrete and timely plans for the elimination of all residential institutions in Uruguay.
- The information we received suggest that there is a mixed understanding amongst professionals as to whether or not, and to which degree, issues related to poverty is linked to child-parents separation and placement in alternative care. We suggest future research might explore the reasons for this differentiation in understanding.

### Support with parenting

The preamble to the UNCRC states that the 'family, as the fundamental group of society and the natural environment for the growth and well-being of all its members and particularly children, should be afforded the necessary protection and assistance so that it can fully assume its responsibilities within the community'. This requires States to provide parents, and other primary caregivers, with the support needed so that children have the best protection and opportunities in life.

Young people wrote about the importance of children and adolescents feeling loved, cared for, trusted and respected by their parents. They want better communication within the family, and to live in an environment where there is unity, support and happiness. When asked why families reach a situation where placement of children in care is a consideration, some interviewees drew attention to lack of parenting skills being a significant factor. In part, we believe this is related to deterioration of child-parents relationships: a situation

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that can ultimately lead to violence against, or serious neglect of, children. The issue of emotional neglect/abuse emerged as a significant concern raised by young people in the research workshops.

Interviewees also identified how lack of positive parenting skills is not only impacted by socio-economic circumstances, but is an inter-generational phenomenon. Findings in our research indicate the negative experience some parents had during their own childhood is impacting their ability to parent. One outcome being an inability to maintain harmonious, unified, supportive relationships in the home and leading to family breakdown. In relation to this situation, there is a recognised need to improve understanding amongst professionals on such topics as trauma-informed practice (TIP),<sup>55</sup> and the negative impact of adverse childhood experiences (ACEs).<sup>56</sup>

Many of the discussions and recommendations throughout this report will contribute to supporting those parents who are struggling with their role to better protect and care for their children. Below however, are additional specific recommendations towards achieving this objective.

### Recommendations

- As in previous recommendations, understanding and actions are needed that will break any inter-generational cycle of poor parenting. This requires consideration of parenting programmes that take a holistic and family-centred approach and incorporate such topics as attachment theory, the negative impact of adverse childhood experiences (ACEs), and trauma-informed practice (TIP). Policy makers and practitioners should have a clear and evidence based understanding of the different factors impacting parents and their ability, family dynamics, what is necessary to maintain harmonious, unified, supportive relationships in the home, and ways to build on existing resilience and coping mechanisms.
- Work with families should pay particular attention to the emotional connections between parents and children and young people and provide support that will help combat the emotional neglect and abuse children and young people experience.
- Breakdown of partnerships and divorce/separation that can result in situations where children are placed in alternative care was not raised by research participants. As previous studies in different parts of the world have highlighted this as a significant causality related to placement in alternative care, we suggest consideration be given to a future study on this topic so as to assess any possible relevance in Uruguay.

### Disability

Children with disabilities have the right to enjoy 'a full and decent life in conditions which ensure dignity, promote self-reliance and facilitate the child's active participation in the community (Article 23 of the UNCRC). Also contained within Article 23 of the UNCRC is provision of special care and assistance to ensure children with disabilities have, 'access to and receives education, training, health care services, rehabilitation services, preparation for employment and recreation opportunities'.

We recognise the work of the Government of Uruguay to develop legislation, policy and programmes to support those with disabilities. However, reports have revealed the isolation, stigma and prejudice experienced by children with disabilities. We have also noted the lack of focus on the risk of violence children with disabilities

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<sup>55</sup> SOS Children's Villages International 2022 Safe

<sup>56</sup> Please see: <https://www.eif.org.uk/report/adverse-childhood-experiences-what-we-know-what-we-dont-know-and-what-should-happen-next>



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face in any of the reports we sourced on violence against children in Uruguay. Children with disabilities are being placed in different forms of residential alternative care across the country. Although conditions within alternative care was not part of our remit, we note attention has been given to poor conditions in many of these specialised residential centres.

We stress that all the issues covered in the report, and especially in our recommendations, apply equally to children with disabilities. However, there are also additional risks that children with disabilities in Uruguay face including lack of sufficient investment in support services specifically tailored to their requirements. Children whose parents are disabled are also vulnerable to placement in alternative care.

### Recommendations

- Children with disabilities should not be placed in residential institutions. Consideration should be given to the specialist support necessary for children with disabilities and/or parents with a disability that would prevent separation.
- Family support programmes should ensure the inclusion of families that have members with disabilities.
- Future evaluations and reports on violence against children in Uruguay should include the specific risks faced by children with disabilities.
- Violence prevention programmes, as previously mentioned, should inherently incorporate the subject of protection of children with disabilities.
- Advocacy and awareness raising programmes should promote an understanding and acceptance of disability, both within families and amongst the general public. Public information campaigns should speak about fair and respectful treatment of people with disabilities, the harm of stigmatisation, and topics that would help prevent violence and exclusion. Advocacy programmes by and with people with disabilities are important and help bring a specific focus to improving services, opportunities, and support.

### Play and leisure

UNCRC Article 31 of the UNCRC directs States to the right of children to rest and leisure and encourages access to cultural, artistic, recreational and leisure activity. This right is highlighted in this report, not just because of the importance to children's development, but also the opportunity recreational pursuits can play in strengthening family life.

Young people wrote about the importance of time for recreation, both with parents, other family members, and friends. Time spent together is seen as being particularly important in the way it contributes to family unity, communication, and a means of providing a respite from the stresses they may be facing. There might be parents who doing their utmost to provide for the family by working hard and long hours whilst not also realising the benefits of spending more time pursuing joint activities with their children and how this can help forge closer bonds.

### Recommendations

- Activities that address important aspects of family unity and spending time together would add value to parenting and family strengthening programmes. This would include raising awareness amongst parents

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and professionals as to the important benefits of time spent as a family and how this can help forge closer bonds.

### Addressing harmful social norms, attitudes and practices

We have already noted the ongoing discrimination against girls and women and the manner in which this can contribute to domestic and gender-based violence as well as denying them opportunities within society. Furthermore, even though governmental efforts are being made to combat stigma and discrimination against those disabilities, this practice persists.

### Recommendations

- Additional efforts are required to combat social norms and beliefs that contribute to gender-based violence.
- Advocacy and awareness raising campaigns are needed to help eradicate all other harmful social beliefs that place children at risk of harm. Such campaigns would greatly benefit from meaningful participation of children and young people.

### The child protection system and capacity of professional decision makers

Article 1 of the 2019 UNGA resolution on the 'Promotion and the protection of children's rights', calls on States Parties 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

International guidance relating to decision making and 'gatekeeping'<sup>57</sup> is outlined in a number of international documents including the UN Guidelines for the Alternative Care<sup>58</sup> and accompanying Handbook<sup>59</sup>. This guidance includes the use of case management tools that allow for rigorous multi-sectoral and participatory assessments upon which careful and well considered decisions can be taken. These decisions should always in the best interest of the child. Furthermore, decisions making by professionals is not only influenced by such factors as their personal understanding and experience, but also the strength of the national child protection system they work in and the statutory and other guidance they receive. It is important therefore, that sufficient training is received and social work and child protection personnel have the knowledge and experience necessary to make the correct safeguarding decisions.

Our research examined different aspects of the national child protection system and gatekeeping. In this respect, we recognise the investment being made by the Government as for example, to amend and develop new legislation and policies that improves the situation for children in Uruguay, including their protection and prevention of separation from parental care. Furthermore, our research findings suggest there is a good understanding of laws and protocols regarding child protection and alternative care amongst many child

<sup>57</sup> For further explanation of the term 'gatekeeping' please see: Csaky & Gale 2015

<sup>58</sup> United Nations General Assembly 2009

<sup>59</sup> Cantwell et al. 2012



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protection practitioners. However, our findings also signal the need for further investment and rigour in the application of the normative framework. For example, although there is clearly defined legislation and guidance in Uruguay that includes a child's right to family life, and use of residential alternative care only as a last resort, over half of all placements are in residential facilities. This situation has been attributed in part, to lack of prevention services that would offer alternatives to separation and the use of alternative care. In addition, the law says poverty should not be a sole reason children are separated from their family. However, information provided during interviewees, and data found during our desk review, identifies poverty as a reason for children's placement in alternative care.

The INAU has developed and published detailed guidance on different procedures and steps in child protection case management including the gathering of evidence when a child protection concern is reported. This involves the use of multi-disciplinary assessments, the formation of recommendations by INAU child protection teams, and writing of reports passed to the judiciary to inform their decisions regarding protection and alternative care. Interviewees provided clear evidence of their knowledge and understanding of statutory requirements in conducting such assessments and the different roles and responsibilities of the INAU teams and the judiciary. However, when asked about the efficacy of decision making that would deliver the optimal solutions, as for example those made in the best interest of the child, many suggested that decisions are not always the right ones. It is believed such decisions are influenced by a number of factors. This includes the systematic adherence by some to a long standing and embedded practice of utilising residential care. Lack of sufficient alternative support services for families is also attributed to less than optimal decisions being taken about children and their families. Furthermore, it is understood that social workers, judges, and other, may not always have sufficient training or knowledge of the different factors that can effect parenting ability, as for example, the impact of ACEs or the phenomenon of inter-generational poor practices and therefore, do not take such situations into account. Additional challenges facing those with responsibility for decision making include insufficient numbers of professionals, especially within the INAU and the Family Court. It is believed this is, resulting in high workloads, and lack of time to complete thorough child and family assessments or make well informed and carefully thought through decisions.

It has not been possible to assess the amount of training different government and other personnel have received on the use of child protection case management tools and other statutory guidance and legislation, or whether there is sufficient understanding of how to evaluate the risks a child might be facing through any assessment findings. The evidence we have collated does suggest that investment building workforce capacity and knowledge is needed.

An assessment of the quality of social work training in higher education institutions is missing from our research. A further study would help address this gap and provide a better evaluation of the knowledge and capacities of all decision makers, including those with social work responsibilities, and members of the police force and judiciary. Any future study should also consider the capacity of other professionals and the need for child protection training in all relevant higher education courses including those for police, teachers, health workers etc. Particularly as a need has been recognised to raise the capacity of those who come into everyday contact with children such as education and health workers in recognising early signs of concern within a family. Evaluation of the quality of ad-hoc and in-service training was also not possible within the remit of this research and again, a future review of standards of capacity building programmes would help inform any necessary provision.

## Recommendations

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- Consideration should be given to strengthening and enforcing legislation, regulations and statutory guidance that mandates for the funding and provision of services and programmes to effectively address all causes related to child-parents separation and prevent placement in alternative care.
- Legislation should be implemented with the aim of eliminating all forms of residential institutions.
- To inform the development of future training and capacity building, it is recommended that an assessment of the quality of training in higher education institutions for all those holding safeguarding responsibilities is undertaken along with a review of provision and standards of in-service capacity building. This should be coupled with a study of current skills, knowledge and capacities of all those responsible for making decisions about protection and care of children including social workers, police, judiciary, health and education workers etc. Such audit should consider their understanding of early prevention of risks of harm to children and means of intervention, risk thresholds in relation to protection risks, and how to apply the principle of the best interest of the child.
- Steps should be taken to address the insufficient numbers of professionals working within the INAU child protection system as well as the need for any other resources that would enable the social services workforce to effectively carry out their roles and responsibilities. This consideration should also be given to the capacity of those working within Family Courts.
- Training of those working in residential institutions may not only help alleviate any opposition of those employed in such settings regarding closure of those facilities, but also contribute to re-skilling. If sufficiently trained, they could be offered new roles in family strengthening programmes and, if family based care settings are developed, they might become providers. In addition, training on how to re-focus the use of funds towards family support programmes, and family based alternative care when necessary, would be aided by the undertaking and application of a cost benefit analysis.

## Participation

Article 12 (1) of the UNCRC requires,

States Parties shall assure to the child who is capable of forming his or her own views the right to express those views freely in all matters affecting the child, the views of the child being given due weight in accordance with the age and maturity of the child.

There are clear guidelines issued by the INAU as to the process of engaging children in child protection case management. However, when research respondents were asked about this process, there was a notable absence of information regarding the role of children in the assessment process or any other decision making procedures, including the decision to place them in alternative care.

## Recommendations

- Children should be supported in a way that allows their full and meaningful participation in all aspects of any decision making process, including in child and family assessments and decisions regarding forms of support.

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- All children should be acknowledged as active citizens and afforded equal opportunity to contribute to their society. In this respect, policy makers and programme designers and implementers may need help understanding that children are experts in their own lives. This will require challenging any negative barriers regarding children's capacities to engage and participate and providing them with opportunities that allow them to build and demonstrate such capability.

## 4. The Research Framework



Our research framework was informed by international child rights conventions and most especially the UNCRC and the 2019 United Nations General Assembly Resolution: 'Promotion and the protection of the rights of children' (A/RES/74/133).<sup>60</sup> Every child in the world has rights. These rights, including those of protection and participation, are universal and indivisible. The role of States Parties in upholding and realising the rights of children has also been taken into account when developing this research including the responsibility to 'develop and implement comprehensive child welfare and protection policies within the framework of their overall social and human development policy'.<sup>61</sup>

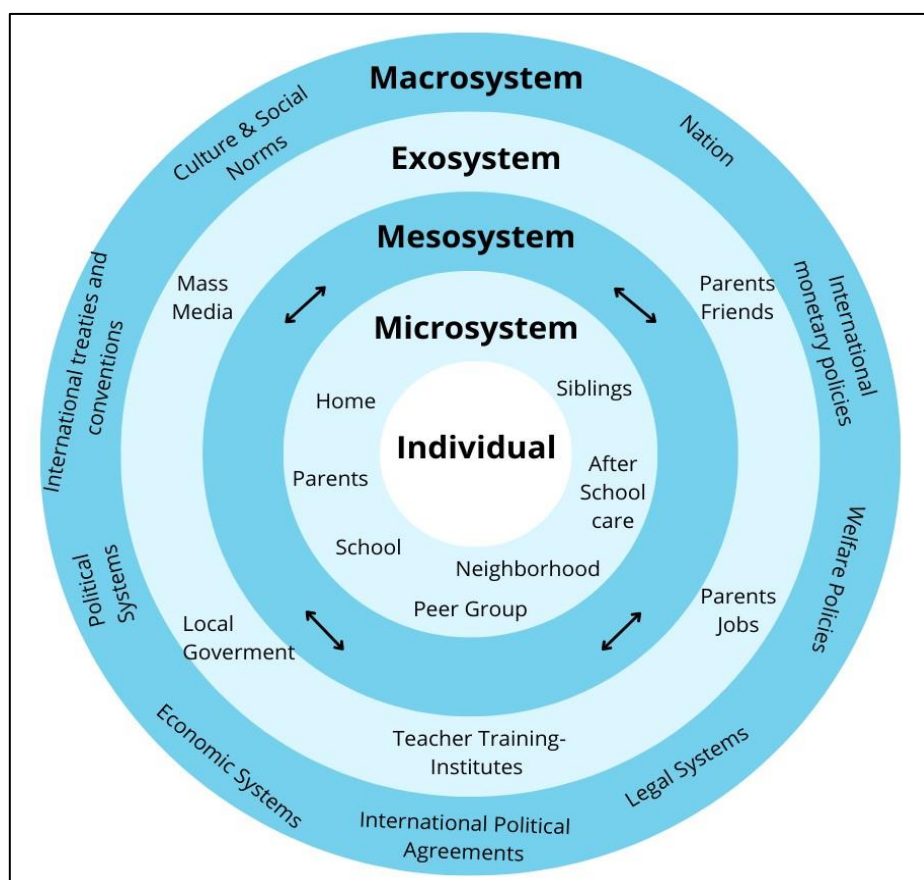
The research framework has also been informed by socio-ecological models such as that of Bronfenbrenner. An adaptation of his model can be seen in Figure 1. This places the child in the centre and considers the impact of inter-relating factors directly affecting them such as their family and peers (micro), the connections and interactions between different microsystems (meso), factors at a structural community level (exo) and national influences (macro). We have added an additional consideration to our research which is the influence of international normative frameworks and other global influences within the macrosystem.

<sup>60</sup> Please see: <https://digitallibrary.un.org/record/3837858?ln=en>

<sup>61</sup> United Nations General Assembly 2009

## Key Drivers contributing to Child-Parents Separation Uruguay

Figure 1. An adapted graphic illustration of Bronfenbrenner's socio-ecological systems theory



(Source: Drew 2023)

Based on this model, research questions used with respondents remained broad in order to extract information about the range of factors positively and negatively influencing and impacting family life.

The research framework also considered the functioning of different components of the national child protection system (Figure 2). Such system should include a suitable normative framework and programmes informed by rigorous data collection and analysis, as well as structures for the delivery of child protection services and those that help mitigate and respond to the multi-sectoral factors placing children at risk and families in difficulty. It requires efforts to ensure public awareness of child rights and child protection as well as a well-resourced and skilled work force and coordinated, inter-sectoral partnership working between the State, families, communities, NGOs, and the private sector. Utilising such examination of the national child protection system, we also adopted a research focus that sought evidence and understanding of how 'gatekeeping'<sup>62</sup> works in Uruguay.

<sup>62</sup> Csaky and Gale 2015

Figure 2. Components of a national child protection system



## 5. The engagement of the Universidad Católica del Uruguay and national researchers

Creating a caring, safe and trusting atmosphere when conducting research with children and young people is essential. To this end, rather than the international Lead Researcher facilitating the workshops with children and young people in Uruguay, the services of a national researcher were sought. This helped with easier communication between researchers and participants thus avoiding disjointed communication (as for instance if we had been working through a translator). It also removed any distrust or suspicion that being asked questions by a 'foreigner' might incur. Furthermore, it meant the person directly interfacing with children and young people had a much more informed understanding of the cultural and other influencing aspects of the environment participants came from. Care was taken to ensure national researchers not only had professional research skills but also the right aptitude and understanding to facilitate the workshops in a caring and careful manner. A national researcher was also present during the workshops with adult family members.

A vital element of the research programme therefore, has been a partnership between SOS Children's Villages Uruguay and the Universidad Católica del Uruguay. In addition, the work of the national researcher, Pilar Abi-

Saab Castagnet, was important in the facilitation of workshops with young people. This partnership also allowed for a research ethics application to be made to the university. Full ethical approval was awarded.

The in-country research was overseen and steered by Dr Paola Maria Navarrete Galvez of the Universidad Técnica de El Salvador, El Salvador. Dr Galvez was instrumental in facilitating initial research co-design workshops with children and young people in El Salvador that contributed to the methodology employed in Uruguay. Furthermore she led all the primary research undertaken in Uruguay.

## 6. Research methodology

### 6.1. Research participants

Invitations were issued to research participants involved in different government and NGO family strengthening and child protection programmes. Research participants in Uruguay included:

- 24 young people aged 17 to 21 years old who had left alternative care (care leavers). (16 girls and 8 boys)
- 36 adult members of families living in vulnerable situations (34 female and 2 male)
- 10 professional stakeholders including social workers, child protection workers, lawyers and providers of alternative care and family support services.
- 23 key stakeholders who responded to an online survey requesting information on reasons children are placed in alternative care and access to support services.

### 6.2. The research process

The research was finalized in Uruguay in February 2024. Great importance was placed on developing and using participatory research methodology to highlight the voices of children, young people, and adult family members. Methods were also used that sought the views and understanding of professionals. All findings have been correlated with information drawn from relevant literature. The following methods were used to gather qualitative and quantitative data:

#### ■ Desk review

A series of desk reviews were conducted by means of a systematic exploration of academic and other web-based databases and search engines<sup>63</sup> as well as hand sourcing additional reports and written materials. This included a review of the socio-economic and cultural environment, the functioning of the national child protection system, and provision of alternative care in Uruguay. Further desk reviews sought information on topics that included participatory research methodology, prevention of family separation, gatekeeping, and family strengthening.

#### ■ Co-design research workshops with children and young people in El Salvador and Lebanon

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<sup>63</sup> Including Science Direct, Wiley online, Taylor & Francis online, Springerlink, JSTOR and Sage Journals, UNICEF, the Better Care Network and other agency websites, Google, and Google Scholar search engines.



## Key Drivers contributing to Child-Parents Separation

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In recognition of the importance of children's right to participate in decisions affecting their lives, and understanding that they are 'competent social actors'<sup>64</sup> who should be 'actively involved in shaping their own social worlds',<sup>65</sup> steps were taken to achieve as high a degree of participation as possible during the research.<sup>66</sup> To this end, in order to highlight their voices, and seek their knowledge and ideas, children and young people, were not only invited to join qualitative participatory research workshops, but efforts were made to engage them in the design of the research questions and qualitative participatory methodology. This included a series of co-design of workshops with a group of children and care-experienced young people in both EL Salvador and Lebanon. The resultant research questions for children and young people were:

Question 1: What makes children/young people in this family happy when they are at home? (based on a drawing of a house and a family that had been drawn by participants)

Question 2: What makes children/young in this family worried or unhappy when they are at home?

Question 3: What makes the adults in the family feel happy, strong and united when they are at home?

Question 4: What makes the adults in the family feel worried or unhappy when they are at home?

Question 5: What is needed to help families be happy, strong and united?

The questions and methods developed in the co-design workshops were then piloted in El Salvador and Lebanon. The results informed the development of qualitative research participatory workshops implemented in Uruguay.

It is important to note that the research questions did not ask research participants to answer questions about their personal experience but to provide information that is representative of what happens to children, young people and other adult family members within their communities and country. These questions also informed those used in workshops with adult family members.

#### ■ Participatory research workshops with young people in Uruguay

Unfortunately permission was not granted by the Government of Uruguay to include children in our research. In total, three groups of young people aged 18-21 participated in the research workshops: two held in an urban setting with 17 young people and one group in the rural setting with 7 young people. The workshops included different activities, including icebreakers and energizers, a reminder of the research's aims and objectives, reading of Information Sheets, signing of consent forms, and joint creation of workshop 'ground rules'.

Participants were invited to take part in a number of exercises that involved the drawing of imaginary houses and families and the writing down of answers to the five research questions (on pink and green post-its) (Figure 3). They placed their answers to the questions on their drawings and were invited to present them to the whole group. In the workshops with young people, they placed all their answers on their drawings and were also invited to present what they had written. If appropriate, short discussions about what had been written were facilitated.

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<sup>64</sup> Gilchrist et al. 2013:577. See also Davidson 2017

<sup>65</sup> Gilchrist et al. 2013:577

<sup>66</sup> Arnstein 1959; Beebejaun et al. 2013; Blanco et al.2022; Bradbury-Jones and Taylor 2015; Bromark et al. 2023; Chevalier and Buckles 2019; Cossar et al. 2014; Cuevas-Parra and Tisdall 2019; Fouché and Light 2011; Garcia-Quiroga and Salvo Agoglia 2020; Grant 2017; Helm 2013; Holland et al. 2008; Jamieson et al. 2021; Lake and Wendland 2018; Lundy et al. 2011; Sabo 2000; Shamji 2007; Stuart et al. 2021



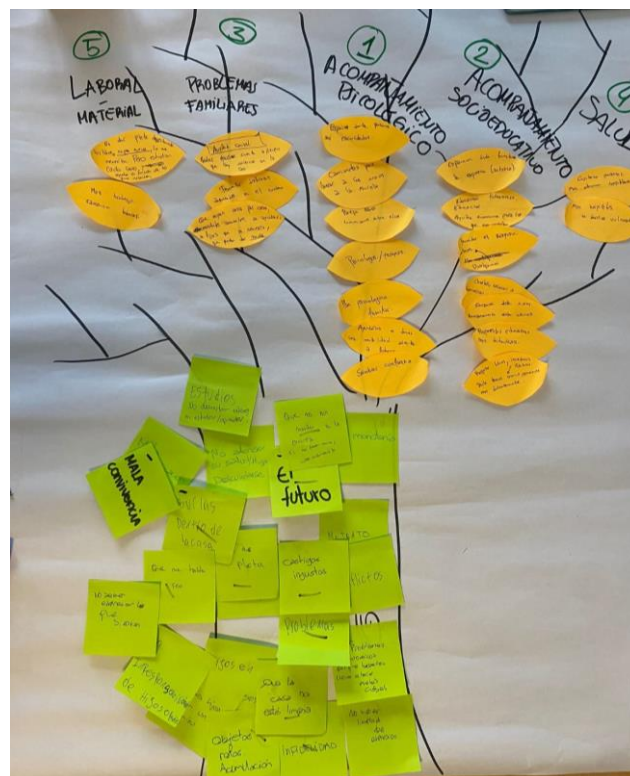
## Uruguay

Figure 3. Examples of drawings produced by children and young people



A problem and solution tree exercise was used with young people to elicit their ideas about ways to address challenges families are facing in the home (Figure 4). They wrote their solution on the 'leaves'.

Figure 4. Example of a problem and solution tree



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Participants presented their 'trees' to the full group and were offered the opportunity to briefly discuss their solutions.

At the end of each workshop, participants were invited to ask questions or asked if they wanted to discuss topics that had arisen during their time together. Workshops always finished with thanks and an energiser.

#### Family workshops

It was also important to elevate the voices and ideas of adult family members. To this end, adult family members living in vulnerable circumstances were also invited to participate in research workshops. The research questions used with adult family members were:

Question 1: What makes families feel happy, strong and united when they are at home?

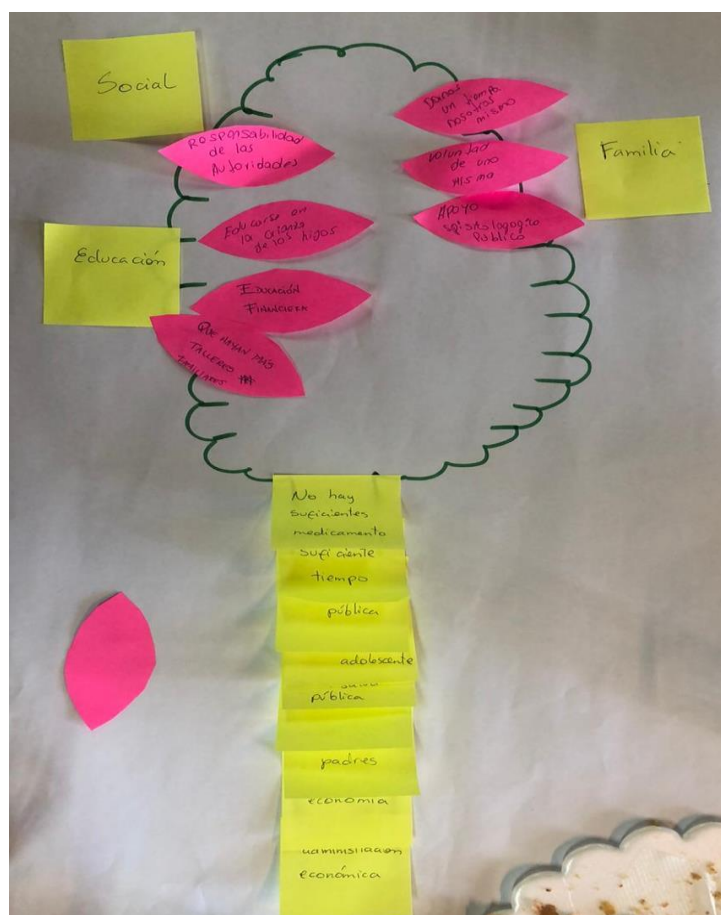
Question 2: What makes families feel worried or unhappy when they are at home?

Question 3: What is needed to help families remain happy, strong and united?

A total of 4 workshops were held with adult family members. Two workshops were held in the urban setting of 22 attendees and two in the rural setting of 14 adults.

Similar participatory research exercises were used to those developed by and for young people, including drawings of homes containing a family and problem and solution trees (Figure 5).

Figure 5. A problem and solution tree produced by adult research participants



At the end of the workshops, participants were invited to ask questions or to discuss topics that had arisen during their time together.

#### ■ Semi-structured interviews

A total of 10 semi-structured interviews were conducted with professional stakeholders (interviewees). The principle research questions focussed on the reasons children are separated from parents and placed in alternative care as well as efficacy of decision making by professional stakeholders. Interviewees were selected through a purposive sampling methodology and included social workers and other professionals working in child protection and family support services and programmes. Purposive sampling methodology was chosen as it allows for intentional selection of knowledgeable participants that will generate theory and understanding of a specific social process and context.<sup>67</sup> Criteria for the selection of interviewees was prepared by the Lead International Researcher. Based on this criteria, members of SOS Children's Villages Uruguay team sent information about the research and invitations to prospective interviewees based on their knowledge of different key professional stakeholders in the country working for government and non-governmental agencies.

#### ■ Online survey

An online survey for professionals working in the support, care and protection of children and families was designed and disseminated utilising the Qualtrics<sup>68</sup> data software programme. The wording of the survey was designed in a way it would be applicable to respondents in all the eight countries involved in our research. The survey was emailed to organisations and individual respondents selected by SOS Children's Villages Uruguay based on selection criteria prepared by the International Lead Researcher. The questions sought information regarding the reasons children are being separated from their parents and placed in alternative care as well as different types of services and support available to families. After cleaning of the data, a total of 23 responses were included in the final analysis.

### 6.3. Research ethics

#### Informed participation and consent

It was important that participation in the research was fully informed and voluntary. All prospective participants were provided with language, age, and respondent appropriate information sheets when first invited to be part of the research. Age and language appropriate consent forms were also prepared. A strong emphasis was placed on participants understanding that they were free to withdraw their participation at any time.

For the online survey, participants were provided with an information sheet in advance of their participation. The consent process was built into the survey and respondents could not move on to complete the questionnaire without first giving their consent.

#### Confidentiality and data protection

Research participants were assured confidentiality and anonymity, unless information they provided suggested there may harm, or risk of harm to a child. All data used in reporting has been anonymised and care taken not to reveal the identity of participants. Workshop participants were asked not to share personal stories or to name anyone during workshop discussions, or to share participant's information outside of the workshops. National

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<sup>67</sup> Arber 2006; Flick 2006; Flick 2009; Ritchie et al. 2006; Robson 2002

<sup>68</sup> Please see: <https://www.qualtrics.com/uk/>

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researchers and the translator accompanying the International Lead Researcher signed third party confidentiality agreements.

Recordings of interviews were made using an encrypted recording device and uploaded to secure password protected folders. These are held only by the International Lead Researcher. All other data has also been stored in an electronic format and held securely in password protected computer files.

### Facilitation of participation and remuneration

Care was taken to balance the available time researchers had to complete the field work with efforts not to disrupt the lives of participants. This included consideration of the times and length of workshops. All out of pocket expenses for participants such as transportation were covered.

### Ethics and child safeguarding

All elements of the research process have been designed and conducted in a manner guided by professional standards and ethical principles.<sup>69</sup> Ethical clearance to conduct the research was sought and granted by the Universidad Católica del Uruguay.

All efforts were made to ensure participation in the research did not lead to harm, stigma, re- victimisation or discrimination. Careful consideration was given to the sensitive nature of the topic under consideration i.e., events that may cause distress in the lives of participants. In this regard, the study was designed in a way that did not ask workshop participants about personal experience. Through careful observation, researchers did their best to pick up on cues indicating any distress during workshops. All efforts were made to ensure workshops were safe and welcoming. No other adults were present in any of the workshops except the national, the International researcher and occasionally the translator.

The issue of child safeguarding was taken with the utmost seriousness and informed the design of an ethical research process to ensure the rights and dignity of participants were upheld at all times. A social worker or other responsible adult, such as educator, was present at the same location as the research workshops with children and young people. They were available if a child or young person wanted to speak with them. Our ethics protocol called on any researcher who had a concern about the safety or wellbeing of a child during a workshop or, something was revealed that suggested a child might be at risk of harm, to make sure the 'responsible adult' was informed. In the event of such disclosure, SOS child safeguarding procedures were to be followed. Children were informed of this process at the start of the workshops.

### Research analysis

All interviews have been transcribed and collated into a word document of which, in-depth reading was completed by the International Lead Researcher. All the information provided on post-its notes by children, young people and adult family members during the research workshops have been transposed into digital word documents. These documents have been imported into the NVIVO 11 data analysis programme<sup>70</sup> and through a text query process, used to extract and collate 'instances' of similarities (and variances) and inform emerging and core themes. Linkages were identified in highlighted text and illustrated in word clouds and tree maps.

The software programme, Qualtrics, allowed for the analysis of responses to the online survey.

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<sup>69</sup> See for example, Social Research Association (2020)

<sup>70</sup> Please see: <https://lumivero.com/products/nvivo/>



#### 6.4. Limitations of the research

Limitations of the research include the time available to researchers to conduct field work in part due to available budgets. With particular reference to the process of co-designing research questions and methods with children and young people, it is recognised that additional time would have allowed for an even greater degree of participation in the very initial research conceptualization and methodology design.

Unfortunately, it was not possible to obtain permission from the Instituto del Niño y Adolescente del Uruguay (Institute for Children and Adolescents of Uruguay)(INAU) to conduct research workshops with children. We recognise that this has resulted in a significant gap in the data gathered and the presentation of children's views and ideas in the research findings. It is unfortunate therefore, that unlike the research conducted in other countries, children's participation was not possible in Uruguay. We also note the smaller than anticipated numbers of young people attending the workshops and any impact this had on findings.

A focus was placed on creative activities and writing exercises to gather information rather than discussion/focus groups. Engagement in discussions was only a very small element of the research therefore. It is recognised this may have limited the opportunity to seek clarification and/or conduct a deeper exploration of the issues raised. Furthermore, research workshops utilised group work methodology that obscured individual voices. As a result the data does not allow for the capturing of individual participant's responses. As almost all research workshops, groups of young people comprised both girls and boys working closely together, an in-depth analysis of similarities and differences in their answers in terms of sex has not been possible.

The research was not intended to comment on the situation of children whilst in alternative care. Neither was it expected to provide an evaluation of the services provided of any one agency, including SOS Children's Villages, in each country under research. We recognise that many children are living in informal care with members of their extended family or others in the community. However, the research did not study the situation of these children.

Other children and young people not included in the research include unaccompanied and separated children affected by migration. We do recognise their plight however and draw attention to some of the existing documentation on the reasons children affected by migration become separated from parental care.<sup>71</sup> Nor has the situation of children deprived of liberty through placement in detention been included in the research. Furthermore, we are aware of many studies that have focused on the impact of the COVID-19 epidemic. This topic was raised occasionally by interviewees but was not a specific focus of our search. Climate change was not spoken of during the research although we are acutely aware that this will increasingly impact children and their families. As the focus of our study has been prevention of separation, although recognised as important, issues related to reintegration and adoption have not been included.

Our research was limited to two locations in each country which may not have fully reflected the situation throughout. This includes information analysed in relation to national ethnicities or other specific socio-cultural influences is absent in the research findings.

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<sup>71</sup> International Organization for Migration 2015; International Social Services 2017; Marcus et al. 2020

Finally, and importantly, the notable lack of published quantitative and qualitative data on children in alternative care in Uruguay means it has not been possible to quantify placements according to the different reasons that led to such action.

## 7. Context: Uruguay

Uruguay is a country located on the southwestern coast of South America, bordered by Brazil to the north and east, the Atlantic Ocean to the southeast, and Argentina to the west (**Error! Reference source not found.**)<sup>72</sup>. It is the second smallest country in in South America.

Figure 6. Map of Uruguay



(Source: <https://www.worldatlas.com/maps/uruguay><sup>73</sup>)

The country has a total area of 176,215 sq.km.<sup>74</sup> The terrain is mostly rolling plains and low hills, with fertile coastal lowlands. An estimated 85.6% of Uruguay is designated as urban and 14.4% rural.<sup>75</sup> The majority of the country's population reside in the southern half of the country. Approximately half of the country's population live in and around the capital of Montevideo.<sup>76</sup>

<sup>72</sup> Please see: <https://www.britannica.com/place/Uruguay#ref32678>

<sup>73</sup> Please see: <https://www.worldatlas.com/maps/uruguay>

<sup>74</sup> Please see: <https://www.cia.gov/the-world-factbook/countries/uruguay/>

<sup>75</sup> Please see: <https://www.britannica.com/place/Uruguay#ref32678>

<sup>76</sup> Please see: <https://www.cia.gov/the-world-factbook/countries/uruguay/>

## Key Drivers contributing to Child-Parents Separation

### Uruguay

#### Population

In 2024, Uruguay's population was estimated at 3,425,330.<sup>77</sup> Of this, 51.5% were female and 49.5% male. Children aged 0-14 years comprised 18.9% of the population. Those aged 15 to 64 years made up 65.4% of the population and people over the age of 65 years, 15.7%<sup>78</sup> Spanish is the official language.

The 2023 census confirmed low population growth in Uruguay with growth at only 1% since the previous census.<sup>79</sup> A decline in birth rates has been cited as a contributing factor.<sup>80</sup> In 2024 life expectancy was estimated at 78.9 years (82.1 years for females and 75.8 years for males).<sup>81</sup>

According to recent census data, 61,810 migrants have arrived in the country since 2012, with the majority coming from Venezuela, Argentina and Cuba.<sup>82</sup>

#### Gender parity

UNDP regularly reports on gender parity across the world. In 2023, Uruguay was marked as a 'low-middle' ranking country in terms of achieving gender parity taking in to consideration such measurements as fraction of life expectancy at birth spent in good health; population with completed secondary education or higher; youth not in education; employment or training; labour force participation; holding an account in a financial institution (e.g. a bank); share of women holding managerial positions and seats held (e.g. parliamentary seats).<sup>83</sup> Data reflecting the situation of participants in a 2020 survey identified the particular inequality of women with disabilities in Uruguay with findings identifying females with disabilities being overrepresented (43.3%) in the low economic strata of society.

UN Women has recognised the efforts of the Government of Uruguay in developing legislation that promotes the rights and status of women. As a result, it was estimated that 91.7% of legal frameworks 'promote, enforce and monitor gender equality' in relation to Sustainable Development Goals (SDGs)<sup>84</sup> indicators and a specific focus on violence against women.<sup>85</sup> However, the agency also notes how only 45.9% of indicators to monitor the attainment of the SDGs do not reflect a gender perspective with gaps in key areas including measurements of poverty, physical and sexual harassment, and women's access to assets.<sup>86</sup>

#### Governance

The Government of Uruguay operates under the Constitution amended in 1996 following the end of 12 years of military rule (1973 – 1985).<sup>87</sup> The President and a Council of Ministers hold executive power. The vice-President serves as president of the bicameral legislature. The President and vice-President are elected for five-year terms. The General Assembly consists of the 31-member Senate and the 99-member Chamber of Representatives. Members are elected to five-year terms through a universal voting process.<sup>88</sup>

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<sup>77</sup> Please see: <https://www.cia.gov/the-world-factbook/countries/uruguay/>

<sup>78</sup> Please see: <https://www.cia.gov/the-world-factbook/countries/uruguay/>

<sup>79</sup> UNICEF Uruguay 2023

<sup>80</sup> *ibid.*

<sup>81</sup> Please see: <https://www.cia.gov/the-world-factbook/countries/uruguay/>

<sup>82</sup> UNICEF Uruguay 2023

<sup>83</sup> United Nations Development Programme (UNDP) 2023

<sup>84</sup> Please see: <https://sdgs.un.org/goals>

<sup>85</sup> Please see: <https://data.unwomen.org/country/uruguay>

<sup>86</sup> *ibid.*

<sup>87</sup> Please see: <https://www.britannica.com/place/Uruguay/Transportation-and-telecommunications>

<sup>88</sup> *ibid.*

## Key Drivers contributing to Child-Parents Separation

### Uruguay

Local administration is served through the country's 19 departamentos, each of which has a departmental board (legislature) and an intendente municipal. A Chief Executive acts as both the Departmental Governor and Mayor for the departmental capital.<sup>89</sup>

### Religion

In 2023 it was estimated that 42% of the population identified as Roman Catholic. Other denominations included Protestant 15% , "other" 6%, agnostic 3%, atheist 10%, and unspecified 24%.<sup>90</sup>

### The economy and employment

The World Bank classifies Uruguay as a high income country.<sup>91</sup> GDP per capita was \$22,564.5 per person during 2023.<sup>92</sup> In September 2023, the overall unemployment rate was 8.3% although it was higher for women, young people and those of Afro-descent.<sup>93</sup>

World Bank data suggests only 6% of the population is considered poor and living under the international poverty line of \$6.85 per person per day.<sup>94</sup> However, the rate is twice as high among children, young people and those of Afro-descent.<sup>95</sup> UNICEF Uruguay note how, despite national efforts to reduce poverty, 1 in 5 children and young people are still affected.<sup>96</sup> In the first half of 2023, child poverty was estimated at 19.4% and impacting 160,000 children. UNICEF has also highlighted some of the challenges facing those living in households below the poverty line and with dependent children. In 2023, this included higher unemployment rates and difficulties reconciling child care responsibilities with work.<sup>97</sup> In addition, 20% of households with children aged 0-5 years were facing food insecurity.<sup>98</sup> According to the UN Food and Agriculture Organization (FAO), between 2021 and 2023, 15% of the population suffered moderate or severe food insecurity and was slightly more prevalent in females (18.7%) than in males (12.7%).<sup>99</sup>

According to SOS Children's Villages Uruguay, around 40% of children under the age of 14 are in households living in poverty with larger families being particularly affected.<sup>100</sup> This situation also impacts single-parent households, particularly when the head of the family is a woman. In part this is attributed to fewer employment opportunities for women.

A recent UNICEF Innocenti report identified Uruguay as having a long tradition of providing social protection and its current system as being among the most comprehensive in Latin America.<sup>101</sup> Effective social protection coverage is thought to be 'remarkably high' at 93.8% and includes cash transfers for families in difficulty, old age pension and support for people with disabilities. However, the report goes on to say that, despite government programmes and achievements, poverty and inequalities persist.<sup>102</sup>

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<sup>89</sup> *ibid*

<sup>90</sup> Please see: <https://www.cia.gov/the-world-factbook/countries/uruguay/>

<sup>91</sup> Please see: <https://blogs.worldbank.org/en/opendata/world-bank-country-classifications-by-income-level-for-2024-2025>

<sup>92</sup> Please see: <https://data.worldbank.org/country/uruguay>

<sup>93</sup> UNICEF Uruguay 2023

<sup>94</sup> Please see: <https://www.worldbank.org/en/country/uruguay/overview>

<sup>95</sup> *ibid*.

<sup>96</sup> UNICEF Uruguay 2023

<sup>97</sup> *ibid*.

<sup>98</sup> UNICEF Uruguay 2023

<sup>99</sup> Please see: <https://www.fao.org/giews/countrybrief/country.jsp?code=URY>

<sup>100</sup> Please see: <https://www.sos-childrensvillages.org/where-we-help/americas/uruguay/montevideo>

<sup>101</sup> UNICEF Innocenti 2024:1

<sup>102</sup> *ibid*.



## Key Drivers contributing to Child-Parents Separation Uruguay

### Health

Public health care is overseen by the Ministry of Public Health. In 2007 Uruguay began a reform of the health care sector that involved the development of a National Integrated Health System (SNIS). The main objective being universal access to health services.<sup>103</sup> Funding for health care provision is raised through the National Health Fund (FONASA) which is a combination of contributions from employers and employees and central government funding.<sup>104</sup> Those who contribute to the FONASA can choose to receive health care from 41 private providers or government provision through the State Health Services Administration (ASSE). In 2021, approximately 2,545,680 people were able to access health care funded in this way. An additional 1,000,000 people who did not contribute to FONASA were covered by the State Health Services Administration (ASSE) financed through government general revenues.

In 2017 there were 4.94 physicians per 1,000 of the population and hospital bed density was 2.4 beds per 1,000 of the population.<sup>105</sup> A reported 1.8% of all children under the age of 5 years were underweight in 2018.<sup>106</sup> In 2020, maternal mortality rate was 19 deaths per 100,000 live births and the estimated infant mortality rate in 2024 was 8 deaths per 1,000 live births.<sup>107</sup>

The 10 top causes of death for females and males in Uruguay as published by the World Health Organisation (WHO) can be seen in Table 1.<sup>108</sup>

Table 1. Deaths per 100 000 population. Uruguay, 2019

Top 10 causes of deaths per 100 000 of the population in 2019	
Ischaemic heart disease	123
Stroke	82
Alzheimer disease and other dementias	55
Chronic obstructive pulmonary disease	49
Trachea, bronchus, lung, cancer	42
Lower respiratory infections	40
Colon and rectum cancers	36
Kidney diseases	30
Breast cancer	25
Diabetes mellitus	22

(Source: <https://data.who.int/countries/858>)

### Persons with Disabilities

In 2008, Uruguay adopted the UN Convention on the Rights of Persons with Disabilities. The national Law 18.651 (2010) established a comprehensive protection system for people with disabilities including provision of

<sup>103</sup> Pan-American Health Organization and the World Health Organization (undated)

<sup>104</sup> Pan-American Health Organization and the World Health Organization (undated)

<sup>105</sup> Please see: <https://www.cia.gov/the-world-factbook/countries/uruguay/#people-and-society>

<sup>106</sup> *ibid.*

<sup>107</sup> *ibid.*

<sup>108</sup> Please see: <https://www.who.int/data/gho/data/themes/mortality-and-global-health-estimates/ghe-leading-causes-of-death>

## Key Drivers contributing to Child-Parents Separation

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medical care and education, ensuring physical, mental, social and economic well-being, provision of social security benefits and access to information UNICEF Uruguay has recognised the investment made by successive Governments in different programmes and initiatives to support people with disabilities.<sup>109</sup>

Specific programmes of support are issued through the Ministry of Social Development including that of temporary housing, legal assistance, and access to transportation, education, vocational training, and employment services.<sup>110</sup> A recent report however, noted the Ministry's lack of capacity to reach all persons with disabilities. Inadequate enforcement of the law and for some, lack of access to education, employment and health services and information as well as challenges in physically accessing public buildings and transportation was also highlighted.<sup>111</sup>

Of concern is the segregation of those children with disabilities placed in special residential settings including specialised schools.<sup>112</sup> The Special Rapporteur and the National Torture Preventive Mechanism has reported on the situation of children with mental health disabilities residing in institutions where evidence of abuse, overcrowding and a lack of capable staff was found.<sup>113</sup>

### Education

Education is compulsory for children between the age of 4 and 14 years and free at all levels; primary, secondary, technical school, and university. In 2019, the literacy rate (defined as persons over the age of 15 years who can read and write) was 99% (female 99% and male 98.5%).<sup>114</sup> Data also signifies the increased engagement of children and young people in all stages of education. For example, between 2019 and 2022, the percentage of young people aged 15–17 years who left the education system fell from 10.7% to 7.7%.<sup>115</sup> During the same period children completing secondary education to 9<sup>th</sup> grade increased from 77.1% to 82.8% and 12<sup>th</sup> grade from 43.4% to 52.6%.<sup>116</sup> UNICEF noted how this increase particularly included students from lower income families.<sup>117</sup> Despite such increase in attendance, the UNICEF 2023 report found less than half of all students aged 15 years had attained the minimum proficiency in mathematics and only 6 in 10 reaching this level in reading and science.

Legislation in Uruguay law provides children with disabilities with the right to attend all levels of education: primary, secondary, and higher. One report has however, identified the use of "special schools" for children with disabilities, which it is claimed, is resulting 'in a de facto segregation for these children.'<sup>118</sup> The report highlights the lower rate of school attendance amongst children with disabilities in comparison to children without disabilities. Furthermore, school completion rates are significantly lower for children with disabilities and only a small number enrol in secondary education.<sup>119</sup>

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<sup>109</sup> UNICEF Uruguay 2023

<sup>110</sup> Please see: <https://www.state.gov/reports/2023-country-reports-on-human-rights-practices/uruguay>

<sup>111</sup> Please see: <https://www.state.gov/reports/2023-country-reports-on-human-rights-practices/uruguay>

<sup>112</sup> Please see: <https://www.state.gov/reports/2023-country-reports-on-human-rights-practices/uruguay>

<sup>113</sup> *ibid.*

<sup>114</sup> Please see: <https://www.cia.gov/the-world-factbook/countries/uruguay/#people-and-society>

<sup>115</sup> UNICEF Uruguay 2023

<sup>116</sup> *ibid.*

<sup>117</sup> *ibid.*

<sup>118</sup> Please see: <https://www.state.gov/reports/2023-country-reports-on-human-rights-practices/uruguay>

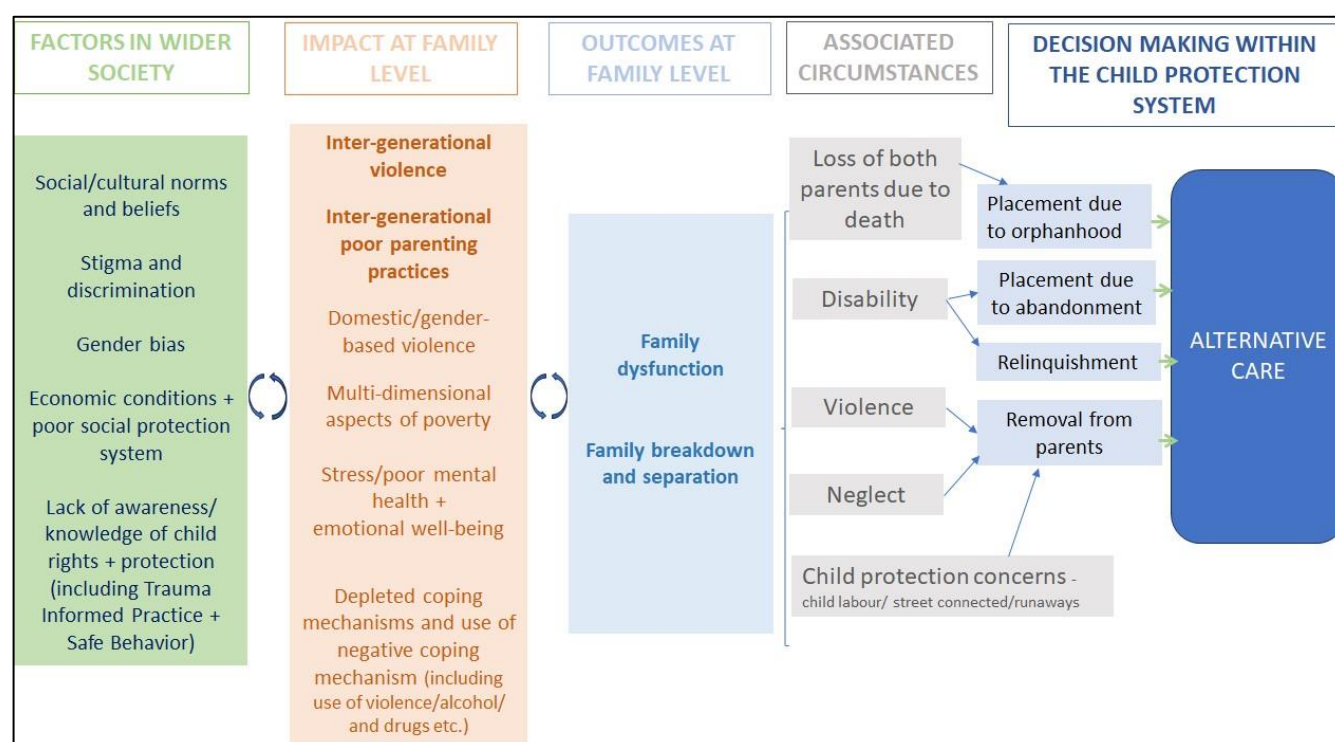
<sup>119</sup> *ibid.*

## 8. Research Findings

Our research had the primary aim of determining reasons children are placed in alternative care, and most specifically formal alternative care in Uruguay. Following an analysis of the research data, a strong correlation has been identified between all the information provided by the different participants including children, young people, adult family members, and professional key informants. This section of the report provides a summary of the research findings and an understanding of some of the drivers that may lead to child-parents' separation.

Overall our findings highlight two distinct influences related to placement of children in alternative care. The first is the impact of the wider society that families live in and how this influences outcomes and circumstances within a family that can subsequently lead to such placement (Figure 7). The second is the functioning of the national child protection system in which gatekeeping decisions are made.

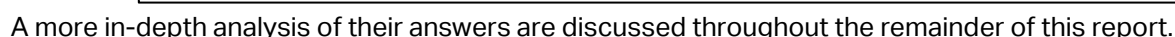
Figure 7. Drivers associated with placement of children in alternative care



Young people who participated in the research workshops were asked about the range of circumstances that may bring about challenges within the family. To this end they were asked what makes them and what makes adults in the family worried and unhappy. Their answers can be seen in the word clouds illustrated in Figures 8 and 9.

Figure 8. What makes young people worried and unhappy when they are at home (as said by young people)

## Uruguay



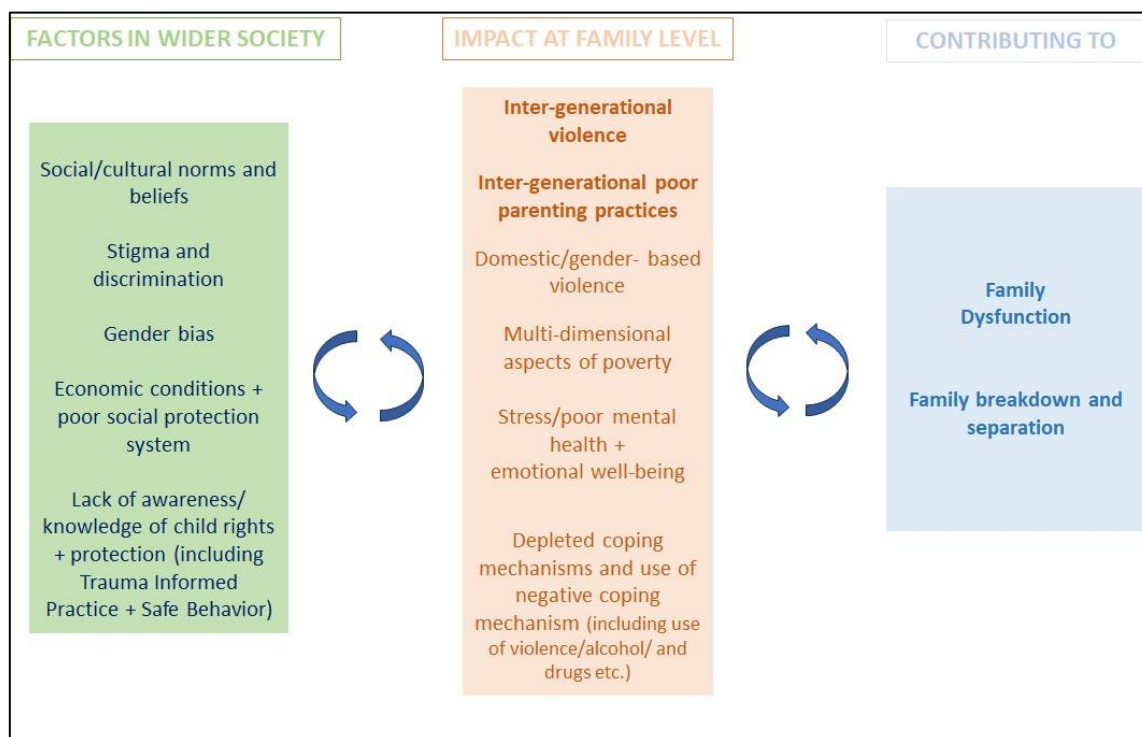
## Key Drivers contributing to Child-Parents Separation

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#### 8.1. Circumstances at a family level that result in children being placed in alternative care

This section of the report provides a summary of the research findings in relation to circumstances within the family home that are leading to the placement of children in alternative care. It will be followed by a section in the report exploring some of the factors within wider society, including socio-economic conditions that are directly and indirectly impacting the lives of families and contributing to family dysfunction, breakdown, and separation (Figure 10).

Figure 10. Factors at a societal and family level contributing to placement of children in alternative care



##### 8.1.1. Violence

A summary of findings including analysis of information provided by children, young people, adult family members, and interviewees, complimented by findings of a desk review, indicates violence against children as being a primary factor leading to placement of children in alternative care in Uruguay .

Violence manifests itself in all forms of physical, sexual and emotional violence inflicted on children and young people as well as between adults in the family. As seen in Figures 11 when young people answered the question, 'what makes young people unhappy or worried at home?', some wrote about topics related to violence. They used such words as *'fighting'*, *'arguing'*, and *'hitting'*. It is noted that young people used many more words that related to emotional neglect/ abuse than to other forms of violence. This issue is discussed later in the report along with issues related to poverty and other experiences in the family home.

Figure 11. Results of workshops with young people: What makes young people feel unhappy or worried when at home?



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Figure 12. What makes young people worried or unhappy when they are at home (as answered by children and young people)

*violence*  
*abuse*  
*not feeling safe*  
*being hurt*  
*arguing*  
*that parents demand things and that they cannot reach that goal and ttheir parents start yelling at them for it.*  
*unfair punishment*  
*bad coexistence*  
*that they speak ugly to me*  
*living on the street, street situation*  
*arguments and shouting*  
*violations*  
*fighting*  
*hitting the children*

Figure 13 provides an example of answers provided by young people when asked what makes adults worried or unhappy at home in relation to violence. Of 75 responses, only 11 related to different forms of physical, sexual violence and related concerns e.g. drug addiction. Further responses included reference to emotional neglect and abuse as well as issues related to poverty.

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Figure 13. What makes adults in the family feel worried or unhappy when they are at home (as answered by young people)

**What makes adults in the family feel worried or unhappy when they are at home? (as answered by young people)**

abuse  
conflicts  
being treated badly  
fight and argue and watch their children cry  
when the mother is feeling good she passes it on to the family  
mistreatment  
bad behaviours  
fighting with their partner  
fighting about things, always arguing  
being on drugs all the time and you want to get out of that situation  
addictions

In relation to physical and sexual violence, only two comments were provided by young people when asked about situations that make families being happy, strong and united. These referred to the importance of protecting each other and no arguments in the home.

Figure 14 illustrates the answers provided by adult family members who participated in the research workshops and answered questions related to family members being worried or unhappy at home. Of 155 answers, 22 related to different forms of physical and sexual violence. In the main, the remaining responses spoke of concerns related to emotional abuse and poverty.

Figure 14. What makes families worried or unhappy when they are at home (as answered by adult family members)



Figures 15 illustrates the answers provided by adult family members provided in relation to abusive behaviour. Overall, their answers contained many more references to physical abuse and related factors including



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addiction, than those provided by young people. Adult family members referred to domestic and gender-based violence as well as '*violence in all forms*'.

Figure 15. What makes families worried or unhappy when they are at home (as answered by adult family members)

#### What makes families worried or unhappy when they are at home? (as answered by adult family members)

violence

domestic violence

lack of safety

violence physical and mental

when you live with violence, abuse that is physical and psychological

violence committed by males

violence in all forms

excessive and violent

gender-based violence

abuse

drugs destroy families

addictions and constant screaming

suffering violence

addictions

many families destroyed for drugs

situations of verbal or physical violence

lots of violence physical

addictions

bad treatments since childhood and adolescence brings issues in the age adult traumas , etc.

In contrast, when asked about the unity and happiness of families, 137 of 199 responses provided by adult family members included issues of protection, love, harmony, trust, and caring for one another. They wrote about living '*in a home without intrafamilial violence*', where there is no '*verbal, physical or gender-based violence*' and environments in which there is '*protection*' and '*safety*'.

When asked why children become separated from parents and placed in alternative care, all interviewees identified violence as being a primary cause. This includes all forms of physical, violence, sexual abuse and exploitation, and emotional harm. It was particularly noticeable how many specifically referred to sexual abuse.

*"The entry of children[into alternative care]...can range from acts of violence, abandonment, violation of their health or education to the most serious issues such as their sexual health, or, for example, the violation of rights that have to do with sexual crimes...."*

*"situations of sexual violence, exploitation"*

*"What has grown is violence towards children and adolescents"*

*"violence against children"*

*"situations of violence towards children, within the family, with all forms of violence..."*

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*"In general, they are situations of sexual violence, or something in a situation related to sexual exploitation, plus a question related to crime."*

*"Then there are the most painful cases, those of abuse, which is generally the girl, but that does not mean that there are no boy. But there are a much smaller number. Removing the girl from the home and leaving the abuser happens many times".*

*"For example, sexual abuse, sexual exploitation, other forms of violence..."*

*"In Uruguay, what I know, children are taken away from a family when there are complaints, when the report of abuse is confirmed..."*

*"The phenomenon of violence, at least in Uruguay, is very, very strong, we have many situations of violence detected by the system."*

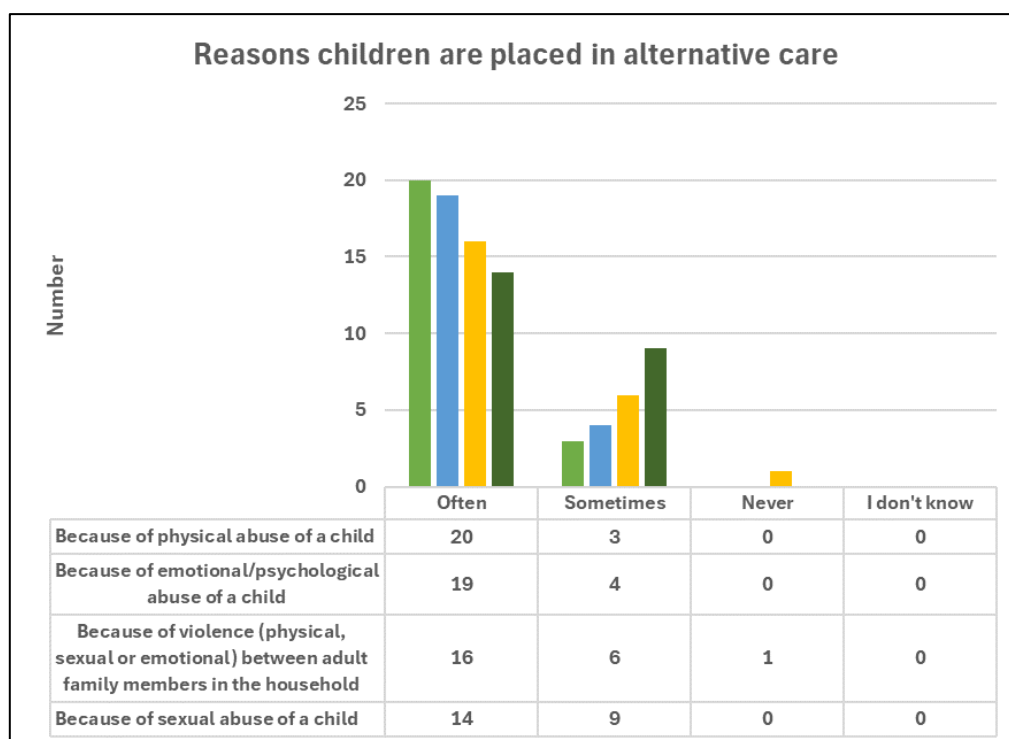
*"Studies [in Uruguay] indicate that the main cause of separation of children and adolescents from the family is reports of abuse."*

In an online survey disseminated during our research, respondents were asked about reasons children are separated from parents and placed in alternative care in Uruguay. In relation to different forms of violence, physical abuse of children received the highest ranking as a reason children are 'often' placed in care (Figure 16). This was followed by emotional/psychological abuse. Over half of all respondents thought violence between adult members (domestic abuse) is 'often' the reason for placement in alternative care, and 14 said placement was 'often' because of sexual abuse of a child.

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Figure 16. Reasons children are being placed in alternative care



Information on children in alternative care in Uruguay in 2019 shows 49% of children were placed due to violence.<sup>120</sup> UNICEF Uruguay has said 'violence against children and adolescents continues to be a structural problem.'<sup>121</sup> According to the Institute del Nino y Adolescente del Uruguay (INAU) violence against children continues to be an extreme violation of their rights perpetuated and tolerated due to inequalities that are historically, culturally and structurally rooted in the social structure of the country.<sup>122</sup>

In 2023, the INAU reported 8,157 cases of violence against children and adolescents (the term adolescents is used by the INAU to describe children and young (13 a 18 years old) had been detected, registered and interventions provided for. The report said both females and males are almost equally at risk. Between 2011 and 2023, there was an annual increase in the number of reported cases of violence against children rising from 824 in 2011 to 8,157 in 2023. In 72% of these cases, the violence had been recurrent.<sup>123</sup> In addition, approximately 9 out of 10 registered situations were considered to have already reached a 'chronic' state.<sup>124</sup>

When developing strategies to prevent violence and child-parent separation it is important we understand the risks children face. In 2023, it was reported that cases of child abuse included emotional abuse (39%) followed by cases of sexual abuse (22%), neglect (21%), physical violence (16%) and sexual exploitation (2%) (Figure 17).<sup>125</sup>

<sup>120</sup> Institute del Nino y Adolescente del Uruguay and UNICEF 2021:79

<sup>121</sup> UNICEF Uruguay 2023

<sup>122</sup> Institute del Nino y Adolescente del Uruguay 2023

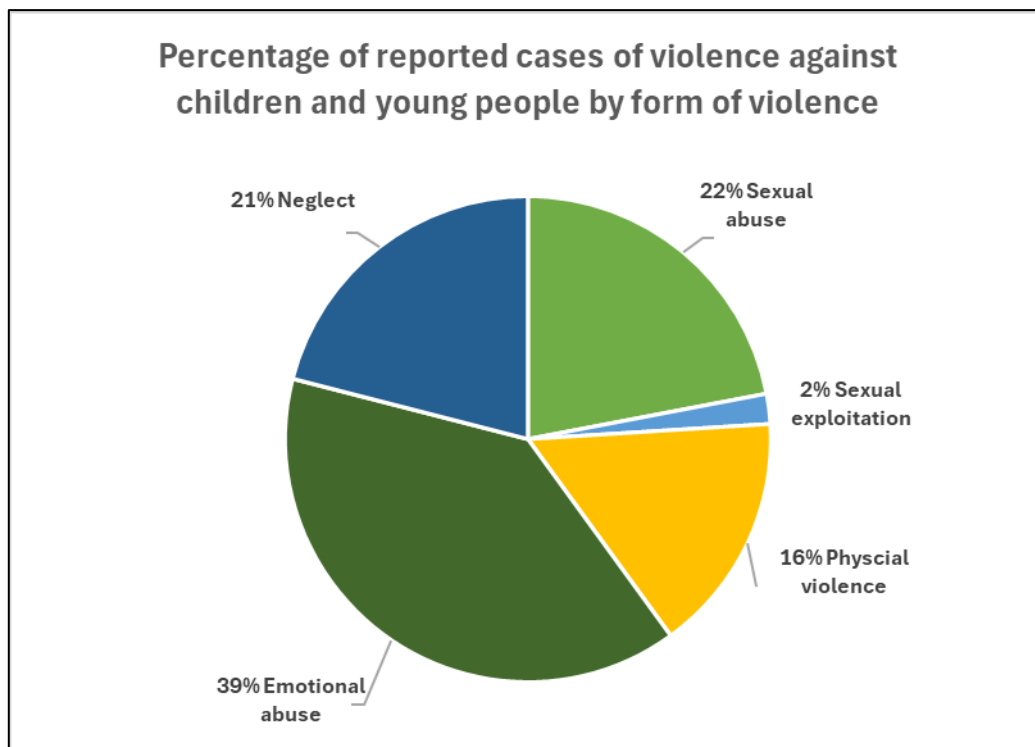
<sup>123</sup> Institute del Nino y Adolescente del Uruguay 2023:61

<sup>124</sup> Institute del Nino y Adolescente del Uruguay 2023:61

<sup>125</sup> Institute del Nino y Adolescente del Uruguay 2023: 58

## Key Drivers contributing to Child-Parents Separation Uruguay

Figure 17. Percentage of reported cases of violence against children and young people by form of violence (2023)



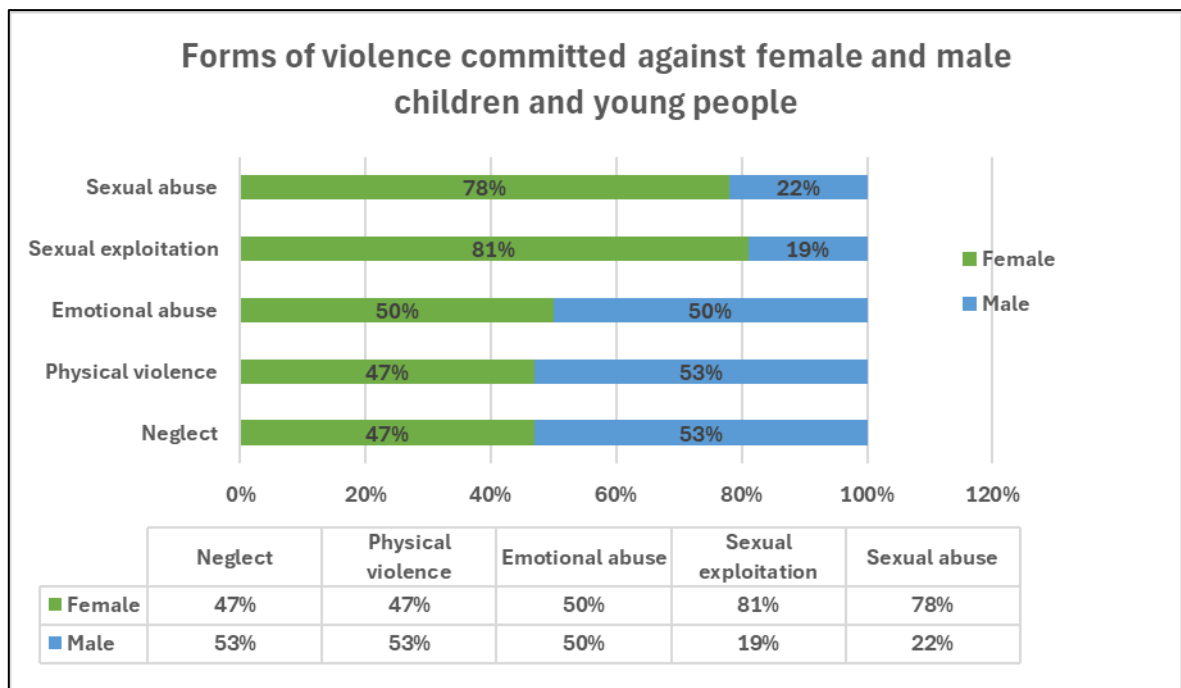
(Source: adapted from Institute del Nino y Adolescente del Uruguay 2023:58)

Understanding the age children and young people are most vulnerable to different forms of violence in terms of their sex and age is also important when considering the development of prevention programmes. Relevant information recorded by the INAU in 2023 can be seen in Figure 18 and Table 2.<sup>126</sup>

<sup>126</sup> Institute del Nino y Adolescente del Uruguay 2023:58 & 59

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Figure 18. Forms of violence committed against female and males (2023)



(Source: adapted from Institute del Nino y Adolescente del Uruguay 2023:59)

Table 2. Type of violence experienced by age of children and young people (2023)

Type of violence	0 to 3 years	4 to 5 years	6 to 12 years	13 to 17 years	18 years and over
Sexual abuse	2%	5%	36%	8%	9%
Sexual exploitation	6%	0%	14%	60%	20%
Emotional abuse	13%	12%	34%	34%	7%
Physical violence	10%	11%	37%	31%	11%
Neglect	12%	9%	39%	32%	8%

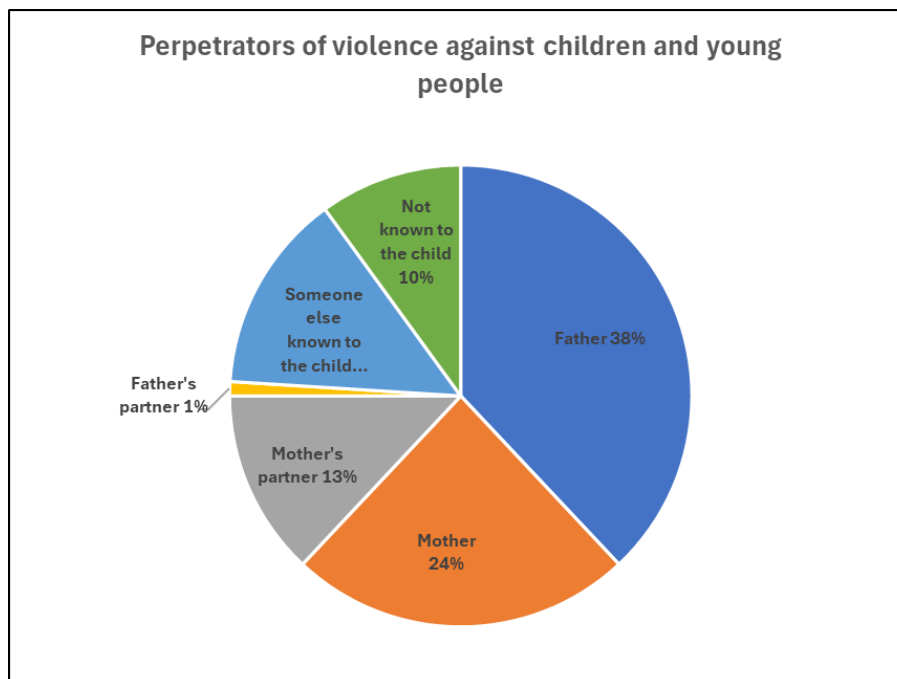
(Source: adapted from Institute del Nino y Adolescente del Uruguay 2023:59)

As can be seen in Figure 19, it is noticeable that perpetrators of the violence are overwhelmingly people known to children, including their parents.

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Figure 19. Perpetrators of violence against children and young people (2023)



(Source: adapted from Institute del Nino y Adolescente del Uruguay 2023:65)

### 8.1.2. Physical and emotional neglect

#### 8.1.2.1. Material neglect

Neglect, as it relates to providing children with adequate nutrition, health care, clothing, hygiene, shelter, access to education, and other necessary living conditions that ensure that a child's health, safety, and well-being are not threatened, is a reason children enter alternative care in Uruguay.

When asked what makes children vulnerable to placement in alternative, a number of interviewees referred to different forms of neglect. They spoke about *"negligence on the part of the of the parents"* and children coming to the attention of protection authorities *"when the child does not go to school, is dirty..."*. Others said, there are

*"many situations of negligence are detected. For example in terms of health care"*

*"you can have an element more related to the issue of negligence"*

*"there are many situations that arise, mostly linked to negligence."*

*"there are many situations linked to negligence where there is enormous deterioration due to [lack of] caring alone [in a female headed household]..."*

*"There are cases of negligence..."*

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*"But we must take into account that there are many situations that arise, mostly linked to negligence. Which is another form of violence... a situation of negligence. Which occur when care is in a very precarious situation....In these situations there is a great deterioration of the care of the adult."*

*"But as I said, obviously there are some causes and one could say that they are more common when you ask, one is violence, the issue of addictions, obviously. negligence."*

Respondents to the online survey also believe neglect is a reason children are placed in alternative care (Table 3). In total, almost half (12) of 23 respondents think material neglect is 'sometimes' a reason and approximately a third (7) think it 'often' leads to placement.

Table 3. Reasons children are placed in alternative care

Reasons children are placed in alternative care	Often	Sometimes	Never	I don't know
The child is being neglected i.e. not being fed enough or kept clean or properly clothed	7	12	3	1

As can be seen in Table 4, data from 2023 published by the INAU, found neglect to be a reason children come to the attention of the child protection system. However, no further details as to the situations considered to be neglectful were provided in the report.

Table 4. Neglect as a reason children are placed in alternative care

Type of violence (2023)	0 to 3 years	4 to 5 years	6 to 12 years	13 to 17 years	18 years and over
Neglect	12%	9%	39%	32%	8%

(Source: Institute del Nino y Adolescente del Uruguay 2023:59)

Although the Code of Children and Adolescents specifically states that children and adolescents should not be placed in alternative care for reasons of poverty, nevertheless, 2024 data published by the INAU indicates that 18% were there due to family financial difficulties, 8% for reasons of homelessness, and 4% due to lack of housing.<sup>127</sup> Furthermore, when interviewees were asked about actions that could help alleviate situations leading to child-parent separation, they said there should be more rigorous decision making that provided support for families in difficulty, including those experiencing socio-economic stress, rather than placing children in alternative care.

<sup>127</sup> Please see: <https://www.inau.gub.uy/estudios-de-poblacion-y-proyectos/item/3762-ano-2024>



#### 8.1.2.2. Emotional and psychological violence and neglect

The WHO defines emotional or psychological violence' as including, 'restricting a child's movements, denigration, ridicule, threats and intimidation, discrimination, rejection and other non-physical forms of hostile treatment.'<sup>128</sup> These actions can have a particularly negative impact on children's sense of self-worth and emotional well-being.<sup>129</sup> During our research young people participating in the research workshops wrote about such issues. They said there are young people who lack love and attention. They '*lack of emotional and psychosocial support*', parents who do not support, listen to, or understand their children. They also referred to young people who do not feel they are trusted or respected by their parents. In addition, they wrote about concerns related to losing parental care. Further illustrations of young people's answers can be seen in Figure 20.

Figure 20. What makes young people worried or unhappy when they are at home (as answered by children and young people)

#### What makes young people worried or unhappy when they are at home? (as answered by young people)

*disrespect*  
*parents don't support them*  
*not having support*  
*parents don't understand them*  
*lack of emotional and psychological support*  
*feeling alone*  
*loneliness*  
*parents not giving them the love they need*  
*that parents are not there when they need it*  
*that parents do not respect their decisions*  
*parents are not present*  
*parents do not advise them*  
*parents choose one of their children over another*  
*parents rub in the achievements of other brothers*  
*parents failure to explain the reason for a negative response*  
*parents should tell them that they did something right and not tell them that they do everything wrong.*  
*Parents not allowing growth or experimentation*  
*not sending us to school*  
*lie to you about who your father is*  
*not having parents pay attention*  
*parents don't listen to their problems*  
*teasing inside the house*  
*that parents do not pay attention to what is said*  
*not seeing them as a person*  
*not knowing how to act depending on the mood of others*  
*not being with your family*  
*being taken away from their family*  
*leaving them in a residential institution*  
*being taken away from your family*  
*violation of rights*  
*lack of intellectual physical stimulation*  
*leaving a home at 18*  
*being labelled*  
*inequality*

<sup>128</sup> Please see: <https://www.who.int/news-room/fact-sheets/detail/violence-against-children>

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*hurt feelings*  
*not having friends*  
*uncertainty about the future*  
*uncertainty*  
*feel alone*  
*lack of attention*

In contrast, when asked what makes young people happy when they are at home they wrote about being loved and respected and being with parents who pay attention to them and listen to what they have to say.

When young people were asked what makes adults in the home worried or unhappy, they wrote about feelings of '*feeling of loneliness, abandonment*', and lack of communication and understanding between family members. Not '*knowing how to control emotions*', or how to '*solve problems*' through good communication and empathy were also highlighted.

We particularly note how the topic of emotional abuse was not spoken about during interviews with professionals when asked about reasons children are placed in alternative care. This is in contrast to findings in previous reports published in Uruguay suggesting this is a concern within families. For example, a report by the INAU identified emotional abuse as being a reason a considerable number of children came to the attention of the child protection authorities in 2023 (Table 5).<sup>130</sup>

Table 5. Percentage of children and young people in the national child protection system because of emotional abuse (2023)

Type of violence (2023)	0 to 3 years	4 to 5 years	6 to 12 years	13 to 17 years	18 years and over
Emotional abuse	13%	12%	34%	34%	7%

(Source: Institute del Nino y Adolescente del Uruguay 2023)

Information published by the INAU also shows that, as of December 2023, 1,467 children were in the national child protection system due to lack of family ability to care for their children.<sup>131</sup> The term 'inability to care' is not defined in the report but there are insights suggesting this protection measure is not related to physical or sexual violence. Data in Figure 21 identifies fathers (46%) and mothers (32%) as being the most prevalent perpetrators of emotional abuse against children in 2023.<sup>132</sup>

<sup>130</sup> Institute del Nino y Adolescente del Uruguay 2023

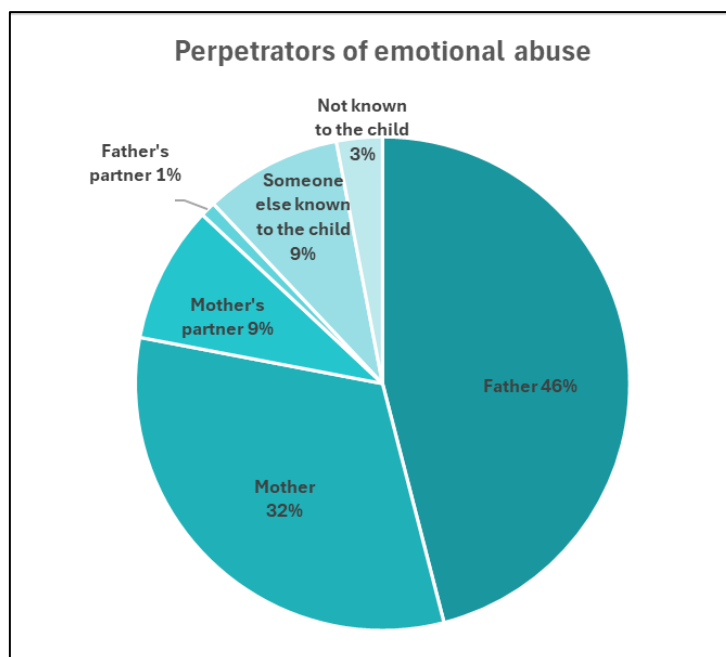
<sup>131</sup> Please see: <https://www.inau.gub.uy/>

<sup>132</sup> Institute del Nino y Adolescente del Uruguay 2023:65

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Figure 21. Adult perpetrators of emotional violence against children (2023)



(Source: Institute del Nino y Adolescente del Uruguay 2023:65)

In 2017, UNICEF identified the manner in which some parents were unaware of the harm caused by derogatory treatment of children.<sup>133</sup> A further 2018 survey also published by UNICEF showed 43.5% of 2-4 olds had been victims of psychological abuse.<sup>134</sup>

A grave concern is how becoming victims or witnesses of different forms of violence not only creates the possibility that children may be separated from parents and placed in alternative care, but such experiences can also have a serious and long lasting impact on a child's mental health and well-being.<sup>135</sup> In addition this can contribute to their own use of harmful behaviour throughout their lifetime.<sup>136</sup> UNICEF Uruguay has identified how children who suffer violence, including emotional abuse, may suffer from low self-esteem, feelings of loneliness and abandonment, lack of coping mechanisms and confidence, poor social skills, anxiety and depression.<sup>137</sup> Such childhood experience are also recognised as teaching children how to resolve problems through the instigation of violence.

In conclusion, our analysis of all the evidence collated during the research suggests different forms of violence are the principal reasons a case of child protection is activated and as a result, child being removed from parental care and placed in formal alternative care settings.

*"...separated and separation or removal [of children] here in Uruguay is [because of] a violent act.*

<sup>133</sup> UNICEF Uruguay 2017

<sup>134</sup> UNICEF Uruguay 2019:28

<sup>135</sup> Kim et al, 2022

<sup>136</sup> Asmundson and Afifi 2019; Dube et al. 2001; Dube et al. 2002; Felitti et al. 1998; Kim et al. 2022; Moylan et al. 2010; Tarabah et al. 2015

<sup>137</sup> Please see: <https://www.unicef.org/uruguay/crianza/etapa-escolar/cuales-son-las-consecuencias-de-la-violencia-en-la-crianza>. Also see: University of the Republic of Uruguay 2020.

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*"...but it [separation] is always [because of] a violation. Because whenever there is a boy or girl, a subject of law within the system to do with the fact that there was a violation ...that is precisely where the separation comes in."*

### 8.1.3. Orphanhood

For the purposes of our research, we define an orphan as someone whose both parents have died. However, in Uruguay we believe the term 'orphan' is used interchangeably to refer to children who have lost one or both parents. We clarified our definition of orphanhood during the interviews. When asked about reasons children are placed in alternative care, interviewees said very few children are placed in alternative because they are orphans.

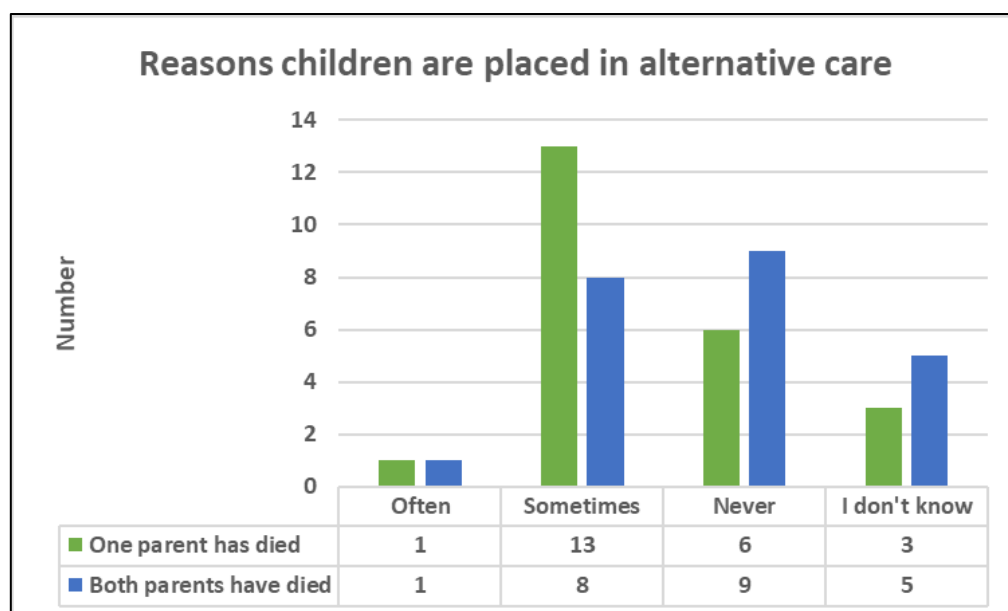
*"We also don't have orphaned children...For example in one institution or example, in the almost 500 children that we have in alternative care, there are none...we do not have, orphaned children in the general [alternative care] system. There are almost no orphaned children..."*

*"No, no, it's not usual, maybe some, no, it hasn't happened in my experience in a few years..."*

*"...it is not common for children to be abandoned, for example, to be abandoned at the door of a church, that is not very common..."*

In our online survey, of 23 respondents only 8 think the death of both parents is a reason children are 'often' placed in alternative care, 8 think this is 'sometimes' a cause, and 9 think this 'never' happens (Figure 22).

Figure 22. Reasons children are placed in alternative care: death of a parent/s



Data from a 2013 Ministry of Social Development and UNICEF Multiple Indicator Cluster Survey (MICS) survey suggests there were many children not living with one or both parents. Of all children (0-17 years) involved in

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the survey, only 59.6% were living with both parents.<sup>138</sup> In total 4.7% did not live with either parent and 3.4% had lost one parent due to death. Unfortunately the 2013 Ministry of Social Development and UNICEF Multiple Indicator Cluster Survey (MICS) used a definition of orphanhood as losing one or both parents due to death so was not possible to extract the number of true orphans in Uruguay.<sup>139</sup> In addition, data published by the INAU in 2019 shows 5% of children in alternative care were there due to the death of their main carer. There was no data on those in alternative care due to the death of both parents.<sup>140</sup> Therefore, it has not been possible to confirm the exact numbers of children in Uruguay who are true orphans i.e. both parents have died, that have been placed in alternative care.

#### 8.1.4. Abandonment

For the purposes of our research, we define abandonment as children whose both parents are unknown. However, it is important to note that in Uruguay the term 'abandoned' is not necessarily being used by all professionals to denote only children whose parentage is unknown but also children who are relinquished. During interviews, we clarified our definition as being children whose parents are unknown.

The information on abandonment provided by interviewees suggests very few children are abandoned in Uruguay. They indicated that those who are abandoned are usually babies. No one spoke about reasons for such abandonment.

*"The cases that have occurred are more of babies, newborn babies who are abandoned. But those are just some of the few cases that there may be. But then there are almost no older children. I, for example, have no memories of this situation"*

*"There are cases of...abandonment."*

*"I believe that in Uruguay the situations of abandonment of this type are the least, almost that we do not have"*

*"it is not common for children to be abandoned, for example, to be abandoned at the door of a church, that is not very common. If some other things are sometimes happening, for example, it is happening, they say, at the hospital level that mothers after giving birth leave the hospital without the child, at least in the first instance, also in some very specific cases of a child who has been left at a bus station, for example, but abandonment or being handed over like this is not common"*

We found a few news items containing information about abandonment. One such report said that as of October 2023, in one hospital, 202 children of different ages had been abandoned in one particular hospital. The article went on to say this was in comparison to 223 cases in 2021, and 199 cases 2020.<sup>141</sup> A further article published in 2023 noted how 86 babies had been abandoned in one hospital over the period of one year.<sup>142</sup> The

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<sup>138</sup> Ministry of Social Development and UNICEF 2013

<sup>139</sup> Ministry of Social Development and UNICEF 2013

<sup>140</sup> INAU and UNICEF 2021

<sup>141</sup> Please see: <https://www.elpais.com.uy/informacion/salud/unos-200-ninos-son-abandonados-cada-ano-en-el-hospital-pereira-rossell-segun-numeros-dados-a-conocer-por-asse>

<sup>142</sup> Please see: <https://www.elpais.com.uy/que-pasa/en-un-ano-86-bebes-fueron-abandonados-o-separados-de-sus-padres-en-el-hospital-las-duras-historias-detras>

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INAU 2023 data on children in the national child protection system shows 16% were there due to abandonment.<sup>143</sup> The data set does not provide the definition of abandonment being used by the INAU.

#### 8.1.5. Disability

Information provided by interviewees suggests there is some lack of agreement about whether or not, and which, alternative care providers accept children with disabilities into their facilities. A few think most children with disabilities are placed in specialised residential institutions. Some suggested one reason for placement in alternative care is due to parents themselves having a disability Others suggested that some parents are unable to cope and are therefore willing for the state to take on the responsibility of caring for their child.

*"It's not so common. It is probably a minimal percentage among the children we receive."*

*"In general, with people with disabilities, especially intellectual disabilities, most of their families are also intellectually disabled. Most of the time they accept that their children be taken away from them and that they be in the care of other people and they renounce them. Then reconnecting them with the child in the institution is difficult. It is a difficult job."*

*"...it is true that there is a relationship between institutionalisation and disability. But I do not think it is because they have a disability, but rather that there is a level of disability that is sometimes the result of abuse or neglect."*

*"We receive people with disabilities in the institution..."*

*"[they are children] of adults with disabilities who apparently are not be fulfilling the care functions"*

*"In general, with people with disabilities, especially intellectual ones, most of their families are also intellectually disabled. Most of the time they accept that their children be taken away from them and that they be in the care of other people"*

*"In those cases, the intellectual disability is related to their family, unless it is Down syndrome or something specifically. But their parents also have the intellectual disability."*

Data for January 2023 published by the INAU shows there were a number of children and young people with disabilities in the child protection system residing in special residential centres for children with disabilities.<sup>144</sup> This included 639 children and young people in centres for 'atención en discapacidad' (disability) and 215 in centres for 'salud' mental' (mental health).<sup>145</sup> According to UNICEF, children and young people who are initially placed in INAU residential protection centres assessed as requiring mental health support may then be transferred to specialised centres.<sup>146</sup> It is understood many of these centres are managed as a result of a tendering process by non-governmental providers.<sup>147</sup>

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<sup>143</sup> Please see: [https://www.inau.gub.uy/content\\_page/item/3792](https://www.inau.gub.uy/content_page/item/3792)

<sup>144</sup> Please see: <https://www.inau.gub.uy/estudios-de-poblacion-y-proyectos/item/3762-ano-2024>

<sup>145</sup> *ibid.*

<sup>146</sup> *ibid.*

<sup>147</sup> *ibid.*



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In 2019, there were reportedly 449 centres assigned for specialised mental health care as part of the national child protection system.<sup>148</sup> As of December 2019, of all 5,270 children and young people in the INAU child protection system living in alternative care, 10.5 % were residing in a mental health care centre.<sup>149</sup> According to the INAU website, as of January 2024, there were 639 children residing in 'residencias para la atención en discapacidad' and 215 in 'residencias para la atención en salud mental'.<sup>150</sup>

UNICEF reports show that in 2019, 6 of every 10 children and young people placed in a centre for mental health had initially entered the protection system due to being victims of some form of violence.<sup>151</sup> In addition, 7% were admitted due to their main carer being disabled. More than a third (34.7%) of the children and young people in centres for mental health care had already transferred between 4 or more other residential protection centres. The study of these centres led to recommendations for improvements to the quality of care and meeting of human rights of children placed there. There was also a call to prevent such placements.<sup>152</sup>

A UNICEF report published in 2013 revealed the isolation, stigma and prejudice experienced by children with disabilities. Whilst acknowledging their heightened risk, the report also noted the lack of research on the prevalence, nature, and causalities of this violence.<sup>153</sup> Neither did our desk review reveal such information, Whilst there are many reports on violence against children in Uruguay, we found very little information about the specific risks facing children with disabilities.

### 8.1.6. Exposure to drugs and alcohol

Only three young people referred to addiction when thinking about the situation in families. When asked about adults in the family, one young person wrote about their being situations of them '*being on drugs all the time and do not want to be in that situation*'. Others wrote about parent's '*consumption of drugs*' and '*always arguing: living with drug issues*'. Several adult family members wrote about the harm drugs can cause and how '*drugs destroy families*'. No workshop participants wrote about the use of alcohol.

Almost every interviewee, when asked about reasons children are separated from parents and placed in alternative care, spoke about addiction. This is both addiction of parents and children/ young people.

*"One of the main factors right now in this society that leads to separation of children is drug use. Mothers and fathers who are users and do not have the capacity to care. Children end up suffering many things. When I say many things I mean hunger, cold, abuse, mistreatment, being on the street, a lot of homelessness. Parents can't provide it when they can't take care of themselves."*

*"A third factor is substance consumption..."*

*"and currently...the problems have to do with consumption of psychoactive substances, drug use and violence..."*

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<sup>148</sup> *ibid.*

<sup>149</sup> *ibid.*

<sup>150</sup> Please see: <https://www.inau.gub.uy/estudios-de-poblacion-y-proyectos/item/3762-ano-2024>

<sup>151</sup> *ibid.*

<sup>152</sup> *ibid.*

<sup>153</sup> UNICEF Uruguay 2013



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*"And...drug and alcohol addictions among the parents or other adults who provide care..."*

*"[it is not only] situations of children deprived of family care for protection reasons. It happens because of problems such as addiction and families request that children or adolescents be institutionalised to be cured"*

*"Or the impossibility of care [by the parents] because of the reason of addiction..."*

*"And when we talk about the causes such as addiction..."*

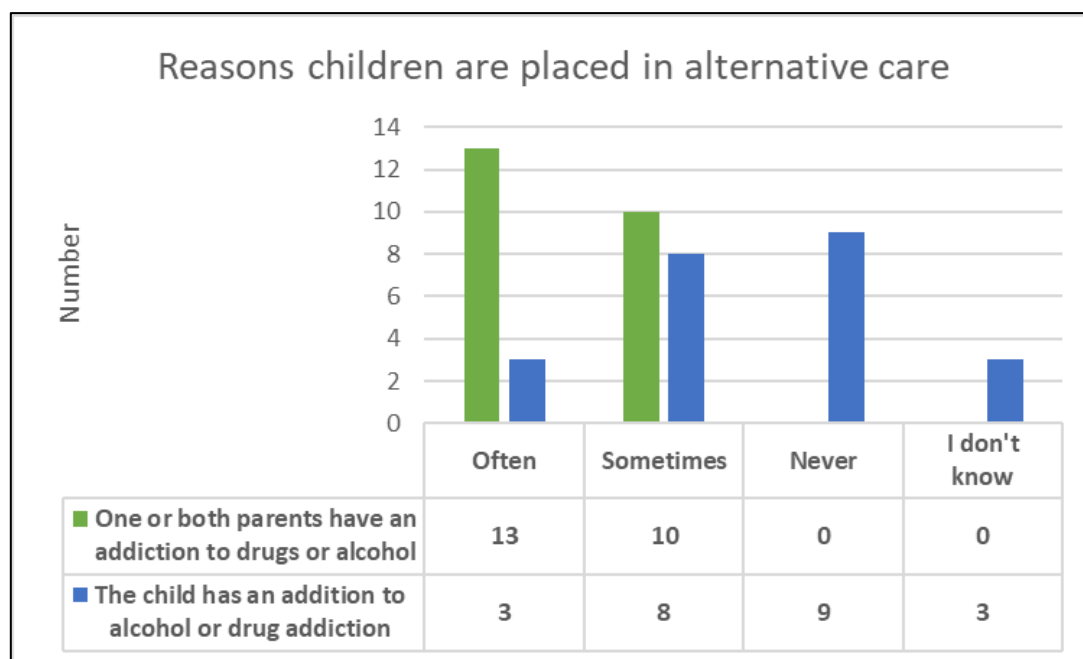
*"Sometimes if there is a mother with drug problems the situation is reported to the school...and in an effort to preserve the safety of the child they are admitted [into alternative care]."*

*"currently for INAU, it is a government agency that takes in children, the problems have to do with addiction of psychoactive substances, drug use and violence"*

*"In the organization that I participate with (name of organisation removed) and other institutions, they are beginning to talk about families being involved in drug trafficking and in some institution, the reason for children being admitted to care facilities is for that reason"*

In total over half (13 of 23) of all respondents to the online survey said they think parental addiction to drugs or alcohol is a reason children are 'often' placed in alternative care and 10 believe this is 'sometimes' the case (Figure 23). In total, 8 respondent think a child who has an addiction is 'sometimes' related to placement and only 3 think this happens 'often'.

Figure 23. Reasons children are placed in alternative care



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Information on children in alternative care in 2019 shows 19% of children were there care because their main carer had a drug or alcohol addiction.<sup>154</sup> According to INAU data, as of January 2024 there were 43 children and young people in 'Centros para atención en situaciones de consumo problemático'.<sup>155</sup> The data does not clarify whether this is consumption by children and young people themselves or as a result of their parent's addiction.

#### 8.1.7. Divorce/separation and re-marriage/new partnerships

Divorce, separation and the presence of a new partner was not an issue raised during the research workshops or by interviewees as a situation that could lead to children entering alternative care. However, in the online survey, almost half of all 23 respondents (11) a parent's new partner not wanting the child/children from their previous relationship, was 'sometimes' the reason children were placed in alternative care (Table 7).

Table 6. Reasons for placement in alternative care

Reasons for placement of a child in alternative care	'often'	'Sometimes'	Never	I don't know
A parent has a new partner who does not want the child/children from a previous relationship	2	11	9	1

Due to this issue not being raised by workshop participants or, interviewees when asked why children are in alternative care, and no INAU data being found indicating this as a reason for placement, we suggest this may be a topic for a future study.

#### 8.1.8. Parenting ability

When discussing parents in difficulty and at risk of losing their children into alternative care, many interviewees referred to deficiencies in parenting ability. Analysis of information gathered during interviews suggests that many of the professionals who participated in our research do realise the importance of understanding the actions of parents and why the violence or neglect is occurring. They are aware that such factors as mental or physical health of parents, domestic abuse, and issues related to poverty etc. can adversely affect a parents ability to care for their children and to also result in violence.

*"So that is a basic thing, the material conditions, but it does not only have to be thought about economically, but also in actions that can be make so that that family can have a support network. From other family members, from protective institutions, etc. Those who can participate and expand the offer of care for the child. And let's not blame that mother or that adult...It is an evaluation of the adults' parenting which is a very important aspect to see....It is not a question if the adult is competent or not competent, it is whether the adult is in a situation where the conditions that really facilitate them are there...That it is not blaming, but that it is promoting, it is also a broad approach that allows intervention on the conditions of the condition of parenting. And not about the parents' competencies to provide care."*

<sup>154</sup> Institute del Nino y Adolescente del Uruguay and UNICEF (2021):79

<sup>155</sup> Please see: Centros para atención en situaciones de consumo problemático

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*"The needs are beyond materials needs that the children need to move forward. A hug, and I love you, along with a plate of food, a place to sleep. We need to let those parents provide things for the child as best they can. When you, as a member of a team see that the family is prospering, that the mother cares, that the father is looking for work, that the mother tries to do the work she can, then it is not necessary to come to that [use of alternative care]."*

*"Perhaps today no one discusses the institutionalization of children for economic reasons, but there are many mothers and fathers with mental health problems, added to the problematic use of narcotics, preventing them from being able to carry out a duty to take care of their children because they cannot take care of themselves, much less their children"*

One interviewee raised the issue of parents who lack understanding of how to be a good parent and care for and protect their children.

*"Many times, without interdisciplinary support, they have no chance of providing that caring, unprotective environment, because they do not see that violence is being exercised or they do not have the correct "mothering" or "fathering" tools to know what to do in each situation. Of the crisis of that child. Because they have a condition and do not know how to act, or they do not even realize that this child has a problem, or that they have a problem, and must go to...treat it."*

Several spoke of parents whom they understand, do not purposefully want to lose the care of their children. However, if the ability to care for a child places them at risk of harm, interviewees realise the state has a responsibility to intervene and remove them from this situation.

*"...in most cases I will tell you that the families are not going to want to" [have their children removed by judicial order]*

*"Many times you have to manage that anger, that frustration, from the mother or sometimes from the father who is losing...the possibility of living daily with a son or daughter. Many times we have to intervene in situations where there are moments of anger, for example, with family advisors".*

*"Many times there is resistance, and there is, "the child is mine, you can't take them". But it is true that sometimes one detects that there is a greater desire to work so that the situation improves. And sometimes you realise that no, there is no desire or that desire cannot be sustained. Sometimes you cannot sustain a desire because it is crossed with something else. Because it is crossed with situations of gender violence, with a situation of problematic addiction, with a situation of psychiatric health. Sometimes it's not that people don't want to, they can't."*

A further issue mentioned by several interviewees was the importance of familial and social networks and how the lack of such support can impact parenting ability.

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*"This is a reality, because they are families whose network is sometimes very weak. Because the truth is that not all poor people require care, no, because many people have their network, their family when they are in situations of gender violence or linked to addiction."*

In addition, a few interviewees did speak of parents who do want to relinquish their children.

*"And it is not the first time that I receive a call from a mother who tells me 'look, I can't handle my son, what do I have to do to institutionalise him'? I ask her, 'how old is your son?' She says eight."*

*The other way that parents do not take care of their children is to leave them where they are born and say that I will not take care of my child, you give them up for adoption... There are women who leave, who go away and leave their children [in the hospital].*

*"It happened to us, last week we had a hearing about a fourteen-year-old girl. They said, 'I don't want her, I want her to enter an INAU home, I can't take care of her'."*

Further discussion on issues that can impact parenting ability can be found later in this report.

#### 8.1.9. Single parent households

The situation of single-headed households, and most especially those that are female-headed, and how this can lead to placement of children in alternative care was a topic raised during interviews. For example, one interviewee when speaking about removal of children from 'precarious' situations said, *"generally we are talking about single-parent homes, under the care of the mother, for example, where sometimes there is such a serious deterioration. Maybe in those cases there may even be a degree of relief for the mother [if the child is taken into alternative care]"*. Although the interviewee went on to stress that it is rare that mothers want their children to be taken from them even if struggling. Once again the issue of isolation and lack of support, especially through social networks, was mentioned and how struggling alone can impact on a single mother's ability to care for her children.

*"...I am not saying with this that it should be interpreted that single mothers, for example, are at risk. What I am saying is a caregiver or a single adult, 100% of all their time is dedicated only to care and that a child or several children depend only on that person without having a support network. Because... I'm not talking about needing a partner, no, I'm talking about family support, grandparents, uncles. That they allow them time outside, that they allow them to rest, that they allow them to have his own activities. A woman, a man, an adult who is there 24 hours a day, 100% of the time and dedicated to the children with problems like the ones I mentioned before, mental health disorders, addictions. That's why I talked about poverty. But in terms more than anything of the absence of opportunities and access to networks. So those situations of loneliness are risky."*

## 9. Additional child protection concerns

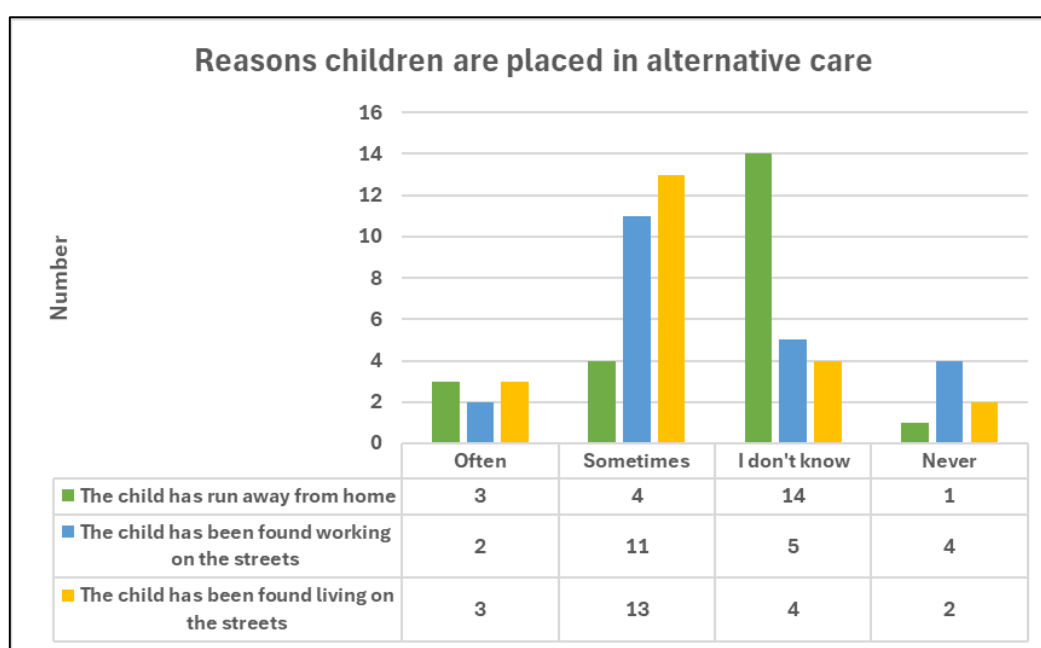
As a consequence of circumstances in the home, for example the result of inadequate parental care and protection, children find themselves in situations that place them at risk of placement in alternative care when also outside the home environment. Below are some of the concerns raised by interviewees as well as children, young people and adult family members during research workshops. Information has also been triangulated with details collated from the desk review and the online survey.

### 9.1. Street connected children

Street connected children, including those living and working on the streets, face an increased risk of violence. Children on the streets also attract attention of police and child protection authorities concerned for their safety and welfare.. Only a very small number of interviewees referred to children who are found on the streets with several understanding this situation is the result of parents who have substance abuse issues.

Respondents to the online survey think children found on the streets can lead to their placement in alternative care (Figure 24). Over half of the 22 respondents that answered this question, think children found living on the streets children found working on the streets, is 'sometimes' a reason for placement in alternative care .

Figure 24. Reasons children are placed in alternative care: being street connected



Information on children in alternative care in 2019 shows 2% of children were there care because they had run away from home.<sup>156</sup> However, the INAU published data as of the end of December 2023 indicating only 15 children were under the special protection system due to being street connected although a further data set showed 884 children were in special centres for street children.<sup>157</sup> The international NGO, Consortium for Street Children, suggests there are significant numbers of street connected children in Uruguay.<sup>158</sup> The organisation

<sup>156</sup> Institute del Nino y Adolescente del Uruguay and UNICEF 2021:79

<sup>157</sup> Please see: <https://www.inau.gub.uy/transparencia>

<sup>158</sup> Please see: <https://www.streetchildren.org/our-work/projects/street-children-in-uruguay/>

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says in part this situation is due to a high number of primary school children dropping out of education, especially in rural areas where it states, 'children are forced to work from a young age to support their families.'<sup>159</sup> It is also recognised that the Government of Uruguay is fully aware of this situation and is developing a legal and policy framework, including a national plan for street children, with the aim of combatting this situation.

### 9.2. Child labour

Half (11) of the 22 online survey respondents who answered a question related to child labour believe children found working on the streets is 'sometimes' a reason children are placed in alternative care (Table 7). Only 2 think this happens 'often'. Over half of respondents think that children 'never' miss school on a regular basis because they must go to work.

Table 7. Reasons children are placed in alternative care

Reason children are placed in alternative care	Often	Sometimes	Never	I don't know
The child has been found working on the streets	2	11	5	4
The child does not go to school on a regular basis because they must go to work	2	5	14	2

Child labour is however, recognised as a protection risk. In 2017 a report<sup>160</sup> issued by the US Government's Bureau of International Labor Affairs confirmed the engagement of children in the worst forms of child labour in Uruguay, including involvement in commercial sexual exploitation and scavenging in garbage. In 2014, 6.1% (31,955) of children aged 5 to 14 years were working.<sup>161</sup> More than 60% of children who were aged 15–17 years had been engaged in hazardous work. Children from rural areas and those of Afro-descent were more likely to be affected. The report went on to say child victims of commercial sexual exploitation are at particular risk if living in tourist areas and near the borders with Argentina and Brazil.<sup>162</sup> Recognition was given to the Government of Uruguay in establishing laws and regulations related to child labour whilst also identifying gaps in the legal system.<sup>163</sup>

### 9.3. Trafficking and sexual exploitation

Children are recognised as coming to the attention of the child protection system due to trafficking and sexual exploitation, which as a result, can lead to placement in alternative care. This issue was raised by interviewees who said,

*"We encounter enormous risks linked to networks of exploitation and trafficking...it is occurring in several areas of the territory, especially in the metropolitan areas of Uruguay and on the border. That is associated with trafficking and sexual exploitation."*

<sup>159</sup> *ibid.*

<sup>160</sup> Bureau of International Labor Affairs, US Department of Labour 2017

<sup>161</sup> Bureau of International Labor Affairs, US Department of Labour 2017

<sup>162</sup> *ibid.*

<sup>163</sup> Bureau of International Labor Affairs, US Department of Labour 2017



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*"In general, they are situations of sexual violence, or something in a situation related to sexual exploitation, plus a question related to crime.*

*"then well, there are other situations that one finds difficult to understand. For example...sexual exploitation..."*

In 2017, UNICEF Uruguay reported on sexual exploitation including children being used for 'sexual acts for remuneration, or with the promise of remuneration.'<sup>164</sup> The study went on to say this exploitation often starts for girls when they reach 10 years old but particularly involves those aged 15 – 17 years. It was understood that girls living in areas attracting tourists were at particular risk. Attention was also given to the inclusion of both girls and boys in sex shows and online pornography.<sup>165</sup>

### 9.4. Sexual orientation and gender identity

We feel it is important to recognise the possible protection needs of children and young people who identify as LGBTQI+ especially due to the possibility some families may reject their children because of it. During our research, no-one spoke of issues related to sexual orientation or gender identity when asked about reasons children become separated from parents. The law in Uruguay criminalises rape of lesbian, gay, bisexual, transgender, queer, or intersex (LGBTQI+) persons.<sup>166</sup>

## 10. The multiple dimensions of poverty

Poverty is an inter-generational as well as a multi-dimensional issue with measurements of poverty taking into account not only financial means, but other factors that contribute to well-being.<sup>167</sup> Our research identified multiple dimensions of poverty, including for many families, lack of financial resources coupled with insufficient access to government services, as being a major factor contributing to the placement of children in alternative care. One issue is the challenge of coping with poverty that can then lead to feelings of stress and anxiety. Feelings that can negatively impact family relationships and contribute to family dysfunction and violence. And ultimately, situations that can result in children losing parental care. Something interviewees also raised as being a topic that is not always given sufficient understanding or attention.

During the research we sought an understanding of situations inside the home that may affect the unity of family life. In this regard, the answers provided by young people illustrate their awareness of challenges facing families due to issues related to poverty. This includes lack of financial resources and basic needs such as food, adequate shelter and clothing. Below are some of the answers provided by young people in relation to issues of poverty (Figure 25). We note how young people provided far fewer answers (13 of 96 answers) about issues of poverty than those related to other concerns as for example, violence.

*Figure 25. What makes young people feel worried or unhappy when they are at home (as answered by children and young people)*

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<sup>164</sup> UNICEF Uruguay 2017:36

<sup>165</sup> *ibid.*

<sup>166</sup> Please see: <https://www.state.gov/reports/2023-country-reports-on-human-rights-practices/uruguay>

<sup>167</sup> Please see: [https://www.worldbank.org/en/topic/poverty/brief/multidimensional-poverty-measure#:~:text=The%20Multidimensional%20Poverty%20Measure%20\(MPM,the%20%242.15%20international%20poverty%20line](https://www.worldbank.org/en/topic/poverty/brief/multidimensional-poverty-measure#:~:text=The%20Multidimensional%20Poverty%20Measure%20(MPM,the%20%242.15%20international%20poverty%20line)

**What makes young people feel worried or unhappy when they are at home? (as answered by young people)**

*end of the month there is no money*  
*lack of job opportunities for disabled people*  
*lack of money*  
*not having food*  
*not having money*  
*not having a home*  
*not having shoes*  
*not having houses that make a child unhappy*  
*don't let them take him for a walk*  
*letting them go hungry*

Answers of young people correlate with the concerns provided by adult family members in relation to issues of poverty (Figure 26). Approximately a third of all adult family member answers related to issues of poverty (55 of 155 answers).

Figure 26. What makes families worried or happy when they are at home (as answered by adult family members)

**What makes families worried or unhappy when they are at home? (as answered by adult family members)**

*debts*  
*financial problems*  
*lack of money*  
*issues related to poor financial situation*  
*not handling finances well*  
*the economy influences in the house the state of people's mood*  
*the income is not enough*  
*lack of food*  
*not enough food*  
*that there is not access to essential needs for example food, housing, health*  
*not having work is something that generates many issues*  
*when there is no work*  
*lack of jobs*  
*lack of stable employment*  
*lack of work*  
*not having clothes to wear*  
*not having a stable place where live*  
*lack of own home*  
*lack of services from psychologists and assistants*  
*not having a good home*  
*homelessness*  
*housing conditions*  
*little of access to public health care*  
*lack of medical attention*  
*not enough medicine*  
*bad attention and service in public health*

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lack of health  
stress of having sickness  
being ill  
health problems sometimes they bring lack of control for the whole family  
lack of hygiene  
not having good health  
lack of access to a health care facility  
failure to carry out corresponding medical check-ups vaccines etc

Along with insufficient money, lack of employment opportunities is a particular concern. Not being able to afford medical costs if anyone falls sick was also cited as a significant worry along with lack of food and adequate housing.

In relation to poverty, interviewees provided a variety of responses when asked about reasons children enter alternative care. A few spoke of the legislation that prohibits separation of children from their families because of poverty. Some think it is, being upheld whilst others disagree. Many said poverty is most definitely a reason children are placed in alternative care whilst a few did not make any reference to poverty at all when asked about reasons for child-parent separation.

*"In our country there is an article in the children's code...where they are no longer separated due to poverty. When there is a situation of extreme poverty, we try to solve it in some way. The state tries to intervene so that the family does not have to separate from the children. However, all of these reasons that I spoke about... how abuse is accompanied by poverty...There is no social mobility that allows these parents to have a permanent job; a salary that allows them to support their children; a salary that provides medical care, that provides everything a child or adolescent needs."*

*"However, there are cases ...where they have nothing, where they lack the essentials..."*

*"There is a fourth factor, but for me it is a common denominator...it is always present, that is poverty."*

*"...poverty, not only as a lack of economic resources, but also more than anything, as a lack of access to opportunities and support networks. The crudest form of poverty is social isolation..."*

*"... if you have a situation of poverty, but there is also a mental health situation, one that is not well addressed by an adult who is the carer"*

*"...closely linked to situations of, not poverty, but to situations of inaccessibility to economic resources, such as for example, housing or, well everything else. Or services or food. Homelessness, for example, is one of the last causes. But it happens and is closely linked to structural poverty..."*

*"That's why today I talked about poverty. But in terms, more than anything, of the absence of opportunities and access to networks."*

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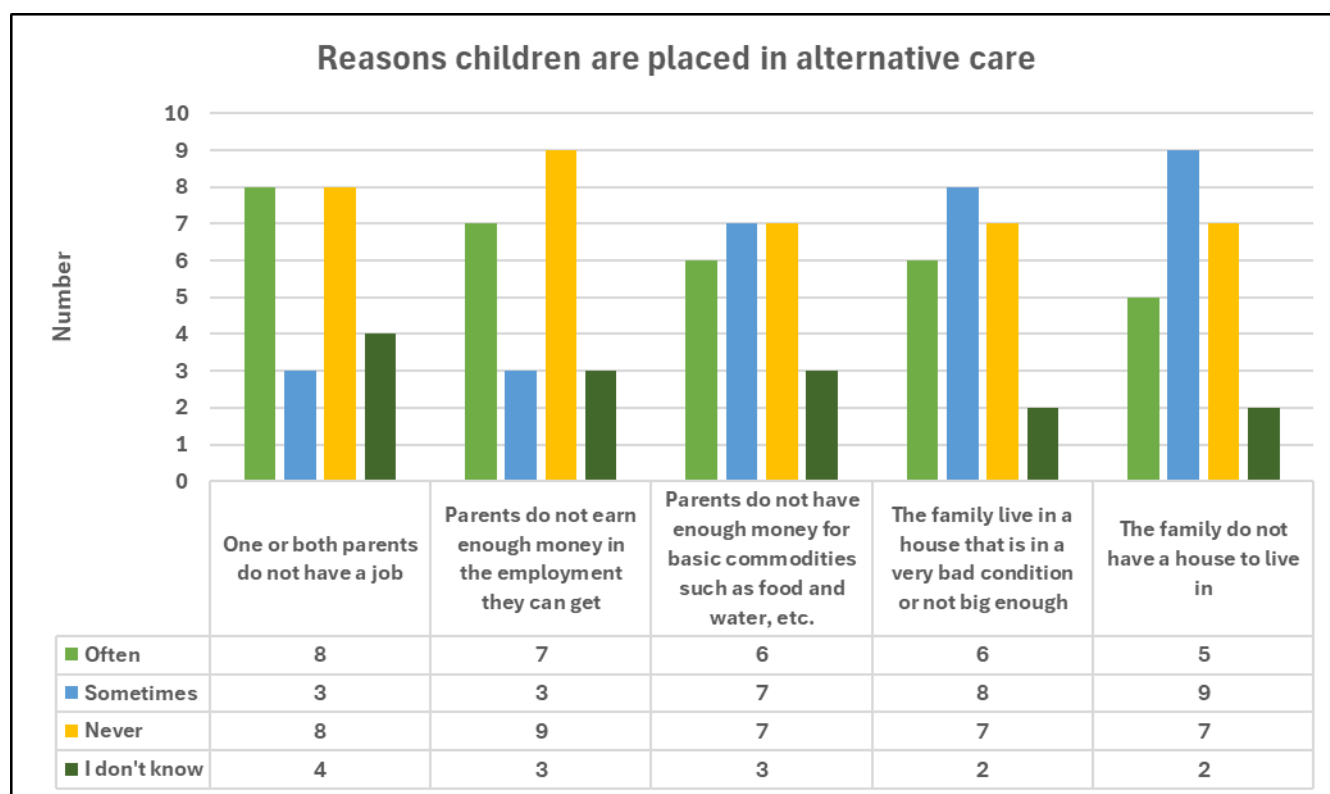
*"The other thing is to address the entire issue of poverty. But with this approach, not only looking at economic transfers to families, but material conditions are also very important. They are an essential part of ensuring care and protection..."*

*"If we look at the problem...we do see that there are fathers and mothers excluded from socio-educational processes, from job opportunities, drained because of not having a scheme to support the home while they look for an economic solution. There must be a comprehensive social policy"*

There were suggestions that children who come into the alternative care system are particularly from poorer households. One provider of alternative care said they *"do not receive situations from families that are not poor"*.

In our online survey, 23 respondents answered questions about various reasons children are separated from parents and placed in alternative care in Uruguay (Figure 27). There is also a noticeable difference in the share of respondents who think differing issues related to poverty are 'often' or 'sometimes' reasons children are lead to such situations. This indicates a mixed understanding amongst professionals as to the connection between poverty and placement of in alternative care.

Figure 27. Reasons children are separated from parents and placed in alternative care



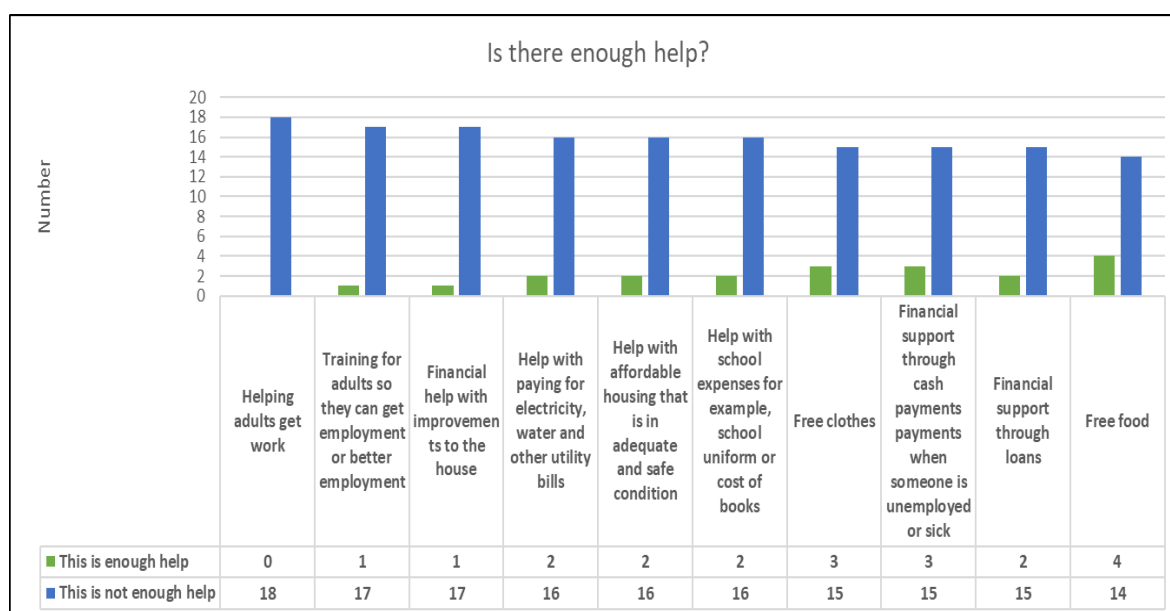
As poverty is an issue related to the use of alternative care, it is important to understand the situation of children and families living in such circumstances. As previously noted in this report, in 2023, UNICEF called attention to

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the number of children living in situations of poverty.<sup>168</sup> It was understood that 1 in 5 (est. 160,000) children and young people were living in poverty. In terms of access to support that might alleviate this situation, respondents to the online survey feel overwhelmingly that all forms of basic and specialist services and support for families who are at risk of separation is insufficient (Figure 28).

Figure 28. Is there enough help in addressing issues related to poverty?



## 11. A correlation between issues related to poverty and family dysfunction and breakdown

As indicated in this report, our research findings indicate how some children are at risk of placement in alternative care as a direct consequence of poverty and the impact this can have on the unity of families. We believe there is a correlation between the ability of some to cope with such daily challenges as providing food, adequate shelter, paying bills, keeping children in school, and finding adequately remunerated employment etc., and stress and tension within households. Furthermore, these ongoing challenges can exacerbate feelings of distress, anger, poor mental health, and for some, an inability to cope. This in turn diminishes resilience and affects the ability to maintain strong relationships in the household. Outcomes include family dysfunction, parenting ability and can result in violence.

Children, young people, adult family members and interviewees, all wrote and spoke about the lack of financial resources and access to support services being a major challenge impacting family life. Adult family members who participated in our research workshops highlighted the struggles faced by families on a daily basis. Some interviewees also made a direct link between the stress caused by conditions related to poverty with family dysfunction and violence in the home.

<sup>168</sup> UNICEF Uruguay 2023

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*In reality, poverty. I always say that any problem is exacerbated by poverty. So what poverty does precisely, is make it more difficult to resolve or find solutions to problems and aggravates any of the situations I mentioned. Including other complex situations such as disability. That is, poverty aggravates situations of disability. Poverty aggravates situations of domestic violence. Poverty also aggravates other problems."*

*"that's why I mentioned it with poverty...And when we talk or talk about the causes such as addictions, domestic violence, etc...."*

*"Sometimes trying to go as far as what we see in general from all these years of work, is that the structure of poverty is shared, there is a structure of material poverty that is often sustained in several generations, there is also a consecutive all these reasons for admission [into alternative care], different forms of violence, that I just mentioned."*

*"The multidimensional [aspect], that is, we cannot see a person and placing the entire intervention on a single issue as for example, abuse. Years ago I worked with a family... because there was a report of sexual abuse...It was a family with a level of vulnerability, of all kinds, because it was economic, but of all kinds. Working on sexual abuse in that family when they didn't even have food was impossible."*

Findings from previous studies also illustrate linkages between poverty, violence and family breakdown in other parts of the world.<sup>169</sup> Our analysis of all the evidence we collated suggest issues related to poverty and insufficient access to basic and specialist services are contributing factors to children being separated from their parents and placed in alternative care.

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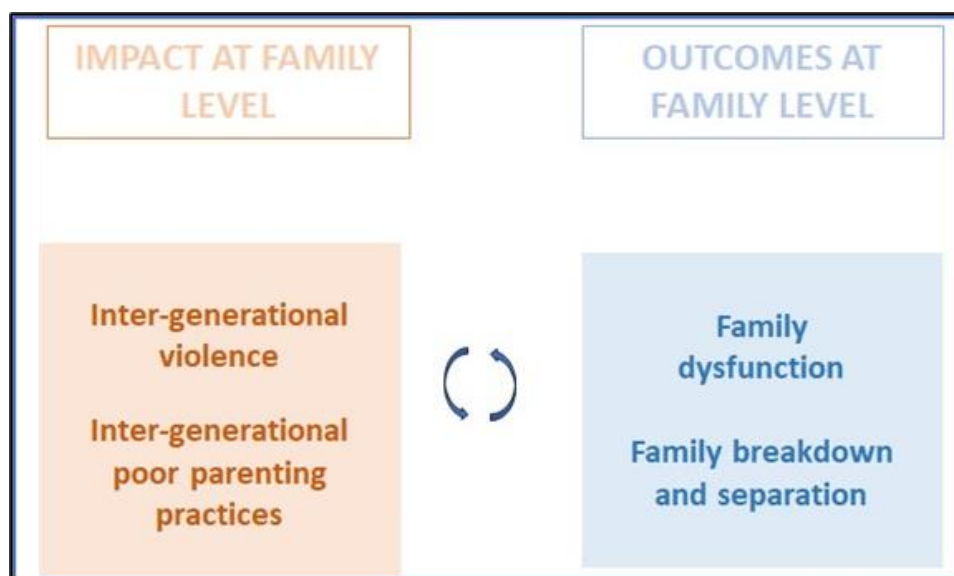
<sup>169</sup> See for example: Babatope et al. 2022; Berger 2005; Lau et al. 1999; Lodder et al. 2020; Malley-Morrison 2004



## 12. The phenomenon of inter-generational violence and inter-generational poor parenting capacity

It is evident from the findings above that multiple and interconnected factors contribute to the circumstances within the family home that may lead to children's placement in alternative care. When examining these circumstances further, a specific theme has emerged in relation to the perpetuation of dysfunction and breakdown within, and separation of, families. This is the inter-generational aspect of violence, inter-generational poor parenting capacity, and the connection between the two (Figure 29).

Figure 29. Inter-generational violence and poor parenting ability and family separation



Some interviewees identified the lack of parenting ability and the presence of violence in the home, as an inter-generational phenomena. In this manner, whilst discussing parenting skills and issues of positive bonding and attachment, they referred to the negative childhood experiences of parents and how this subsequently impacted their ability to parent well. In this way, impaired relationships between children and their parents, violence, and family dysfunction is being repeated from generation to generation. Interviewees said:

*"...for causes for violence against children, one has to go very very far back. It is part of a form of relationship that has been transmitted from generation to generation from adults to children."*

*In other words, educating a child means having to hit him to learn, so that is something that has been transmitted from generation to generation.*

*"...three reasons [for placement in alternative care]. They are domestic violence or abuse in situations of violence towards children, within the family, with all forms of violence, including neglect; ...Those are the three that are repeated the most. Always domestic violence is leading and violence, violence between generations."*

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*"There is an inter-generational measure. That is, you sometimes you find it in three generations. In the genealogical study of a violation of a child. Perhaps his mother experienced it in the same way and her grandmother. Sometimes in the maternal line and also great-grandmother. It is very important to have that inter-generational perspective of what is happening to us. Precisely to identify these reasons for admission [into alternative care] that are so hard to reverse. Clearly because it is normalised. Violence is normalised in that way of relating. And this is very difficult to reverse...so that is why we have had those variants more in an extended family. Or even what we have seen in recent years is the sibling line, like the line of older brothers. Yes adults who manage to leave the family clan, that family clan that had been perpetrating generation after generation..."*

*"Generally it [the abuser] can be a mother, it can be a father, sometimes it can be someone from your extended family. Because we also have those coming into the system that was not because of the mother or father, but was a grandfather, a grandmother or an aunt. But a violation that happens again precisely because of the inter-generational issue when this [abuse] is normalised there."*

*"For example, sexual abuse, sexual exploitation, other forms of violence are the harshest. It's hard to understand them or say why that happens. I think that behind all of that there is always this question of how the adult world sees children. And in some way it continues to happen, even though we continue working to eliminate it, because of the use of violence in parenting."*

*"some of them [parents] remain without speaking [to the social worker] because there is also an activation of the trauma of what might also have happened to them.... the consideration of inter-generational trauma..."*

*"Some...manage to leave the family, the family that had been perpetrating [violence] generation after generation..."*

*"sometimes we find that there was sexual abuse by the partner, to the mother. But perhaps the same thing had happened to her, so she had made it invisible and it comes out of three generations of sexual exploitation and in turn so much damage produced a level of disability or deep depression or a mental health disorder or is mixed with a situation of addiction, and if she does not choose a partner well, he will be one who mistreats her".*

Other studies we examined during the desk review also confirm how both violence can be learnt behaviours and deficiencies in parenting being passed down from one generation to another<sup>170</sup> For example, Conteras and del Carmen Cano noted how, through 'observation, learning and imitation'<sup>171</sup> of adults, and/or being a recipient of violence and neglect, there is a risk that children grow up to also display negative behaviours.<sup>172</sup> In this respect, and as stated previously in this report, interviewees have a concern that children in Uruguay continue to experience and witness violence in the family. They also acknowledge how such adverse childhood

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<sup>170</sup> Moylan et al. 2010

<sup>171</sup> Conteras & del Carmen Cano 2016:44

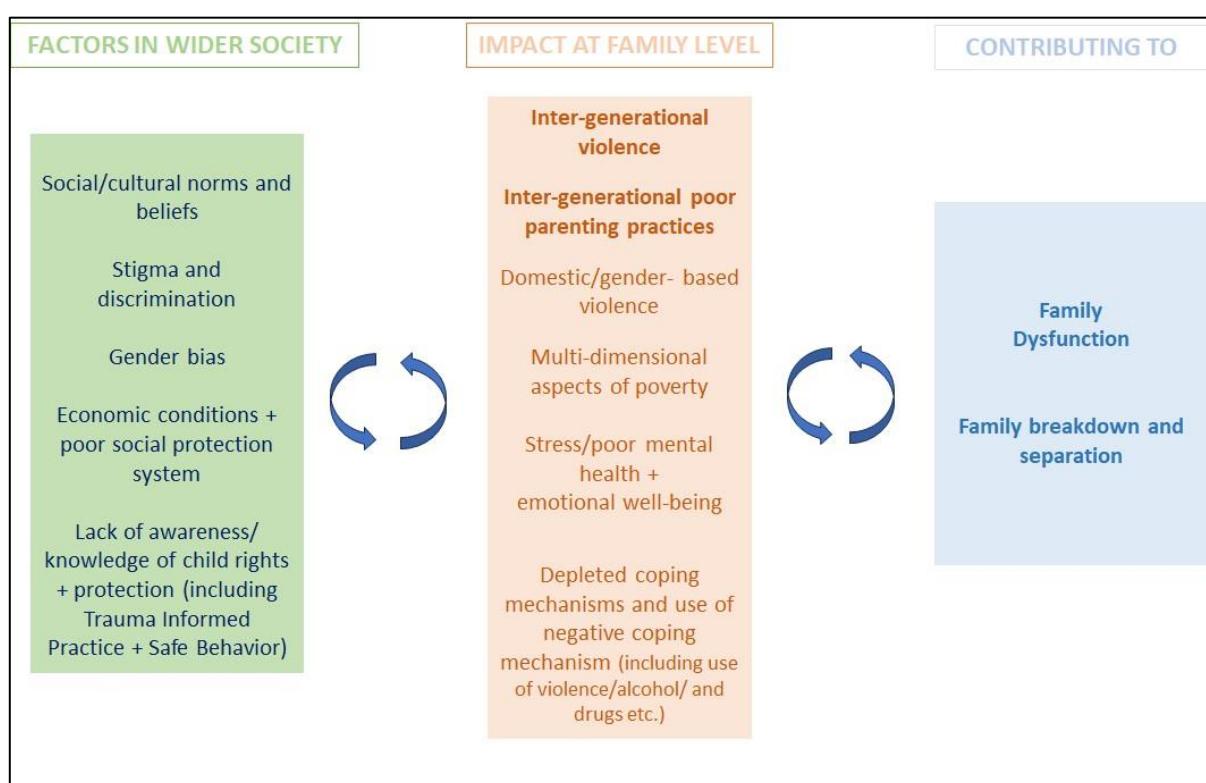
<sup>172</sup> Conteras & del Carmen Cano 2016; Bevans & Higgins 2002

experiences (ACES),<sup>173</sup> can contribute to learned behaviour that may be repeated both in childhood and in later life when also becoming parents. This, they believe, is contributing to the cycle of violence and breakdown within families in Uruguay and children continuing to be separated from parental care as a consequence.

## 13. Factors in the wider society that contribute to vulnerability within families

Utilising a socio-ecological model to inform the research framework included consideration of factors in the wider society that can contribute to inter-generational violence, impacts affecting parenting ability, and family breakdown and separation (Figure 30). This section explores some of these factors in more detail.

Figure 30. Factors in the wider society contributing to vulnerability within families



### 13.1. Domestic and gender based violence

Issues related to living in a patriarchal society and how this connects to domestic and gender-based violence and the impact this can have on family unity ,as well as raising protection concerns, were raised during the collection of research data. UNICEF has defined patriarchy as a 'social system in which men hold the greatest power, leadership roles, privilege, moral authority and access to resources and land, including in the family.'<sup>174</sup>

<sup>173</sup> SOS Children's Villages International and CELCIS, Centre for Excellence for Children's Care and Protection, University of Strathclyde; SOS Children's Villages International 2022

<sup>174</sup> Please see: <https://www.unicef.org/rosa/media/1761/file/Genderglossarytermsandconcepts.pdf>

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Patriarchy has also been described as a system in which 'attributes seen as "feminine" or pertaining to women are undervalued, while attributes regarded as "masculine" or pertaining to men are privileged.'<sup>175</sup>

A small number of young people who participated in the research workshops wrote about violence and discord between parents. And as previously reported in Figure 15, adult family members also acknowledged the issue of domestic abuse. They wrote about 'domestic violence', 'gender-based violence', 'when you live with violence, abuse that is physical and psychological', 'violence committed by males', 'lots of violence physical violence' and 'lack of safety' in the home.

When asked why violence happens, one interviewee said *"Why does violence happen? Violence occurs throughout history. Looking at patriarchy, it shows us that there are some people who are violent and exert violence on others. All this...implies that...patterns of behaviour and violence is naturalized, even as part of upbringing. Well that's what we have to work out, to deconstruct."*

A number of interviewees also spoke about concerns related to domestic and gender-based violence when asked about reasons children are at risk of losing parental care.

*"always leading [to placement in alternative care], at the top, is domestic violence."*

*"...but you know there is a situation of gender violence. You work with the woman. How are the children doing? How are they able to take care of those children?"*

*"...for example, acts of domestic violence are confirmed that cause [the referral of] the child to an institution, under a protection order."*

One interviewee noted how sometimes in situations of gender-based and domestic violence it is not possible for a parent to maintain or improve their situation to a point that children can remain with them: *"sometimes it's not that people don't want to [improve their situation], they can't."*

In the online survey respondents were asked whether violence between adult family members a reason for child-parent separation and placement in care. A significant percentage, over two thirds of all respondents (16), think this happens 'often' and 6 think it happens 'sometimes' (Figure 31).

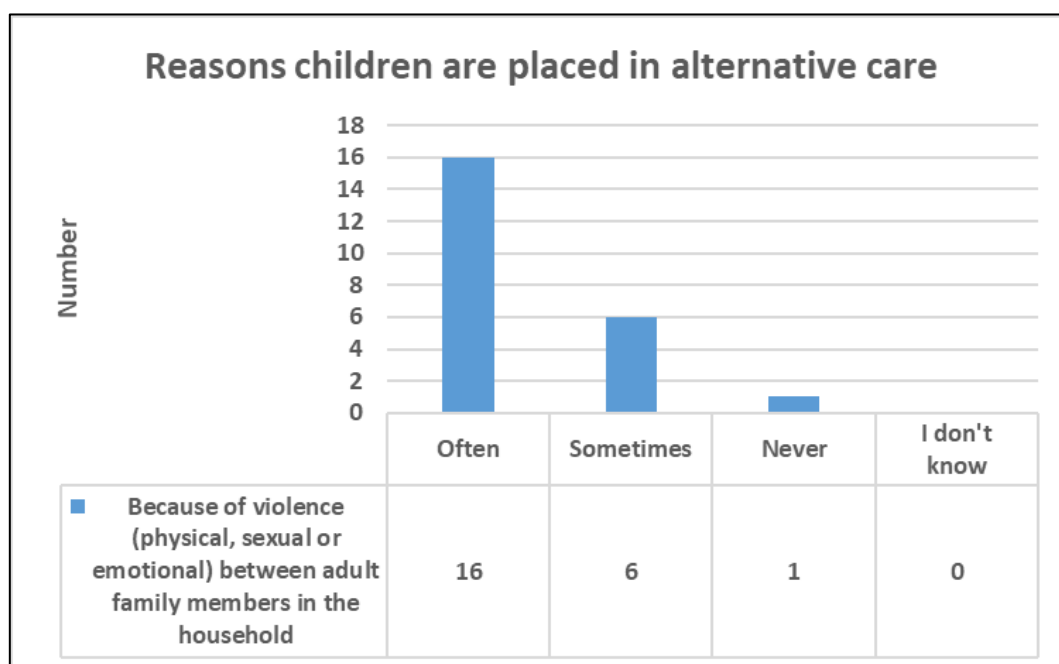
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<sup>175</sup> Please see: <https://www.sciencedirect.com/topics/social-sciences/patriarchy#:~:text=Patriarchy%20is%20a%20system%20of,pertaining%20to%20men%20are%20privileged.>

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Figure 31. Are children being separated from parental care and placed in alternative care because of violence between adult family members in the household?



All the information above suggests domestic violence contributes to children losing parental care in Uruguay. However, when asked about the support available through access to emergency shelters for those affected by domestic and gender based violence, overwhelmingly respondents said, 'there is not enough help.' (Table 8).

Table 8. Is there enough help?

How much support is available to families	This is enough help	This is not enough help
Access to emergency shelters for adults who are victims of domestic violence and abuse	2	16

There is a significant amount of published information on the topic of domestic and gender-based violence in Uruguay and an indication of steps are being taken by the Government to combat such violations. This includes improvements to legislation and protection strategies and frameworks. Steps being taken incorporate criminalisation of spousal and domestic or intimate partner rape and other forms of violence. It has been noted however, that enforcement of legislation and strategies still requires further strengthening.<sup>176</sup>

In terms of prevalence, a 2020 report on violence against females (including girls aged 15-17 years old) with disabilities also provided data on all women who had been affected by gender-based violence.<sup>177</sup> In 2019, within what is defined as the 'private sphere' which includes within the family home, 37% of females with disabilities and 55.4% of females without disabilities had experienced gender-based violence at some point in their lives.

<sup>176</sup> Please see: <https://www.state.gov/reports/2023-country-reports-on-human-rights-practices/uruguay>

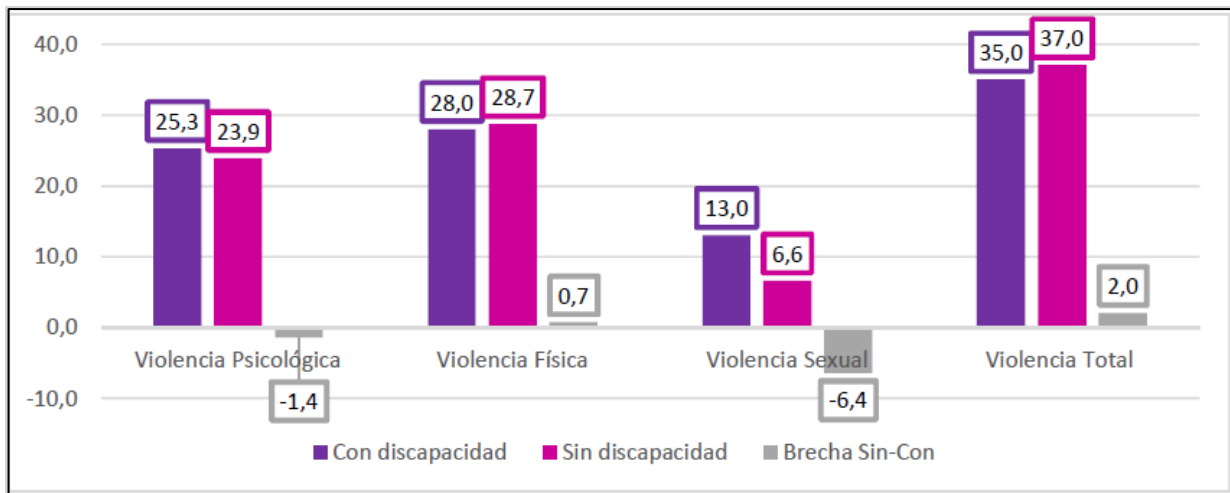
<sup>177</sup> Solari 2020

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<sup>178</sup> The authors ask that consideration be given to the lower visibility of women with disabilities be taken into account when assessing the data. Figure 32 is extracted from the report and illustrates data from 2019 indicating the different forms of gender-based violence experienced by women during childhood. This includes psychological violence (violencia psicológica), physical violence (violencia física), and sexual violence (violencia sexual).<sup>179</sup>

Figure 32. Percentage of women with and without disability that experienced gender-based violence in the family during childhood, by type of violence. Total country: 2019



(Source: Solari 2020:41)

### 13.2. Access to education

Although data published by the INAU indicates children are being placed into residential education centres as a result of entering the child protection system,<sup>180</sup> no interviewees mentioned access to education as being an issue related to the placement of children in alternative care. Indeed, several said they thought the country has a very good education system and spoke of there being almost 100% enrolment in primary education.

This understanding is confirmed by results of the online survey in which almost all respondents agree that different issues related to access to education is 'never' a reason for placement in alternative care, including for children with disabilities, as opposed the small number that think this is 'often' or 'sometimes' a causality (Figure 33). The exception being almost half of all 23 respondents (11) believing children not attending school because their parents do not think education is important is 'sometimes' a reason.

<sup>178</sup> Solari 2020:37

<sup>179</sup> Solari 2020

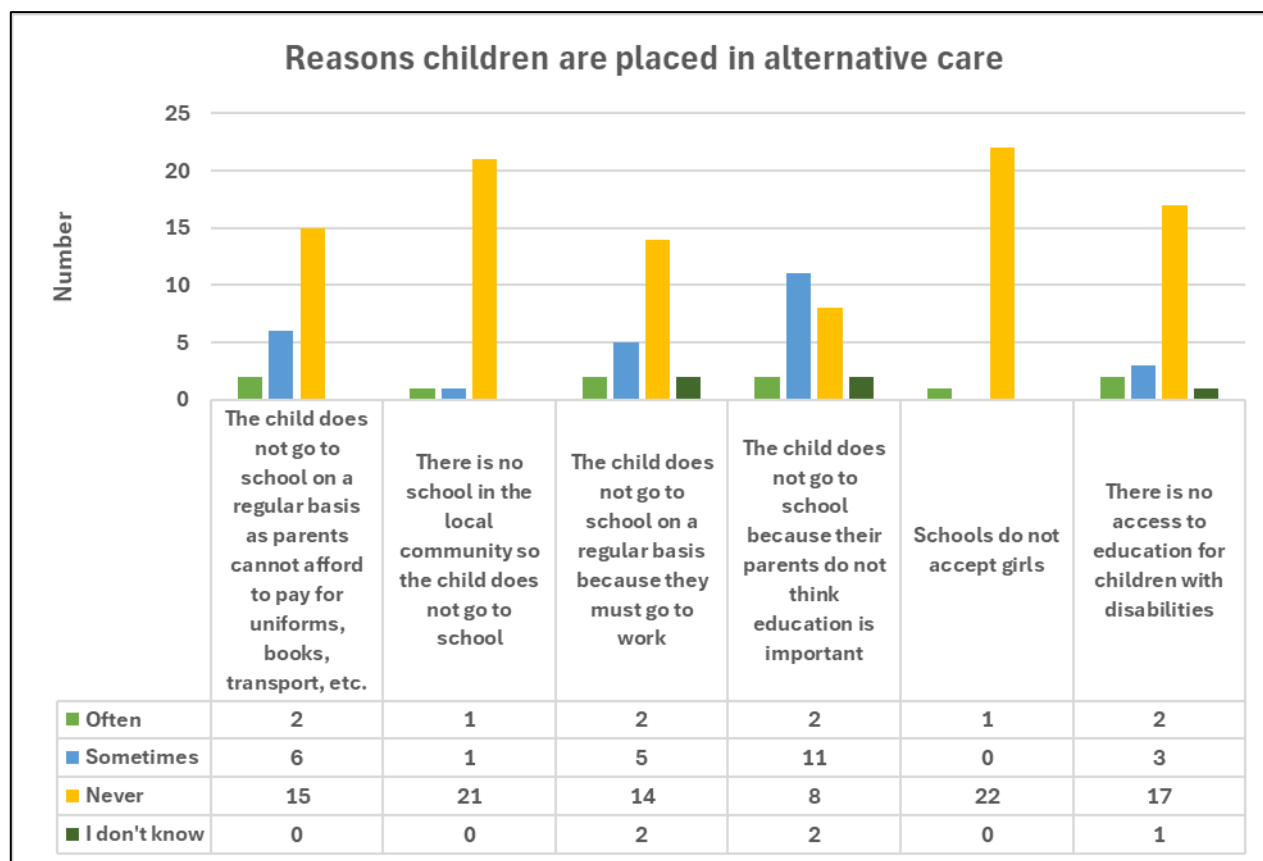
<sup>180</sup> Please see: [https://www.inau.gub.uy/content\\_page/item/3792](https://www.inau.gub.uy/content_page/item/3792)



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Figure 33. Reasons children are placed in alternative care: education



According to data published by the INAU and UNICEF, in 2019, 3% of the children in alternative care were there for education purposes.<sup>181</sup> No further explanation is provided as to what 'education purposes' included.

### 13.3. Social and cultural norms and practices and lack of awareness of child rights and protection mechanisms

The subject of how negative social and cultural norms and practices can contribute to concerns about protection and other situations that lead to the placement of children in alternative care has been previously noted in this report. This includes stigma and discrimination against persons with disabilities as well as norms in society that allow for gender inequalities and the perpetuation of domestic and gender based violence.

<sup>181</sup> Institute del Nino y Adolescente del Uruguay and UNICEF 2021:79

## 14. Decision-making and the national child protection system

We consider the decision to place a child in alternative care to be influenced by two particular factors: the circumstances they are living in, and the decision making of those with responsibility for children, their safeguarding, and judgements about placement in alternative care. To this end, the research framework for this study included a focus on decision makers and factors influencing their decision making. Most especially consideration has been given to decision making within the context of a national child protection system (please see Figure 2).

Gatekeeping mechanisms and alternative care should be an integral component of a national child protection system. An effective system requires a holistic view of childhood, mitigation of the multi-sectoral factors placing children at risk and families in difficulty. It also needs effective partnership working between the State, families, communities, and NGOs amongst others, to build a protective environment that prevents violence and placement in alternative care. The laws, strategies and policies that mandate for the operating of a national child protection system must contain everything needed to protect the rights of children with prevention of unnecessary child-parents separation amongst primary aims. Likewise, effective functioning of Ministries and other bodies responsible for oversight and delivery of the system should place safeguarding alongside prevention of separation as a high priority.

We have taken these important objectives and principles into account when developing our research framework and reviewing the child protection system in Uruguay. We have applied a research focus that seeks evidence and understanding of how 'gatekeeping'<sup>182</sup> works in the country. The information provided in this section of the report is predominately the result of our desk review in relation to the national child protection system and alternative care provision in Uruguay triangulated with information provided during interviews.

### 14.1. The Normative Framework

In line with the Convention on the Rights of the Child, national laws, bylaws and regulations, policies and statutory guidance should guarantee children's right to protection from all forms of violence, abuse, neglect, and exploitation. They should reinforce the primary responsibility of parents for the care and protection of children, obligate the State to support families, and allow for intervention if and when necessary to support and protect a child.

#### International conventions and treaties

Table 9 lists a number of international conventions and treaties that have been acceded to, or ratified, or signed by the Government of Uruguay.

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<sup>182</sup> Csaky and Gale 2015

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Table 9. International Conventions ratified by the Government of Uruguay

Convention	Year signed/ ratified/ Accession
International Covenant on Civil and Political Rights	1967
Optional Protocol to International Covenant on Civil and Political Rights	1967
International Convention on all forms of Racial Discrimination	1967
International Covenant on Economic, Social and Cultural Rights	1967
Abolition of Forced Labour Convention 1975 (ILO 105)	1968
Convention on the Status of Refugees	1970
ILO Convention on employment age (No.138)	1977
Convention against Torture and Other Cruel Inhuman or Degrading Treatment or Punishment	1985
Second Optional Protocol to the International Covenant on Civil and Political Rights, aiming at the abolition of the death penalty	1990
United Nations Convention on the Rights of the Child (UNCRC)	1990
Forced Labour Convention (ILO 29)	1995
Convention for the Suppression of the Traffic in Persons and of the Exploitation of the Prostitution of Others	1995
Convention on the Elimination of All Forms of Discrimination against Women	1981
Optional Protocol to the Convention on the Rights of the Child on the involvement of children in armed conflict	2000
Optional Protocol to the Convention on the Rights of the Child on the sale of children child prostitution and child pornography	2000
Optional Protocol of the Convention against Torture	2004
International Convention on the Protection of the Rights of all Migrant Workers and Members of their Family	2001
ILO Convention on the worst forms of child labour (No.182)	2001
Convention on the Rights of Persons with Disabilities	2007

### A National normative framework for child protection and alternative care

Decision making is influenced by the national legislation and policies of a country. There is no singular comprehensive Children's Act in current legislation. Provisions of particular relevance to children's rights and child protection are found throughout various Codes, Acts and Decrees. These include, but are by no means limited to, the legislation and policies listed in Table 10.

Table 10. A national normative framework for child protection and alternative care in Uruguay

Legislation	Year
Penal Code	1933
First Code of Children	1934
Civil Code No 16.603	1994
Ley No. 15.977 for creation the National Institute of Minors (to succeed the Children's Council and fixing its duties)	1988
Ley No. 17.154 on Domestic Violence	2002
The Constitution of 1967 and amendments	2004
Law No. 17.823 Code of Children and Adolescents	2004
Law No. 17.815 Sexual Violence Against Children, Adolescents, or Disabled Persons	2004
Law No.18.250 on Migration	2008
Law No. 18.561 of 2009 on Sexual Harassment	2009
Decree No.394/009 of 2009 regulating the Migration Act	2009
Law No. 19.293 Criminal Procedure Code	2017

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Law No.19.580 Law On Violence against Women Based on Gender. Modification of the Provisions of the Civil Code And The Criminal Code. Repeal Of Arts. 24 To 29 Of Law 17,514	2018
INAU Guidelines for the Protection of Children, Girls, Adolescents, their Families and Work Teams in Situations of Urban Violence	2019
Code of the Childhood and Adolescence (CNA) modification of Law 19,747	2019
Procedures Manual for 24-Hour System of Protection	2019
Law No. 17.815 of Violence sexual against children, teenagers or incapable persons	
Ley N° 19.903 Creation of a National Campaign for Awareness and Prevention of Domestic Violence Against Children and Adolescents	2020
Law N° 19,979 Creation of the National Campaign for Awareness And Prevention of Adolescent Suicide	2021
Resolution N°0895/2024 Guidance on Mental Health For Adolescents	2024
Resolution N°900/2024 Regulations: Part-Time Comprehensive Care	2024
INAU Guidance on Preparing Reports for the Judiciary and the route for processing	undated
INAU Guidance on Participation of Children and Adolescents in the Administrative Process at INAU	undated

Those interviewees who spoke of laws and regulations identified their belief in there being a fit for purpose national legislative framework. Particularly as it refers to protection of children and the need for state intervention when violations are being committed.

*"In general, Uruguay, with a strong regulatory component and respect for the different conventions, has always established a position that is quite aligned, first with the convention [UNCRC], and then, with the[UN] guidelines for alternative care. We try to respect the principles. At the declarative level, it will always be said that the cause of separation of a child or adolescent from a family is the extreme situations as set the guidelines."*

*"In the case of Uruguay, there is a law, in addition to the entire protection system, not only through international conventions for the protection of children, from the convention downwards, there are laws that regulate this situation."*

Below is a short precis of just three laws in Uruguay that hold articles relevant to child protection.

### The Constitution of Uruguay

The Constitution of Uruguay establishes the rights of its citizens and includes articles that are specific to children. Article 40 recognises the family as the foundation of society and the State's responsibility to ensure the moral and material stability needed to create the best upbringing of children. It also requires national legislation to ensure the necessary measures to protect children and adolescents (defined as 13 to 18 year olds) from physical, intellectual or moral abandonment from parents or guardians, as well as against exploitation and abuse (Article 41). Parents have the same duties towards children born out of wedlock (Article 42).

### Act No. 15.977 for the creation of the National Institute of Children and Adolescents(INAU) (to succeed the Children's Council and fixing its duties)(1988)

#### Abstract

Act No. 15.977 established the founding and responsibilities of the Institute del Nino y Adolescente of Uruguay (INAU). The Law requires the Institute to undertake the following duties:

- to assist and protect from conception to the age of majority minors who are 'morally or materially' abandoned

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- to carry out all those activities having the objective of preventing the material or moral abandonment and antisocial conduct of minors
- to contribute, in conjunction with other specialized organizations, to the protection of disabled children even when they have not been abandoned
- to co-operate with parents, guardians, and educators in bringing about the material, intellectual, and moral improvement of minors
- to control the working conditions of minors without infringing upon the competency of the Executive Power
- to execute security measures arranged by competent authorities to achieve the rehabilitation and education of transgressing minors
- to support the activities of private nonprofit institutions with legal capacity that pursue similar objectives.

Further provisions of the Act sets forth additional resources, powers, and administrative powers and duties of the Institute.

### Code of Children and Adolescents (2004)

The Code of Children and Adolescents is important as it has the aim of protecting all the rights of children and promoting and supporting their development. It declares that every child and adolescent has the right to special protection measures as required for their development which should be upheld by their family, society and the State. Parents or guardians, or any person in charge of a child or adolescent's care, treatment, education, or supervision, are prohibited from using physical punishment or any type of humiliating treatment as a form of correction or discipline. The law requires the INAU, in coordination with other State institutions and civil society, to implement awareness and education programmes including the promotion of positive, non-violent forms of discipline and prohibition of physical punishment and other forms of humiliating treatment. The Code requires the government to adopt social policies that promote the development and protection of children including, a range of specialist programmes and services.

In terms of protection, the State has an obligation to provide special protection to children and adolescents with respect to any form of:

- Abandonment, sexual abuse or exploitation of prostitution.
- Discriminatory treatment, harassment, segregation or exclusion in places of study, leisure or work.
- Economic exploitation or any type of work harmful to a child's health, education or for their physical, spiritual or moral development.
- Cruel, inhuman or degrading treatment.
- Encouragement to consume tobacco, alcohol, inhalants and drugs.
- Situations that put a child's life at risk or incite violence, such as the use and trade of weapons.
- Situations that endanger children's security, such as detentions and unlawful transfers.
- Situations that put children's identity in danger, such as illegitimate adoptions and sales.
- Failure the parents or responsible adult to provide food, take care of health and ensure their education.

Article 12. of the Code provides the right for a child to family life and to live and grow up with their family. Separation of children from their family should not be for economic reasons. The process of separating a child from their family can only be through an official administrative and judicial process and must be in their best interest. If a child or adolescent does not have a family, they have the right to grow up in extended family. Only if life in a family is not possible should admission to a state or private residential institution be considered. An attempt should be made to ensure that any stay in alternative care is temporary.

The Code includes information regarding processes of custody and guardianship and the provision of alternative care. It outlines the responsibility of the judiciary in terms of protection, removal from parental care and relevant procedures connected to such processes including provision of family support to address adverse situations, prevent separation and placement in alternative care, family reunification and adoption. The Law also covers issues related to detention, child work and child labour.

#### 14.2. Structures for child protection system delivery, coordination and oversight

##### **The Institute for Children and Adolescents of Uruguay**

The Institute for Children and Adolescents of Uruguay (INAU) has overall responsibility for Uruguay's child protection system, delivered

The INAU has a responsibility to:

- Promote, protect, and care for children, adolescents, and their families, using all available resources
- Implement policies through various programmes, projects, and social intervention methods, both public and private, to strengthen families with children and adolescents
- Ensures proper admission, care, referral, and discharge of children and adolescents, placing them into various homes, programme, projects, and alternative care whilst taking listening to their wishes
- Aims to provide equal opportunities for all children and adolescents to access social resources, to ensure autonomous and socially integrated persons, and prioritizing the most vulnerable.
- Supports adolescents who reach adulthood while under the care of the INAU, guiding them towards independent living. Individuals with disabilities reaching adulthood under INAU's care may continue receiving its protection if they cannot transition to adult services
- Periodically inspects private institutions where children and adolescents are placed, as well as private, community, or non-governmental institutions involved in its programmes. Inspections are conducted by multidisciplinary teams to assess the conditions and treatment of children and adolescents, ensuring their rights are upheld
- Makes observations and report rights violations to the appropriate authorities<sup>183</sup>.

The Code of Children and Adolescents requires the INAU to provide alternative care for children and associated procedures including assessment of a child's situation to be then handed over for judicial decisions whether to order the use of such placement for a child considered to be at risk of harm or requiring some other intervention. It is then the responsibility of the INAU to oversee the implementation of such decisions. Alternative care provision, in the form of family-based and residential care, and other services are either directly managed by the INAU or contracted out to non-governmental providers. This includes a range of family support programmes (within their family, extended family, or a family that provides necessary guarantees for development)<sup>184</sup> and guidance and support supervised by teams within the INAU.<sup>185</sup> According to the INAU website, a range of services are available including those are provided through early childhood centers, child and family centres, children's clubs, youth clubs, and youth vocational training centres.<sup>186</sup> An example of such services also includes Child and Family Care Centers or CAIF, is an intersectoral public policy initiative involving the state, civil society organizations, and municipal governments to protect and promote the rights of children from conception to age

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<sup>183</sup> Code of Children and Adolescents, 2004, Article 68,

<sup>184</sup> Please see: <https://www.inau.gub.uy>

<sup>185</sup> Code of Children and Adolescents, 2004, Article 120-5

<sup>186</sup> Please see: <https://www.inau.gub.uy/primer-a-infancia>



3, prioritizing those from impoverished or socially vulnerable families through the implementation of early childhood socio-educational centers<sup>187</sup>. The INAU is also responsible for adoption services and respite care.

The Institute is also responsible for the Information System for Children (SIPI).<sup>188</sup> This includes the collection of relevant data to monitor the situation of children and families within the Institute's services as well as inform policies and strategic direction and content of the programmes. Further information about the INAU, its structure and functions can be found on the Institute's website.<sup>189</sup>

### 14.3. Responsibility of other Stakeholders

#### The responsibility of other Ministries and official bodies

##### Office of the Prosecutor General

The Office of the Prosecutor General is responsible for taking forward criminal proceedings in cases where a child has suffered violence.<sup>190</sup> If cases show someone has committed a crime, the Prosecutor's Office should act in accordance with the Code of Criminal Procedure.

##### The role of police

A number of interviewees spoke about the role of the police, most especially in terms of sometimes being the first service to receive a report of a child protection concern and their role in investigating cases.

*"The police can obviously investigate, but they can immediately inform whoever needs to inform, if there are children or adolescents involved"*

*"The police can intervene because they can stop the incident, they can arrest the aggressor, for example."*

*The police often receive the complaint... So, in this protection process, which is provided for in the Children's Code, the police play an important role. Many times they are supporting the judge for compliance to a measure. For example, if you have to arrange for a child to be hospitalized for protection, sometimes you have to issue a search warrant and go with the police to remove a child from that place, arrange for the mother to be taken to a health provider, and do the assessment."*

One interviewee did raise a concern about the attitude and of, and lack of sensitivity within, the police force.

*"There are police stations specialized in gender-based violence and there is training. The fact that there is training does not mean that there is sensitization in the force. They are two different things. Training and sensitivity is another thing. There are training processes, but police intervention is light years away. I won't even tell you what light years are missing..."*

<sup>187</sup> <https://caif.inau.gub.uy/plan-caif/que-hacen-los-centros-caif>

<sup>188</sup> Please see: <https://www.inau.gub.uy/institucional/sistemas-institucionales>

<sup>189</sup> Please see: <https://www.inau.gub.uy/institucional/normativa/item/29-manual-de-funciones>

<sup>190</sup> Code of Children and Adolescents, 2004, Article 120-2

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We were not provided with any further information about the manner in which they undertake this role. It is clear however, that the police play a key role as first responders to children who are victims of violence, those in a street situation, and responding to cases of domestic violence

#### The role of non-governmental organisations

NGOs and private organisations, play a significant role in the provision of alternative care and family support services. Information gathered during interviews suggest providers of alternative care have a good understanding of the child protection case management process that must be followed before a child receives alternative care services. When asked if they thought alternative care providers are accepting children directly relinquished into their care by parents they said no and in cases, where a parent took such steps, they were aware of the need to immediately report this to the INAU and for a judicial process.

*"No-one can receive a child unless it comes with a judge's resolution and with INAU's disposition."*

*"If that happens, you must immediately report it to the justice system through the governing body or through the police, or directly by going to the defense office to instigate a trial."*

Data issued by the INAU in January 2024 illustrates how non-governmental organisations are the largest providers of alternative care services as administered through agreements with INAU.<sup>191</sup> The data illustrates of a total of 6,477 children in alternative care, 4,859 were in receipt of services provided by non-governmental organisations (Table 11).

Table 11. Number of children in alternative care as provided by government and non-governmental providers (January 2024)

Children and adolescents in the special protection system by form of care	Number of children and adolescents in alternative care directly provided by INAU	Number of children and adolescents in alternative care provided through agreements with INAU
<b>Placed in extended family</b>		
In extended family (or in those who are not blood relatives) or in extended family care or by blood ties with support (Children's Club, etc.)	0	2,605
<b>Placed in another family</b>	93	419
<b>Residential care</b>		
In 24-hour comprehensive care centres	936	582
In short-stay centres	256	0
In family care and strengthening centres (CAFF)	257	324
In residences for adolescent mothers	33	14
In residences for disability care	43	596
In residences for mental health care	0	215

<sup>191</sup> Please see: <https://www.inau.gub.uy/estudios-de-poblacion-y-proyectos/item/3762-ano-2024>

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In residences for homeless situations	0	52
In residences for situations of addiction	0	18
In residences for situations of violence	0	127
<b>Total in residential care</b>	<b>1,525</b>	<b>1,928</b>
<b>Total in alternative care placements</b>	<b>1,618</b>	<b>4,859</b>

(Source: adapted from <https://www.inau.gub.uy/estudios-de-poblacion-y-proyectos/item/3762-ano-2024>)

We believe that government funding of residential institutions raises a concern as this is one way in which such provision is usually perpetuated. We received information that the Government pays approximately USD 1,467 per child per month to alternative care providers. This sum is the same wherever the child is placed e.g. in residential or kinship care or towards reintegration costs. However, due to this being an insufficient amount to cover all the residential care costs, they do think this does not promote the ongoing use of institutions.

When asked about active recruitment by alternative care providers to bring children into their facilities, in the online survey 16 of 22 respondents think providers of residential care 'never' persuade parents to relinquish their children and only 2 think this happens 'sometimes' (Table 12).

Table 12. Reasons children are placed in alternative care: the persuasion of care providers

Reasons children are placed in alternative care	Often	Sometimes	Never	I don't know
Because someone from an alternative care facility has persuaded the parents that it would be best to put their child in that facility	1	2	16	3

Interviewees were asked about coordination between different bodies and organisations responsible for child protection. Overall, their answers suggest that there is good cooperation.

*"Yes, there is coordination. Among those that let's see, when they are not territorial, there is coordination. I think that coordination has been quite operational since a while ago. I think that sometimes you have to open the breadth to be a little to be a little more creative, and not always focus on the same thing."*

*"It depends. I would say that it varies greatly depending on the departments, the departmental directorates of INAU. Sometimes it depends a lot on the luck you have with the supervisor you have at the INAU."*

*"That is very variable. In general...the truth is that we do coordinate a lot."*

*"... but in general things are coordinated quite well, especially between the governing body and in this case, for example, we who are in an agreement as executors of public policy, we have a lot of dialogue with the INAU, beyond our disagreements. Suddenly, sometimes it also becomes more complex with the judiciary, because access to the judge is not so easy everywhere. But in general I think there is coordination."*

*"There are coordination efforts, but much more is said than materialises."*

#### 14.4. Provision of alternative care

Interviewees explained how the law offers protection measures that can with offer support to children and families or through provision of alternative care.

*"but in Uruguay...we achieve protection without institutionalisation... the child's code, allows for...a measure of protection without institutionalisation..."*

*"The protection measure in Uruguay allows for institutionalisation or not"*

According to legislation and policies in Uruguay, the provision of alternative care (also referred to as 24-hour care) should be a measure of protection in response to severe threats to a child's life or physical integrity. If a judge decides it is not possible to keep the child or young person with their parents (or legal care giver), they can order their placement in alternative care. Under the Code of Children and Adolescents, the choice to use different available alternative care should be prioritised as follows:<sup>192</sup>

- Kinship care: Placement with a biological or extended family member with whom the child has significant bonds.
- Temporary placement with a family from the register of families interested in adopting.
- Guardianship: Placement with third parties as outlined or "tenencia por terceros". Any interested party can request custody of a child or adolescent, provided that the request is made with the child's best interests in mind<sup>193</sup>.
- Foster Care: Placement in small residential settings (known as a foster home or "Hogares familiares de acogida").<sup>194</sup>
- Institutional Care: As a last resort, placement in a residential institution is permitted only if it is in the child's best interest due to exceptional circumstances.<sup>195</sup> Under the Judge's responsibility and with INAU's advice, children up to two years old cannot stay in institutional care facilities for more than 45 days unless they reside with parents or health reasons necessitate extended stays in properly equipped centers. With children over 2 and up to 7 years, the maximum stay in institutional care is 90 days, with the same responsibilities and exceptions as for younger children.
- Adoption: Placement with a family selected by INAU teams.<sup>196</sup>

According to information published by INAU, in January 2024 there 6,477 children and young people in alternative care (Table 12).<sup>197</sup> This includes those placed for reasons of protection into formal kinship care (with extended family), foster care (non-biological family) and residential care. It does not include children and adolescents who remain in their immediate family under a protection order. Although use of residential care is supposedly an action of last resort, as seen in Table 13, just over half (53.3% of children and adolescents) were placed in residential facilities.

<sup>192</sup> Code of Children and Adolescents, 2004, Article 133

<sup>193</sup> Code of Children and Adolescents, 2004, Article 36

<sup>194</sup> Code of Children and Adolescents, 2004, Article 133

<sup>195</sup> Code of Children and Adolescents, 2004, Article 132-1 and Code of Children and Adolescents, 2004, Article 133

<sup>196</sup> Code of Children and Adolescents, 2004, Article 136

<sup>197</sup> Data adapted from INAU website: <https://www.inau.gub.uy/estudios-de-poblacion-y-proyectos/item/3762-ano-2024>

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Table 13. Children and young people in the alternative care system in Uruguay and places of resident (January 2024)

Children and adolescents in the special protection system by form of care	Total
	Children and Adolescents
<b>Formally placed in extended family</b>	
In extended family (or in those who are not blood relatives) or in extended family care or by blood ties with support (Children's Club, etc.)	<b>2,605</b>
<b>Formally placed in another family</b>	<b>419</b>
<b>Residential care</b>	
In 24-hour comprehensive care centres	1,518
In short-stay centres	256
In family care and strengthening centres (CAFF)	581
In residences for adolescent mothers	47
In residences for disability care	639
In residences for mental health care	215
In residences for homeless situations	52
In residences for situations of addiction	18
In residences for situations of violence	127
<b>Total residential care provision</b>	<b>3,453</b>
<b>Total in alternative care placements</b>	<b>6,477</b>

(Source: adapted from <https://www.inau.gub.uy/estudios-de-poblacion-y-proyectos/item/3762-ano-2024>)

According to UNICEF, in 2019, there were reportedly 449 places assigned for mental health care as a component of the national child protection system.<sup>198</sup> The study included an assessment of the conditions in these centres found the average stay to be 2 years but some remained there for up to 10 years (Figure 34).<sup>199</sup> However, as will be noted throughout this report, we found differing data across different reports in relation to children in alternative care due to different forms of disability.

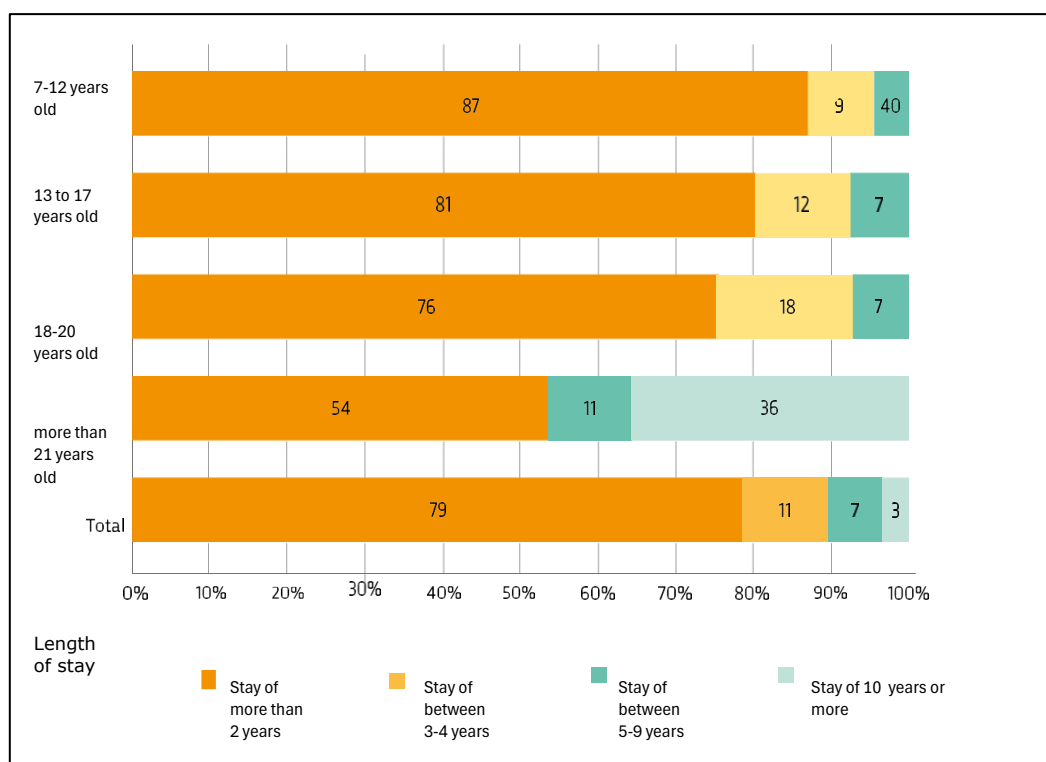
<sup>198</sup> UNICEF Uruguay 2020

<sup>199</sup> *ibid.*

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Figure 34. Period of time spent residing in mental health centres within the child protection system by age group (2019)



(Source: adapted from UNICEF 2020:55)

The Special Rapporteur on the National Torture Prevention Mechanisms has reported negatively on the centres in Uruguay that provide temporary care for children or adolescents separated from their families and the process of diagnosis, evaluation, and initial care.<sup>200</sup> The Special Rapporteur also reported abuses included prolonged stays, overcrowding, mistreatment, stressful conditions, and a lack of staff.

### Family-based foster care

In terms of formal family-based alternative care, in February 2023, a Decree (No.2023-90) came into force governing the provision of foster care. Only two interviewees spoke about such foster care and it is understood that this form of care remains a long way from being fully developed and utilised in Uruguay.

*"So there are not many here but here in Uruguay this condition of foster family is not backed up by the law yet. But it is on the way because there was a decree that was signed not far away that tried to organise this but here in Uruguay the status of the foster family is more focussed and valued by international partners, international NGOs which recognise them."*

## 14.5. Reintegration

The Code of Children and Adolescents establishes that 24-hour residential care should always be temporary and lasting the shortest time possible until the child or adolescent can be reintegrated into their family or placed in an alternative family i.e. adoption. During the placement, efforts should be made to maintain family connections including to avoid the separation of siblings<sup>201</sup>. However, only one interviewee spoke about the return of children

<sup>200</sup> Please see: <https://www.state.gov/reports/2023-country-reports-on-human-rights-practices/uruguay>

<sup>201</sup> Code of Children and Adolescents, 2004, Article 120-8



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to their parents from alternative care and the information that was received suggested efforts to bring about reunification across the country are not substantial.

*"So the organization, (name of alternative care provider deleted) that carries out these processes that we have advanced and carried out, in this case almost 400 family reunifications[happened] in these years, which is a very high number. No-one in Uruguay has integrated more children than (name of alternative care provider deleted). Nobody, not even INAU itself."*

#### 14.6. Decision making and pathways into care

There are different decision makers, and different decision making processes in relation to placement in alternative care, in Uruguay. These processes are discussed below.

##### 14.6.1. Initial decision making and reporting

In relation to a process that may result in children being placed in alternative care, initial decision makers are those who first decide to report a concern to an official or approach a government department or NGO. This might be to seek help for a child or their family due to protection or other concerns. It might be parents or other primary carers wanting to relinquish a child. It also includes those who take the decision to abandon their children.

All interviewees were asked about initial decision makers i.e. those who first report concerns about a child. They said this includes family members, neighbours, police, health workers and teachers, psychosocial and socio-education team members and others working in schools. Those in contact with children through youth clubs and early development centres and other children and family services also report. Reports might be made directly to members of government child protection teams (i.e. within the INAU), the police, the court, and CBO/NGOs. There is also a telephone hotline (Blue Line) they can use. No-one spoke about children themselves making a report.

*"Any citizen can call the blue line, can go to the INAU, can go to court, to the police."*

*"Anyone can make a report, we have a free line, "0800", where a person can call. The report can be made online...the courts, directly receive a letter from an individual or a report may come from the INAU or from the police itself, from the Ministry of Social Development of Uruguay, or from the health provider. We also begin the process with complaints that can come from any public or private person".*

*"There is the community, some neighbours and in general the school. It is almost always in the school."*

*". Teachers detect it, doctors detect it, or a family member or a neighbour who call anonymously."*

*"In general, the reports are made by the psychosocial teams of the different organizations of the school, the high school, the polyclinic, the health system or because a child arrived beaten and through a protocol the health system is informed...The formal and non-formal school system as well...early childhood centres...if necessary, prepare the report to present the complaint. The same thing happens in the school, high school, children's clubs or youth*

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*centres. Always in general, where there are children and adolescents, there is always a psychosocial or socio-educational team, which if it sees a violation reports...It could be a family member, a neighbour through the blue line."*

*"Almost 40% of the people who identify situations of lack of protection are either family members or members of the community. And yes, then comes the police linked to civil society organizations....Then look at the health centres and then the educational centres, among other things."*

*"So I believe that perhaps the majority of situations are detected in health centres and educational centres. In Uruguay this is very prominent, because in either of the two, there are roadmaps so that the professionals and the representatives of those places know what to do and how to notify the situation of violence that the child is experiencing and send it to the judge."*

Ability of some professionals to make well-informed initial reports is discussed later in this study. As noted, some interviewees referred to a reporting protocol. This is a legal requirement that means anyone who suspects a child is at risk must immediately report the situation.<sup>202</sup> Those required to report include:

- Parents or others, whether related or not, who are in charge of the child decide to stop providing permanent care.
- Individuals, who are not family members but receive the child from a parent or another relative or guardian, or those who learn of such situations in the course of their duties, employment, profession, familial relationship, or institutional involvement.

If the judiciary receives this information directly, they must promptly notify the INAU. If the INAU receives a report, they must report to the courts.

### 14.6.2. Child Protection Case Management and the role of social workers

As noted previously, all alternative care placements must by order of a judge. According to the Code of Children and Adolescents, a request for such placement can be activated by the INAU or by parents or guardians.<sup>203</sup> This places social workers within the INAU as important decision makers due to their responsibility to gather all relevant information and make recommendations that will inform decisions made by members of the judiciary.

The process of assessment and drawing up evidence of a child's situation is detailed in the Guidelines for Preparing Reports for the Judiciary and Routing of the Process' (English translation).<sup>204</sup> The Guidelines refer to reports for the Family Court judges and/or the Office of the Prosecutor General as document containing a technical opinion based on an assessment of the situation of a child and their family and a proposal for professional intervention. Reports for the Office of the Prosecutor General should define the crime and provide evidence on which actions can be taken. The Guidance provides clear instructions about the content of the reports and detailed report templates. The report should contain the findings of a multi-disciplinary child and family assessment. It also clearly directs those writing reports for the judiciary to avoid information regarding a family's lack of financial resources. If there are challenges in caring for a child due to financial issues, there

<sup>202</sup> Code of Children and Adolescents, 2004, Article 132

<sup>203</sup> Code of Children and Adolescents, 2004, Article 120-6

<sup>204</sup> Please see: <https://www.inau.gub.uy/institucional/documentos-institucionales>

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should no indication of blame on the responsible adults. Rather, those writing the reports are directed to describe the community context in which the family live and access, or lack of, to public support. The Guidance clearly states that such poverty alone is not a reason to place children in alternative care. Furthermore, there should be no personal value judgements within the report.

Interviewees spoke about the assessment process. They described home visits made by teams comprising social workers, psychologists and educators and the gathering of information from family members and professionals who know the child. No-one mentioned the involvement of children in this process.

*"I know, visits are made by multidisciplinary teams, social workers, psychologists, educators."*

*"When we make home visits, we see precisely what is happening to] that child is having in the house..."*

*"In the interventions we are identifying profiles [of the family]"*

*"This judge [decision] is based on reports that he asks the judicial team itself or the INAU teams to really report what situation they see in the case of that child and how they see them. If they are capable of surviving in that situation..."*

*"...the INAU...they make the visit. They investigate what is happening. What is really happening, and they make reports. The first reports are for the INAU. When the situation is very serious and it is thought that a drastic change is needed, that is when it is judicialized. The teams make the reports and present them in court."*

*"Of course, when a professional writes a report they have to present it with a technical foundation and basis. And it has to be very clear on what it accounts for, and what is recommended. If a report is well written and well-founded and so on, generally the judge will use it for decisions and decide on what is suggested in that report."*

It is clearly stated in the Code of Children and Adolescents (Articles 12 and 131 that the participation of children and adolescents should be sought whilst ensuring there is no re-victimisation and the INAU has issued a guidance manual on facilitating participation and conduct interviews with children. However, only a couple of interviewees spoke of such engagement in the assessment and decision making process.

*"when one becomes aware of a situation of abuse due to mistreatment or sexual abuse, the first thing to do is not to be left with that information alone and seek help, to be able to think about how to protect that child...It can happen because the family and community context can provide that guarantee and lead to an intervention process designed with the participation of the child or adolescent..."*

All interviewees were asked about the efficacy of assessments and decision making by social workers and others who undertake assessments, analyse the evidence, draw conclusions and make recommendations. In particular we were interested in knowing whether they thought decisions to place children in alternative care were usually the correct ones. There was some differing in opinion with decision making rated as being more accurate when there was clear evidence of acute violence. Others suggested that decisions to place a child in

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alternative care were being taken to quickly and not enough consideration being given to seeking other solutions. Others said categorically that the best decisions were not being taken.

*"Yes, in the sense of when it is suggested to take measures, probably with greater impact on the child's life, such as a protection. For these situations ... when a team suggest [placement in alternative care] it is because any other alternatives they have worked on have been frustrated or are impossible to execute. So when the team suggests [placement] it is because the risk is very great."*

*"Yes. Overall, yes."*

*"I think it is very good that they [social work teams] are sensitive to the situations of the children.... It is clear when you have that feeling that something is happening, there is a risk situation..."*

*"In some cases, but not in all."*

*"You see, that is a bit complex to answer because I think it is difficult to measure an absolute saying yes or saying no. But I think there can be cases in which [wrong decisions] happen."*

*"Yes, I believe that there may be cases in which it might seem, or could be easier to, intervene in that way [placing a child in alternative care] with immediate separation rather than with working with these policies that I have been telling you about, those on how to contribute to prevention of separation."*

*"I believe that the protection measures that are taken are always very well founded."*

*"It happens that it varies depending on where you work. And what the organization you work for asks of you. If you work at the INAU and your technical team is the INAU, and the INAU is telling you 'Look, you have to reach this objective.' ...but a technical team from the INAU in the reporting can do anything, In general, the local reference centre is doing three interviews without diagnosing the situation in a family. In part from the scarcity of economic resources, and I don't just want to say because the technicians are bad."*

*"The shame is that sometimes the only way forward is a measure that should be one of the last resort. But that happens due to many reasons. Because there was no capacity to intervene, or the institution was not prepared, or there was no team in the territory itself. The judiciary does not have the tools to assess whether there is another solution, because sometimes you have no solution. But if you dig a little more, if you make four calls, five visits, you will find that there was an aunt who went to another apartment, but when you tell her, 'look, the little ones are very mistreated here, we should take them to your sister' She says, 'I will take care of them, I will take charge.'"*

A few interviewees suggested that some decision makers automatically resort to use of alternative care due to it being a long founded practice.

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*"It [placement in institutional care] is not more convenient, because it is even more expensive in every way no matter how you look at it. It is more traumatic for the child. It affects their development. It generates many problems. It is more expensive for the State. For a lot of thing. But it is a way, a doctrine, that is still strongly adhered to when there is an irregular situation [for a child]."*

*"The problem is that in Uruguay, when the State has to say where to send that child, it ends up using a set of procedures and forms of action that are very, very deep-rooted, ending up with that child, generally placed in residential care."*

Decision making is also being influenced by working conditions. This includes insufficient child protection staff and other resources that would help them work more effectively.

*"It is a State team, what do they work for? In other words, they do not have the financial resources, they work very poorly, that everyone knows they work very poorly and that, in reality, they respond to a political need".*

*"We must consider how public funds, the resources of the five-year budgets, are distributed. I would even tell you that it has been a feature that, regardless of the political party and the political bias it has had at the time of the national Government, the budget assigned to childhood and adolescence is still insufficient and inequitable in relation to other budgets that are awarded to the time to distribute the cake of public resources. Undoubtedly, the issue of resources has often had an impact on the responses not being the best or the most appropriate to these very critical situations of children and adolescents."*

*"They are never enough [staff]. They are never enough."*

*"...but in general terms of what happens in the system, there is always a lack of people to work with families in the territory, in nearby areas, which is key. There is a lot missing there."*

*"There are levels of intervention where they must be much more trained, with more resources to move with. And the judiciary itself should be more trained and equipped with resources, especially human resources."*

*"We must consider how public funds, the resources of the five-year budgets, are distributed. I would even tell you that it has been a feature that, regardless of the political party and the political bias it at the time of the national Government, the budget assigned to childhood and adolescence is still insufficient and inequitable in relation to other budgets that are awarded to distribution of the cake of public resources. Undoubtedly, the issue of resources has often had an impact on the responses not being the best or the most appropriate to these very critical situations of children and adolescents."*

*"In general, in the protection system administered by INAU, permanently, there is a demand for human resources and for economic resources."*

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*"...there is always a lack of people to work with families in the territory...There is a lot missing there."*

*"...but for example, if the situation is detected and then you have to intervene, you have to work with that family, the psychologist, the educational centre worker. The social worker will not be able to do it. Because no, they don't give them the time because they have all the other children at the educational centre. They have a lot of things to do. They won't be able to intervene. When you have to do it you have to work, you have to do it in close proximity, and there is a lack of people."*

One interviewee thinks it is not just the number of workers but also the quality of their work that is important.

*"I have a good work team. I am very proud of my office. I could use more workers. But I have a work team that I am very proud of and we can meet the requirement we have. If they send me more workers, I will be delighted, I will be the first. But having more workers does not mean that you have more quality, so, I have few, but I have workers committed to the task they do and that for me is a plus."*

Attention was also drawn to the emotional welfare of child protection workers and how burn out and levels of stress can impact their work.

*"There is also an aspect that I think is key to highlight. It is a draining function. It is a function that requires a level of involvement with each situation. We also have to accompany them in generating team care strategies. But at times there are situations of damage, violence, such great wear and tear in the population with whom they work, that it also generates a very high level of anxiety in the professionals themselves."*

It is also understood that decisions to place children in alternative are influenced by the lack of prevention services.

*"You don't have the flexibility to say, suddenly this family can be sustained... The INAU itself is trapped in its own possibilities to respond. If they made things more flexible, for example...they would avoid many institutionalisation placements....I estimate that out of every 100 institutionalisation orders, 80 could easily be stopped and new alternatives found."*

*What I believe, in Uruguay we have a serious problem which is the protection measures always end up leading children and adolescents to residential care homes. So one of the aspects that I believe that the Uruguayan protection system, the special protection system, must improve is being able to generate protection measures to act, to respond to, serious situations of violence, of children who are violated, who cannot continue with their families or at least with that nucleus, let's say, of parents. And that as a protection measure another type of protection can be provided, which is not only, as a first measure, residential care."*

*"It could not be stated in conclusive terms, but I believe that there are compelling elements to support that fewer children and adolescents could enter the institutional care system if other options were in place in terms of preventive approach."*



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*"What seems wrong to me is that sometimes there are not enough options to intervene in situations, especially to support and prevent them from reaching it. I am not saying that all situations are reversible, especially at the moment, but I am saying that there are other alternatives before institutionalisation."*

What is very concerning are reports on how the decision to separate children from parents is sometimes implemented. In this regard we received accounts of children literally being "rounded up" by the INAU following a judicial order.

*"This INAU van, as it is called, can be found at school many times. He makes his rounds, looks to see how many protection orders he has that are judicial, and goes out with the truck to tour and goes to school, to the house. And they collect protection cases [children]. They put them in the van and from there they go to the health centre at the Pereira Rossell Hospital to have a medical examination because they have to go through a medical study before entering the home, the public home."*

*"...the judge will rule on the amparo protection measure. And then the INAU has to go pick up those children, and since it is a violent situation, sometimes they even go with the police, because you know, this person, of course, the father is linked to drug trafficking...like I said, it is a violent situation and for the child it is horrible. So, from the child's perspective, the removal or separation generates trauma. That is something very important to work with children. We know that beyond the situation of violence that the child suffered, just the fact that he is entering an alternative care modality, after having been separated from his family, the fact that he is no longer separated from his family is already traumatic. . He is a child who will arrive with symptoms of trauma, shock."*

### 14.6.3. Other decision makers

#### Role of the judiciary

Judges are important decision makers. They rule on protection and family matters within the Family Court system including deciding on such issues of custody, detention of children, as well as measures when presented with cases of child protection and whether or not to place children in alternative care based on reports provided by the INAU.

*"In the city of Uruguay called "Salto" there are two specialized courts in matters of violation of the rights of children and adolescents and gender-based violence. This implies that they are only dedicated to the powers of this role.... This specialization obviously brings quality to justice. In the family courts, there are situations that involve children and adolescents addressed in the other family courts, which must decide situations, not urgent ones like those of the specialized ones with their technical teams and have their procedures, but in the family courts These are situations such as: custody, visits, loss of parental authority, situations related to the life of that child, but that do not generate a risk of violation of rights."*

*"In Uruguay it is always the judge, there is no protection measure that is not dictated by a judge; The others can suggest, they can advise, they can ask, but the one who decides is the judge."*

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Many interviewees, including a judge, spoke about the role of the judiciary in relation to efficacy of their decision making. In general they highlighted a need to improve the work of the judiciary in this regard and to raise their understanding and awareness of issues of child protection.

*"There are judges who take more into account professional's opinion about social intervention. Others nothing. That's why I tell you, that's why I insist that when such a great responsibility is placed on a body. As the only body, they have to have more training than other professionals. Because now judges in Uruguay do not know, for example, the protocols. They don't know how a situation of, I don't know, sexual violence, for example, is evaluated."*

*"There are judges, there are all kinds of judges. We have judges who have tremendous capacity and, based on all the information they have, they manage to make very good decisions and others who make mistakes ...We have found judges who do not have a good rights-based approach. Unfortunately, this work is sometimes a thankless job because we have to not only deal with the situations of violence that children and adolescents experience, but also deal with a system that sometimes does not act in a protective manner. And well, that, yes, this is sad and sometimes it happens and with some judges this happens."*

*"And many cases, it sometimes brings frustration because, I mean, very serious situations are identified and sometimes we find that the [judicial] system does not act as it should act."*

*"...so those capacities of the judges must be strengthened."*

*"For us, one of the successful paths that we could have is to work with the judiciary because they no longer know about the issue. They don't even want another type of measure, another type of solution. They don't know. They think that there is only institutionalisation."*

*"...the least qualified, the least able to make decisions in people's lives are those in the judicial system. There is very little commitment from the people. In reality what often happens is that the [legal] standards are met but rights are not guaranteed."*

Some interviews spoke about the influence and importance of the rigour of the reports passed by the INAU to judges to aid their decision making.

*If a report [from the INAU] is well written and well-founded and so on, generally the judge will take it for decision and decide what is suggested in that report.*

*There the only way is to act or the only thing that remains is to always act firmly in relation to the defence of children's rights. Always prepare compelling reports that have solid technical foundations. Also sometimes insisting and insisting again, because the children's lives are at stake.*

Others referred to the lack of resources that might aid the judiciary in coming to the best decisions as well as members of the judiciary not wishing to working in the Family Courts.

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*The second thing is that the judiciary does not have in its daily practice the suitable personnel to carry out certain investigations or certain delegations in the alternatives that there could be for the children in places that enter protection.*

*The judges are unaware, for example, of other resources [other options rather than institutionalisation]. Apart from adding that judging on family matters, within the judicial career, is not the most coveted. So, there are always new judges. Those who are just doing it, not looking for promotion, come in through family court... Of course it is done on rotation... In general it is not a vocation. There are not those who want to be in that field. They are there because it is a springboard for, for example, in their judicial career to come from the interior to Montevideo..."*

In conclusion, in terms of decision making, interviewees showed an understanding of the law, statutory guidance and the formal process of case management that should guide decisions to be undertaken by INAU staff, the judiciary and other professionals responsible for safeguarding children in Uruguay. This includes the premise that children cannot be relinquished directly into alternative care but must go through a court process. There is an indication that decisions are not always based on a child's best interest and using residential care as a last resort. This situation is influenced by several factors including poor availability of prevention services and a well-entrenched practice of using residential alternative care as a solution for children in need of protection. A need was also identified for additional financial and human resources within the INAU and the judiciary in particular that would help improve the efficacy of decision making.

### 14.7. Training for decision makers

The efficacy of decision making and the use of case management tools to inform decisions can depend greatly on the understanding and knowledge of, and the training of child protection case workers. This includes not only the efficiency in collecting necessary information about a child and their situation, but also how to analyse assessments, understand risk thresholds, and make informed decisions.

It has not been possible to conduct an in-depth assessment as to the understanding and competency of child protection workers, nor the quality of higher education or other training opportunities that would provide them with the necessary skills. Information collected during does indicate however, that there is a need for further training for all those with a responsibility to safeguard and take decisions about children.

*"And there is a lack of a lot of training [for education and health workers]"*

*"No, perhaps what is most lacking is training and opportunities for training [for education workers]"*

*"More training is required. More preparation [for social workers]"*

*"There is always talk about the training of judges, but it is true that we are always behind. And the issue of childhood is super complex and the judge who arrives at a court is not always prepared. There are excellent family judges who, on their own, also, they always seek to be training".*

*"It is never enough. We always need to reinforce and improve [the work of judges]"*

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*"We have within the judicial branch the school of judges that provides us with courses. And we have mandatory training. Then each one is left to use what we learned or not. The training is there..."*

*"For me it is also an oversight that we have. All staff must be trained. Not only the judges. A commitment must be generated. Training must be generated for the workers who receive a report [about a concern about a child]. The recipient takes the information. Why do I say this? Because many times the only possibility to report is when someone gets close to the precipice and if the official does not have the necessary commitment to receive that report, the necessary empathy, that person leaves and it is a report that does not reach the system."*

*"Not only [a need for] training the judges, it is training everyone..."*

*"Yes, yes, yes exactly. And the judges are ready. Those who have been working in the family court for a long time have experience. They have been able to capitalize on these years of applying the Code. I believe that none of the judges, neither us nor anyone else, is free from needing some type of training exchange".*

We recognise that only partial information was collected during this research relating to the topic of social services workforce decision making, along with analysis of the efficacy of delivering the child protection system and those working within it. It is suggested this topic requires further investigation.

Overall our findings suggest that decision making that is always in the best interest of the child is being hampered by gaps in the law and insufficient investment in the social workforce as well as the gatekeeping tools and processes they use.

### 14.8. Data collection and management information systems

The UN Guidelines for the Alternative Care of Children<sup>205</sup> advise States on 'development and implementation of coordinated policies. Such policies should be based on sound information and statistical data. 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, practice and services.

According to the INAU website, the Institute is responsible for the Information System for Children (SIPI).<sup>206</sup> This includes the collection of relevant data to monitor the situation of children and families receiving child protection and family support services. This includes publicly available data on the number of children in different forms of alternative care that is updated on a regular basis.<sup>207</sup> The Institute also says it uses such data to inform policies and strategic direction and content of the programmes. During our desk review we have also

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205 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>

<sup>206</sup> Please see: <https://www.inau.gub.uy/institucional/sistemas-institucionales>

<sup>207</sup> Please see: <https://www.inau.gub.uy/estudios-de-poblacion-y-proyectos/item/3762-ano-2024>

been identified various reports, for example those published by the government and UNICEF, that provide numbers of children in alternative care and the reasons for their placement.

## 15. Solutions to challenges provided by research participants

It was very important to ask children, young people and family members who participated in our research workshops for their ideas regarding solutions to the challenges families are facing.

Utilising a problem and solution tree, young people who participated in the research workshops wrote down their solutions to the challenges they think young people and families are facing in their local communities (Figure 35).

Figure 35. A solution tree drawn by young people



Their solutions included the need to improve communication, trust and understanding within the family and especially between parents and young people. Young people recognise families need different forms of additional support including 'family therapy'. They said some young people feel insecure and unsure about themselves and their lives and would benefit from support in building their self-confidence and feelings of safety. They want improved access to emotional and psychosocial support and for a greater focus of services that place 'importance to mental, emotional and physical health'. One young person wrote about the need for

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'social workers being able to realize in time that there is violence in the house'. Issues related to the need for more financial and material support, including access to employment, are also factors they want addressing.

When considering solutions, it is also important to consider what would help make children and young people happy and families united. We were told that young people are happy when they feel loved, safe and respected and there is 'affection' and 'happiness in the family'. They want to be listened to and to have 'freedom of expression'. Young people value being able to spend time with their parents. They would like more freedom and increased opportunities to pursue recreational activities. Several mentioned the importance of money and having a nice home and good food.

Adults attending the family workshops were also asked about solutions they thought would help address the challenges they had raised. They worked in groups to rank their solutions in order of priority they thought they should be addressed (Figure 36).

Figure 36. Ranking of solutions by adult family members

#### Ranking of solutions by adult family members

##### Group 1.

1. Improved health services
2. Improve commitment to help each other in the home and share responsibilities
3. Improve communication between family members

##### Group 2.

1. Improve communication between family members
2. More support from state and non-state organisations e.g. with food and housing
3. Access to specialist services i.e. psychological support

##### Group 3.

1. More support from state and non-state organisations
2. Improve education
3. Improve family relationships

##### Group 4.

1. More support from state and non-state organisations e.g. with food and housing and psychosocial service
2. Improve sharing of responsibilities and decisions in the home
3. Improve laws and their implementation - especially those that protect girls and women
4. Improve access and opportunities to work
5. More support from state – especially for vulnerable families
6. Improve health services
7. Improve security in the community
8. Improve communication between family members

##### Group 5.

1. Improve education
2. Improve health services



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3. Provide families with emotional support – including access to psychosocial services
4. Improve communication between family members
5. Free helplines for women who are victims of child and domestic abuse
6. Improve access and opportunities to work – including for women

#### Group 6.

1. Improve health services
2. Having goals and improving family relationships (this included having goals and the will power to progress and move forward, being able to comfort and communicate with each other)
3. More support from the state – (access to work, provide housing, stop drug sales and make it easier for people who are homosexual when want have children can have without costs)

Key themes include help to improve communication and relationships within the family, sharing of household responsibilities and the importance of spending more time together. Other solutions encompass improvements to financial and material support including such factors as better access to employment, health services, education and help with food and housing etc.

Interviewees were asked for their recommendations regarding actions and services that could help improve the situation for families and prevent child-parents separation. An emphasis was placed on earlier detection of problems within families and increasing access to a range of support services. This would require increased understanding and skills of those who come into regular contact with children, such as health and education workers, and the ability to identify issues that can lead to child-parent separation such as domestic abuse, parents addiction to alcohol or drugs or mental health problems: *"I think we should be more trained. The people who do psychosocial work, psychologists, social workers, social educators, also teachers, in detecting and seeing how to intervene as well."*

It was stressed that all those involved in making recommendations and deciding on protection measures for children, particularly social workers and judges, should fully comply with the law including a right of a child to family life and the use of residential care as a last resort. Interviewees said this would also require a better understanding of risk thresholds and increased competency in assessing a situation i.e. parental capacity, when it is safe to leave a child with their family, and what conditions are needed to support good and safe parenting practices. This would also require a trauma-informed approach e.g. understanding how, due to the personal experiences of parents and/or stressors impacting their current lives, can diminish their ability to care for and protect their children.

*"sometimes we do not focus on the problems of the adults and how that affects the ability to care for the child. It seems to me that a great deal of awareness-raising and professionalisation is needed"...*

A need for increased investment in services aimed at preventing family breakdown and removal of a child is seen as a priority. This includes further investment in programmes that promote positive parenting skills and ways to improve family relationships. Facilitating and increasing the role of social/community networks to support families in times of difficulty was also discussed. In addition, addressing structural poverty and increased economic empowerment is thought to be essential. One interviewee spoke at length about the importance of providing additional financial and emotional support to families in which a parent/s and/or a child/ren have disabilities.

*"The other thing is to address the entire issue of poverty, but with this approach, not only looking at economic transfers to families, material conditions are very important. They are an essential part of ensuring care and protection."*

Some spoke of the need to improve the quality of education so that future generations can move out of poverty and have better lives. Although there is high attendance rate in primary education, they said more needs to be done to retain such levels in secondary and higher education.

Increasing the number of staff working within INAU child protection services and the Family Courts was a further recommendation. It is believed this would allow for a wider range of professionals working with the INAU teams as well as more time for outreach work and direct contact with families.

## 16. Conclusions and Recommendations

The recommendations in this section of the report have been informed by the information young people, and adult family members provided during research workshops. These findings have been triangulated with the knowledge and understanding provided by professionals holding responsibility to protect children and support families, as well as information gathered during a desk review.

The research framework, analysis of findings, and development of recommendations have been guided by the UNCRC and the 2019 United Nations General Assembly Resolution, 'The promotion and protection of the rights of children' as well as the UN Guidelines for the Alternative Care of Children. Recommendations are therefore addressed in reference to children's rights. Although these rights are indivisible, and all are essential to the well-being of children, we have chosen to develop recommendations based on a certain number of rights thought most applicable to the findings of the research and prevention of child-parents separation.

With regards such guidance, it is the responsibility of States Parties, and other bodies and organisations, to address drivers of separation and do everything possible so that children can remain with their parents in a safe and caring environment. This requires a society that is free from violence. It means combatting stigma, discrimination and marginalisation that individuals and families face on the basis of such issues as ethnicity, gender, disability, sexual orientation, and birth status etc. It requires a strong national economy with programmes of poverty alleviation. The safety and security of all citizens, and systems and delivery of a range of basic and specialist services such as education and health as well as utilities, employment, and adequate shelter are also important. There should be a social protection system that provides for individuals and families when in need of such support including unemployment, sickness and disability benefits, pensions and other social safety nets. Furthermore it requires a strong child protection system, including the systematic application of gatekeeping mechanisms and a well-resourced and trained social services work force. It is also incumbent on governments to develop the necessary normative framework for child protection and family support. Overall, this approach is grounded not only in the fundamental spirit of the UNCRC but also in many specific UNCRC 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), rights for children with disabilities (Article 23), and protection from discrimination (Article 2).

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We recognise that responsibilities to address drivers of child-parents separation and prevention of placement of children in alternative care is primarily that of the Government of Uruguay through the provision of national and local socio-economic programmes and services. This is a significant responsibility. Our research has not included an in-depth analysis of all these different aspects of government responsibility but has considered some of the gaps in provision. We do however, recognise the efforts being made by the Government of Uruguay to protect children and place a priority on their well-being. We also recognise the significant role that UN and other international bodies play in service provision alongside national and international NGO, CBOs, and these differing roles and responsibilities should be a consideration when reading the conclusions below.

The remainder of this report contains a significant number of recommendations and we appreciate this may appear daunting. However, partnership working between government and non-government agencies can bring about change when responsibility is shared and each organisation works to its own strengths and expertise.

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### Protection

Articles of the UNCRC that afford children the right to protection include, safeguarding from violence, abuse and neglect (Article 19 and Article 37(a)), from sexual exploitation and abuse (Article 34) and, from sale, trafficking and abduction (Article 11, Article 35, Article 36, Article 39).

In particular, Article 19 requires:

States Parties shall take all appropriate legislative, administrative, social and educational measures to protect the child from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s) or any other person who has the care of the child.

Recognition is given to Government of Uruguay to programmes aimed at preventing violence against children. A conclusion of our research however, is the continuation of violence against children is a primary cause of children's placement in alternative care. Young people, along with other research participants, identified the presence of violence within families and specifically wrote about experiencing and witnessing violence in the home. Violence in the home is also resulting in children running away from their families or placing them in other positions that could activate a referral to child protection teams within the Institute del Nino y Adolescente del Uruguay( INAU) or coming into contact with the police. This includes becoming street connected, involved in child labour and exposed to drugs and alcohol.

The high prevalence of violence against girls and women is a concern. We believe domestic violence, which is predominantly experienced by women, is one factor contributing to risks of children being placed in alternative care. Children can become direct victims of this violence thus prompting child protection authorities to respond and remove them from parental-care. Furthermore, female victims of domestic violence can face particularly difficult situations if without family and community support networks. For example, they can struggle if, as a result of domestic violence, they become the single head of household with all the pressures and challenges this can bring. Research shows for example, how female-headed households face specific challenges in terms of poverty, lack of employment and other socio-economic opportunities.

It should not be overlooked that some men are also struggling within the family home, especially with societal expectations that place responsibility on them to adequately provide for their families. This can also affect their mental health which, as previously mentioned in this study, can result in violence against children and partners. Men also need support that will help them maintain strong and caring family relationships.

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The issue of inter-generational violence is further concern. It has been recognised that violence can be a learnt behaviour<sup>208</sup> through 'observation, learning and imitation'<sup>209</sup> of adults, and/or being a victim.<sup>210</sup> Our perception is, with each generation in which families in Uruguay repeatedly experience and witness violence, and lack strong attachment to each other, that ongoing family dysfunction and breakdown will continue. It means within each generation there is the concern of an ever weakening ability to parent in a loving and caring and protective manner in some households. Situations that can then lead to acts of violence, either between adults, and/or towards children.

Disability, either of a child or a parent is also a reason for placement in care. This may be when parents are unable, or no longer willing, to provide care. A small number of children are also living in alternative care because they are orphans or abandoned.

### Recommendations

- There is a need for further investment in violence prevention programmes for adults and for children. Especially programmes that would help break any inter-generational cycle of violent behaviour. This might include violence prevention programmes that reach children at an early age through the school curriculum and which, comprise not just one-off 'civic' lessons, but continuous learning that promotes positive messages and behaviour throughout a child's school life. Violence prevention should also be built into family strengthening programmes that work with all members of the family.
- Article 2 of the UNCRC guarantees children protection from discrimination. Violence prevention programmes should include efforts to combat factors that contribute to the presence of abuse and exploitation including discrimination, stigmatisation, and lack of equality. They should incorporate clear messages that promote tolerance and understanding. Issues of gender equity, stopping discrimination against persons with disabilities, and acceptance of those identifying as LGBTQI+ etc. are examples of topics to be included in such programmes.
- To help inform policies and programmes that promote safe and united families, all professionals who hold responsibility for the well-being of children would benefit from a better understanding of the factors contributing to violence in the home in Uruguay. This includes programmes that raise awareness of the negative impact of adverse childhood experiences (ACEs),<sup>211</sup> and trauma-informed practice (TIP).<sup>212</sup>
- Those living in situations of domestic violence and gender-based violence require access to additional support and services. For example, those seeking safety need access to monetary support and housing, as well as counselling and psychosocial services provided within a caring and safe environment. When not able to access support from family and the wider community, and with no-where else to go, crisis shelter centres, and other support services, for women and their children could offer immediate protection and help prevent situations from deteriorating to the stage where children may be separated and placed in

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<sup>208</sup> Moylan et al. 2010

<sup>209</sup> Conteras & del Carmen Cano 2016:44

<sup>210</sup> Conteras & del Carmen Cano 2016; Bevans & Higgins 2002

<sup>211</sup> Please see: <https://www.eif.org.uk/report/adverse-childhood-experiences-what-we-know-what-we-dont-know-and-what-should-happen-next>. See also: SOS Children's Villages International and CELCIS, Centre for Excellence for Children's Care and Protection, University of Strathclyde 2021; SOS Children's Villages International 2022

<sup>212</sup> SOS Children's Villages International 2022 Safe



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alternative care. The building of stronger understanding within the community and help in creating supportive social networks for women and girls is also important.

- Men should be actively involved in family strengthening and other programmes that help them understand the importance of, and how to maintain, strong and caring family relationships. This should include awareness on issues of gender parity and prevention of domestic violence.
- Article 42 of the UNCRC requires States Parties to make the principles and provisions in the Convention 'widely known, by appropriate and active means, to adults and children alike.' Efforts to increase the awareness of child rights amongst the general public as well as the harm to children when they lack love, affection and are victims of violence - including impact of separation from parental care - can help strengthen the protective environment in the home and community.

### Adequate standard of living and well-being

Article 27 of the UNCRC requires States Parties to recognise the right of every child to a 'standard of living adequate for the child's physical, mental, spiritual, moral and social development.' The Article also calls on States Parties to take appropriate measures to support and assist parents with their responsibility toward children and 'shall in case of need provide material assistance and support programmes, particularly with regard to nutrition, clothing and housing.' Other articles within the UNCRC also include a right to health (Article 24), education (Article 28 & 29) and survival and development (6).

The 2019 United Nations General Assembly resolution<sup>213</sup> on the 'Promotion and Protection of the Rights of the Child' calls on States to 'improve the situation of children living in poverty, in particular extreme poverty, deprived of adequate food and nutrition, water and sanitation facilities, with limited or no access to basic physical and mental health-care services, shelter, education, participation and protection' (Article 1). Furthermore, the resolution clearly says that,

financial and material poverty, or conditions directly and uniquely imputable to such poverty, never should 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.

Analysis of the research findings show issues related to poverty are a driver contributing to children's placement in alternative care in Uruguay. Concerns raised by young people and adult family members during our research signalled areas of their lives in which they are impacted by issues related to poverty. Interviewees confirmed that poverty is a factor related to placement in alternative care. Such evidence is also found in published reports on child protection in Uruguay.

Poverty is an inter-generational as well as a multi-dimensional issue with measurements of poverty taking into account not only financial means, but other factors that contribute to well-being.<sup>214</sup> Our research findings also

<sup>213</sup> United Nations General Assembly Resolution 'Promotion and Protection of the Rights of the Child', December 2019 'A/74/395

<sup>214</sup> Please see: [https://www.worldbank.org/en/topic/poverty/brief/multidimensional-poverty-measure#:~:text=The%20Multidimensional%20Poverty%20Measure%20\(MPM,the%20%242.15%20international%20poverty%20line;https://ophi.org.uk/video-poverty-in-el-salvador-from-the-perspective-of-the-protagonists/](https://www.worldbank.org/en/topic/poverty/brief/multidimensional-poverty-measure#:~:text=The%20Multidimensional%20Poverty%20Measure%20(MPM,the%20%242.15%20international%20poverty%20line;https://ophi.org.uk/video-poverty-in-el-salvador-from-the-perspective-of-the-protagonists/)



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suggest a correlation between the ability to cope with daily challenges such as meeting household costs and finding adequately remunerated employment etc., with stress and tension within households. Persons with disabilities face particular challenges. As a result, the situations that many parents face, can exacerbate feelings of distress, anger, poor mental health, and for some, an inability to cope. This may even lead to violence within the family including against children. Furthermore, lack of sufficient community-based support services that families can be referred to as a prevention measure, and an alternative to placing a child in alternative care, was highlighted by many interviewees.

Although we have seen how issues related to poverty contribute to family breakdown and the presence of violence, nevertheless, it is recognised that there are families living in very difficult circumstances who are supportive and caring of one another and create a safe environment for children. This illustrates how strong loving relationships are an important factor in helping families stand up to the impact of poverty and other shocks experienced by households. And this in turn can contribute to a violence free household.

It is clear that not one agency alone can respond to the multi-dimensional aspects of poverty leading families into crisis. Although there are many government policy documents and strategies calling on a multi-sector approach to working with families, gaps in such coordination have been identified.

### Recommendations

- It is beyond the remit of this report to provide detailed recommendations as to government efforts to strengthen the country in terms of financial growth and stability. It would be possible however, for different actors to instigate advocacy that promotes change and share information that would help government policy makers, and others, gain a better understanding of universal efforts needed to prevent children's placement in alternative care. Especially information that takes into account the multi-dimensional aspects of poverty and the impact this has on families. This requires improved multi-sectoral cooperation and coordination between Government and non-governmental bodies and agencies, UN entities, academics, faith-based leaders, the private sector, and donors, including those responsible for education, health, security, social protection and social welfare, justice, and child protection. A child-centred approach should be adopted.
- There should be a concerted effort together, and within each organisation, body, or department, to assess and recognise where each can most effectively contribute: whether it be direct service provision, advocacy to effect change, signposting so that families know how and where to receive the support they need, fundraising, or even leading/supporting such coordinated response. Organisations should also look at the breadth of their outreach to ensure they are reaching vulnerable families including those residing in hard to reach and rural areas.
- Families need informed and coordinated access to service provision in a way that will address the inter-related challenges they face. This should be available in a universal manner to address a concern that support often comes too late and so that vulnerability of families might be prevented. To this end additional consideration should be given to providing families with helpful signposting to basic and specialist services as well as ensuring joined-up provision in a way that overcomes barriers of access.
- Supporting families with the responsibility to adequately provide for everyone in the household should include increased access to sustainable income generation schemes and help in obtaining stable, well

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remunerated employment. Such programmes require highly skilled facilitation and should be undertaken by organisations that have the particular focus and specialism to implement them.

- Increased efforts are needed to ensure full access to health care services including those offering psychosocial and mental health, and counselling programmes. This should also be a consideration in the delivery of family strengthening programmes.
- As in line with national legislation, children should not be placed in alternative care solely for the reason of poverty. Alternative care should only be used when absolutely necessary for children in need of protection that cannot be provided in their own homes.
- It is suggested that a review of expenditure on alternative care is undertaken and the use of evidence applied to developing legislation, policies and strategies that refocuses the funds currently used to run residential institutions toward programmes that allow children to remain safely in their own homes. This should include concrete and timely plans for the elimination of all residential institutions in Uruguay.
- The information we received suggest that there is a mixed understanding amongst professionals as to whether or not, and to which degree, issues related to poverty is linked to child-parents separation and placement in alternative care. We suggest future research might explore the reasons for this differentiation in understanding.

### Support with parenting

The preamble to the UNCRC states that the ‘family, as the fundamental group of society and the natural environment for the growth and well-being of all its members and particularly children, should be afforded the necessary protection and assistance so that it can fully assume its responsibilities within the community’. This requires States to provide parents, and other primary caregivers, with the support needed so that children have the best protection and opportunities in life.

Young people wrote about the importance of children and adolescents feeling loved, cared for, trusted and respected by their parents. They want better communication within the family, and to live in an environment where there is unity, support and happiness. When asked why families reach a situation where placement of children in care is a consideration, some interviewees drew attention to lack of parenting skills being a significant factor. In part, we believe this is related to deterioration of child-parents relationships: a situation that can ultimately lead to violence against, or serious neglect of, children. The issue of emotional neglect/abuse emerged as a significant concern raised by young people in the research workshops.

Interviewees also identified how lack of positive parenting skills is not only impacted by socio-economic circumstances, but is an inter-generational phenomenon. Findings in our research indicate the negative experience some parents had during their own childhood is impacting their ability to parent. One outcome being an inability to maintain harmonious, unified, supportive relationships in the home and leading to family breakdown. In relation to this situation, there is a recognised need to improve understanding amongst professionals on such topics as trauma-informed practice (TIP),<sup>215</sup> and the negative impact of adverse childhood experiences (ACEs).<sup>216</sup>

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<sup>215</sup> SOS Children’s Villages International 2022 Safe

<sup>216</sup> Please see: <https://www.eif.org.uk/report/adverse-childhood-experiences-what-we-know-what-we-dont-know-and-what-should-happen-next>

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Many of the discussions and recommendations throughout this report will contribute to supporting those parents who are struggling with their role to better protect and care for their children. Below however, are additional specific recommendations towards achieving this objective.

#### Recommendations

- As in previous recommendations, understanding and actions are needed that will break any inter-generational cycle of poor parenting. This requires consideration of parenting programmes that take a holistic and family-centred approach and incorporate such topics as attachment theory, the negative impact of adverse childhood experiences (ACEs), and trauma-informed practice (TIP). Policy makers and practitioners should have a clear and evidence based understanding of the different factors impacting parents and their ability, family dynamics, what is necessary to maintain harmonious, unified, supportive relationships in the home, and ways to build on existing resilience and coping mechanisms.
- Work with families should pay particular attention to the emotional connections between parents and children and young people and provide support that will help combat the emotional neglect and abuse children and young people experience.
- Breakdown of partnerships and divorce/separation that can result in situations where children are placed in alternative care was not raised by research participants. As previous studies in different parts of the world have highlighted this as a significant causality related to placement in alternative care, we suggest consideration be given to a future study on this topic so as to assess any possible relevance in Uruguay.

#### Disability

Children with disabilities have the right to enjoy 'a full and decent life in conditions which ensure dignity, promote self-reliance and facilitate the child's active participation in the community (Article 23 of the UNCRC). Also contained within Article 23 of the UNCRC is provision of special care and assistance to ensure children with disabilities have, 'access to and receives education, training, health care services, rehabilitation services, preparation for employment and recreation opportunities'.

We recognise the work of the Government of Uruguay to develop legislation, policy and programmes to support those with disabilities. However, reports have revealed the isolation, stigma and prejudice experienced by children with disabilities. We have also noted the lack of focus on the risk of violence children with disabilities face in any of the reports we sourced on violence against children in Uruguay. Children with disabilities are being placed in different forms of residential alternative care across the country. Although conditions within alternative care was not part of our remit, we note attention has been given to poor conditions in many of these specialised residential centres.

We stress that all the issues covered in the report, and especially in our recommendations, apply equally to children with disabilities. However, there are also additional risks that children with disabilities in Uruguay face including lack of sufficient investment in support services specifically tailored to their requirements. Children whose parents are disabled are also vulnerable to placement in alternative care.

#### Recommendations

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- Children with disabilities should not be placed in residential institutions. Consideration should be given to the specialist support necessary for children with disabilities and/or parents with a disability that would prevent separation.
- Family support programmes should ensure the inclusion of families that have members with disabilities.
- Future evaluations and reports on violence against children in Uruguay should include the specific risks faced by children with disabilities.
- Violence prevention programmes, as previously mentioned, should inherently incorporate the subject of protection of children with disabilities.
- Advocacy and awareness raising programmes should promote an understanding and acceptance of disability, both within families and amongst the general public. Public information campaigns should speak about fair and respectful treatment of people with disabilities, the harm of stigmatisation, and topics that would help prevent violence and exclusion. Advocacy programmes by and with people with disabilities are important and help bring a specific focus to improving services, opportunities, and support.

### Play and leisure

UNCRC Article 31 of the UNCRC directs States to the right of children to rest and leisure and encourages access to cultural, artistic, recreational and leisure activity. This right is highlighted in this report, not just because of the importance to children's development, but also the opportunity recreational pursuits can play in strengthening family life.

Young people wrote about the importance of time for recreation, both with parents, other family members, and friends. Time spent together is seen as being particularly important in the way it contributes to family unity, communication, and a means of providing a respite from the stresses they may be facing. There might be parents who doing their utmost to provide for the family by working hard and long hours whilst not also realising the benefits of spending more time pursuing joint activities with their children and how this can help forge closer bonds.

### Recommendations

- Activities that address important aspects of family unity and spending time together would add value to parenting and family strengthening programmes. This would include raising awareness amongst parents and professionals as to the important benefits of time spent as a family and how this can help forge closer bonds.

### Addressing harmful social norms, attitudes and practices

We have already noted the ongoing discrimination against girls and women and the manner in which this can contribute to domestic and gender-based violence as well as denying them opportunities within society. Furthermore, even though governmental efforts are being made to combat stigma and discrimination against those disabilities, this practice persists.

### Recommendations

- Additional efforts are required to combat social norms and beliefs that contribute to gender-based violence.

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- Advocacy and awareness raising campaigns are needed to help eradicate all other harmful social beliefs that place children at risk of harm. Such campaigns would greatly benefit from meaningful participation of children and young people.

### The child protection system and capacity of professional decision makers

Article 1 of the 2019 UNGA resolution on the 'Promotion and the protection of children's rights', calls on States Parties 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

International guidance relating to decision making and 'gatekeeping'<sup>217</sup> is outlined in a number of international documents including the UN Guidelines for the Alternative Care<sup>218</sup> and accompanying Handbook<sup>219</sup>. This guidance includes the use of case management tools that allow for rigorous multi-sectoral and participatory assessments upon which careful and well considered decisions can be taken. These decisions should always be in the best interest of the child. Furthermore, decisions made by professionals are not only influenced by such factors as their personal understanding and experience, but also the strength of the national child protection system they work in and the statutory and other guidance they receive. It is important therefore, that sufficient training is received and social work and child protection personnel have the knowledge and experience necessary to make the correct safeguarding decisions.

Our research examined different aspects of the national child protection system and gatekeeping. In this respect, we recognise the investment being made by the Government as for example, to amend and develop new legislation and policies that improve the situation for children in Uruguay, including their protection and prevention of separation from parental care. Furthermore, our research findings suggest there is a good understanding of laws and protocols regarding child protection and alternative care amongst many child protection practitioners. However, our findings also signal the need for further investment and rigour in the application of the normative framework. For example, although there is clearly defined legislation and guidance in Uruguay that includes a child's right to family life, and use of residential alternative care only as a last resort, over half of all placements are in residential facilities. This situation has been attributed in part, to lack of prevention services that would offer alternatives to separation and the use of alternative care. In addition, the law says poverty should not be a sole reason children are separated from their family. However, information provided during interviews, and data found during our desk review, identifies poverty as a reason for children's placement in alternative care.

The INAU has developed and published detailed guidance on different procedures and steps in child protection case management including the gathering of evidence when a child protection concern is reported. This involves the use of multi-disciplinary assessments, the formation of recommendations by INAU child protection teams,

<sup>217</sup> For further explanation of the term 'gatekeeping' please see: Csaky & Gale 2015

<sup>218</sup> United Nations General Assembly 2009

<sup>219</sup> Cantwell et al. 2012

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and writing of reports passed to the judiciary to inform their decisions regarding protection and alternative care. Interviewees provided clear evidence of their knowledge and understanding of statutory requirements in conducting such assessments and the different roles and responsibilities of the INAU teams and the judiciary. However, when asked about the efficacy of decision making that would deliver the optimal solutions, as for example those made in the best interest of the child, many suggested that decisions are not always the right ones. It is believed such decisions are influenced by a number of factors. This includes the systematic adherence by some to a long standing and embedded practice of utilising residential care. Lack of sufficient alternative support services for families is also attributed to less than optimal decisions being taken about children and their families. Furthermore, it is understood that social workers, judges, and other, may not always have sufficient training or knowledge of the different factors that can effect parenting ability, as for example, the impact of ACEs or the phenomenon of inter-generational poor practices and therefore, do not take such situations into account. Additional challenges facing those with responsibility for decision making include insufficient numbers of professionals, especially within the INAU and the Family Court. It is believed this is, resulting in high workloads, and lack of time to complete thorough child and family assessments or make well informed and carefully thought through decisions.

It has not been possible to assess the amount of training different government and other personnel have received on the use of child protection case management tools and other statutory guidance and legislation, or whether there is sufficient understanding of how to evaluate the risks a child might be facing through any assessment findings. The evidence we have collated does suggest that investment building workforce capacity and knowledge is needed.

An assessment of the quality of social work training in higher education institutions is missing from our research. A further study would help address this gap and provide a better evaluation of the knowledge and capacities of all decision makers, including those with social work responsibilities, and members of the police force and judiciary. Any future study should also consider the capacity of other professionals and the need for child protection training in all relevant higher education courses including those for police, teachers, health workers etc. Particularly as a need has been recognised to raise the capacity of those who come into everyday contact with children such as education and health workers in recognising early signs of concern within a family. Evaluation of the quality of ad-hoc and in-service training was also not possible within the remit of this research and again, a future review of standards of capacity building programmes would help inform any necessary provision.

### Recommendations

- Consideration should be given to strengthening and enforcing legislation, regulations and statutory guidance that mandates for the funding and provision of services and programmes to effectively address all causes related to child-parents separation and prevent placement in alternative care.
- Legislation should be implemented with the aim of eliminating all forms of residential institutions.
- To inform the development of future training and capacity building, it is recommended that an assessment of the quality of training in higher education institutions for all those holding safeguarding responsibilities is undertaken along with a review of provision and standards of in-service capacity building. This should be coupled with a study of current skills, knowledge and capacities of all those responsible for making decisions about protection and care of children including social workers, police, judiciary, health and education workers etc. Such audit should consider their understanding of early prevention of risks of harm



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to children and means of intervention, risk thresholds in relation to protection risks, and how to apply the principle of the best interest of the child.

- Steps should be taken to address the insufficient numbers of professionals working within the INAU child protection system as well as the need for any other resources that would enable the social services workforce to effectively carry out their roles and responsibilities. This consideration should also be given to the capacity of those working within Family Courts.
- Training of those working in residential institutions may not only help alleviate any opposition of those employed in such settings regarding closure of those facilities, but also contribute to re-skilling. If sufficiently trained, they could be offered new roles in family strengthening programmes and, if family based care settings are developed, they might become providers. In addition, training on how to re-focus the use of funds towards family support programmes, and family based alternative care when necessary, would be aided by the undertaking and application of a cost benefit analysis.

### Participation

Article 12 (1) of the UNCRC requires,

States Parties shall assure to the child who is capable of forming his or her own views the right to express those views freely in all matters affecting the child, the views of the child being given due weight in accordance with the age and maturity of the child.

There are clear guidelines issued by the INAU as to the process of engaging children in child protection case management. However, when research respondents were asked about this process, there was a notable absence of information regarding the role of children in the assessment process or any other decision making procedures, including the decision to place them in alternative care.

### Recommendations

- Children should be supported in a way that allows their full and meaningful participation in all aspects of any decision making process, including in child and family assessments and decisions regarding forms of support.
- All children should be acknowledged as active citizens and afforded equal opportunity to contribute to their society. In this respect, policy makers and programme designers and implementers may need help understanding that children are experts in their own lives. This will require challenging any negative barriers regarding children's capacities to engage and participate and providing them with opportunities that allow them to build and demonstrate such capability.

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