



Diaconía
ESPAÑA



**PLAN FOR
ACCOMPANIED
CHILDREN AND
ADOLESCENTS**

2024



AREA

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INTERNACIONAL**

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COORDINATION:

Fatima Ezzamouri El Arif

MAIN AUTHORS:

Ana Martín Mateo García
Fatima Ezzamouri El Arif
Filipa Iraizoz Valido-Viegas
Juan Miguel Medina Campos

SUPPORT TEAM:

Patricia Bueso Izquierdo (Cultulaw)

DESIGN AND LAYOUT:

Oriana Estefanía Miranda Pacheco

PROJECT BY:

Área Protección Internacional, Diaconía España. 2024

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EDITED BY:

Diaconía España

This document has been prepared by the team International Protection's Children team, with the collaboration of Patricia Bueso (Cultulaw)

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INTRODUCTION



1. INTRODUCTION

There are approximately 2,390 million children in the world¹, almost one third of the total human population². **Childhood is a crucial stage of human development** during which the foundations for the well-being and future success of humans are laid. During this period, **identity, self-esteem, and social and cognitive skills are built and, therefore, it is essential to provide a safe and favourable environment** for the growth and development of children and adolescents (UNICEF, 2017).

The Convention on the Rights of the Child (CRC), adopted by the General Assembly of the United Nations in 1989, **recognised the child as a subject of rights and not just as an object to be cared for and protected**, which marked a crucial turning point in the perception and treatment of children.

On the one hand, the CRC represented a collective **commitment to ensuring the opportunity for children to fully develop in a safe environment**, and it thus laid **the foundations for a fairer and more equitable world** for future generations (Alston, 1994). Furthermore, by recognising people going through this life stage as subjects of rights (Ben-Arieh, 2006), **the CRC legitimised their agency** and, with it, **listening to and considering their opinions and decisions**.

One of the consequences of ensuring the rights of children and adolescents is a direct contribution to social progress. Based on the approach inspired by the human capital theory, developed by Gary Becker (1994), it is argued that the investment in children's well-being, which includes access to quality healthcare, proper nutrition, safe housing, and stable family environments, fosters economic development, since it reduces poverty and increases the productivity of individuals (Devercelli & Beaton-Day, 2020).

In our commitment to **ensuring the rights of children and adolescents, from Diaconía España we present** this document as **the Plan for Accompanied Children and Adolescents of the International Protection area**, focused on the years 2024-2027.

This Plan arises mainly from the specific demand to **respond to the needs and priorities of migrant children who arrive as part of a family, and who represent a vulnerable group that requires reinforced attention**, as the Resolution of the Spanish State Secretariat for Migration (SEM, as per the Spanish acronym) of 9th January 2023 acknowledges. Although there are several plans on children developed by social entities and public administrations, few of them focus on the needs of children within the reception system. This situation has left a gap in relation to the **necessary accompaniment of these minors in international protection reception centres**.

Diaconía's Plan for Children³ is part of a process for continuous improvement of the entity that emphasises the perception of children as active subjects of rights. Through this approach, the aim is to **ensure an intervention that better caters to the specific needs of children and adolescents in all of Diaconía's action areas**, thus strengthening the entity's ability to provide comprehensive and quality support in its daily work with this vulnerable group.

¹ Legally, childhood and adolescence are defined according to the age of majority; in Spain, pursuant to the Spanish Constitution, the age of majority is 18 years old.

² Data obtained from <https://population.un.org/wpp/>

³ We sometimes refer to the "Plan for Children" as an abbreviated form of this plan, entitled: Plan for Accompanied Children and Adolescents.



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CONTEXT OF ACCOMPANIED CHILDREN AND ADOLESCENTS



2. CONTEXT OF ACCOMPANIED CHILDREN AND ADOLESCENTS

The first step to propose actions addressed to the children and adolescents attended to by Diaconía España is to define the concept of “accompanied children”⁴. Regarding this term, it is important to highlight that the same is not explicitly defined within Community rules on asylum. However, the European Union Agency for Asylum proposes a definition based on the term “unaccompanied minor”, and it specifies that an accompanied minor is a child who arrives on the territory of the Member States accompanied by his/her parent(s) or an adult responsible for him/her whether by law or by the practice of the Member State concerned, and for as long as he/she is effectively taken into the care of such a person (EASO, 2019). A similar definition is provided by the aforementioned Resolution of the SEM of 9th January 2023, since it indicates that any family situation that includes an “accompanied minor” may constitute an indicator of a vulnerable situation. We should also specify that these displaced children, accompanied by family, access the reception system as applicants for international protection (or with the intention to apply for international protection) or as temporary protection beneficiaries.

The situation of the children and adolescents that we attend to in Diaconía is framed within a global context of forced displacement and humanitarian crises that affects millions of children around the world.

ACCORDING TO UNHCR'S REPORT GLOBAL TRENDS: FORCED DISPLACEMENT IN 2022⁵ THERE ARE 35.3 MILLION REFUGEES, OF WHICH ABOUT 41% ARE MINORS. BASED ON THE LATEST AVAILABLE DATA⁶ IN MARCH 2023, THERE WERE 34,725 PEOPLE IN THE INTERNATIONAL PROTECTION RECEPTION SYSTEM IN SPAIN; OF WHICH 31% WERE MINORS.

Accompanied by their families, these minors are forced to leave their homes due to armed conflicts, persecutions, violence, natural disasters, and other emergency situations, crossing international borders in search of security and having to rebuild their lives within unknown and often hostile environments, while depending on adults for their protection and care (UNHCR, 2022). The figures show how pressing this situation

⁴ Throughout this document, different terms will be used to refer to this group: “accompanied migrant children”, “refugee children” (although most of them have not yet been granted international protection), simply “accompanied children”, or, as referred to by Lázaro et al. (2016), “children who arrive as part of a family”.

⁵ Data updated on 31st May 2023. Available at <https://www.acnur.org/publicaciones/acnur-tendencias-globales-de-desplazamiento-forzado-2022>

⁶ Infographics by the Spanish Permanent Immigration Observatory (inclusion.gob.es)

has been in recent years: **there has been an increase in the percentage of children and adolescent asylum seekers, from 15% in 2021 to 18% in 2022 (CEAR, 2023).**

Some of the main challenges and vulnerabilities with which accompanied children and adolescents are faced include **exposure to trauma and violence** during their migratory route, their **separation from their families and communities in the country of origin**, the **lack of access to basic services such as education and healthcare**, and their **vulnerability to exploitation and abuse** (Save the Children, 2009).

Additionally, there are social, economic, and political circumstances that make their lives significantly different from those of other minors. These disparities may be the result of factors such as the socio-economic level of their families, their geographical location, their ethnicity, their gender, or their disability, among others, and they may influence their access to resources and opportunities, as well as their vulnerability to various forms of violence, exploitation, and discrimination (UNICEF, 2019).

In order to design effective interventions that address the challenges and vulnerabilities of accompanied children and adolescents, **it is crucial that their situation is analysed.**

MAIN CHALLENGES THEY FACE:

*** Security and protection risks:**

They are exposed to risks such as exploitation, gender violence, and child abuse, aggravated by their lack of legal and social protection in the country of destination. Violence during childhood is associated with mental and physical health problems, thus requiring coordinated and cross-sectional actions for its prevention and mitigation (Save the Children, 2020; WHO, 2020; ANAR Foundation, 2021).

*** Limited access to basic services:**

They face challenges due to their administrative situation and discrimination, which limits their access to health services, decent housing, and nutritious food, which negatively affects their health and their social participation capabilities (UNICEF, 2020; UNHCR, 2022).

*** Trauma and emotional stress:**

Forced displacement and traumatic experiences cause mental health issues such as stress, anxiety, and depression, especially among those who have witnessed violence or have lost loved ones (UNICEF, 2022).

*** Integration and adaptation challenges:**

When they arrive to their countries of destination, they face integration and adaptation difficulties due to discrimination, stigmatisation, and exclusion, which prevents them from fully participating in the reception society. It is essential to analyse data on their situation in order to provide proper protection and assistance measures (UNICEF, 2022).

Considering this background, **this Plan has been designed based on the needs expressed by children and adolescents themselves, as well as by their parents and Diaconía España's professional teams.** Their perspectives, experiences, and aspirations have been taken into account when planning actions addressed at accompanied migrant

children, with the aim of **ensuring their access to basic services, protection from violence and exploitation, and psychosocial support, and facilitating new education and development opportunities.**





LEGAL FRAMEWORK FOR ACCOMPANIED MIGRANT CHILDREN



3. LEGAL FRAMEWORK FOR ACCOMPANIED MIGRANT CHILDREN

The 20th century has seen a remarkable evolution in terms of children and adolescents' rights and well-being, which contrasts with a prior history marked by their conception as property of their parents, evolving beings, or objects to be protected (Lázaro, 2010). This shift is evidenced by the acknowledgement of the child as an active subject of rights, a legal and social transformation that has been supported by different advances in disciplines such as psychology, pedagogy, and medicine.

Aside from the international protection regulations, which will be developed in the next section, we will try to include below the legal framework that reflects such paradigm shift, which motivates us to integrate it into our daily activities, and that, consequently, encourages us to promote this Plan for Accompanied Children at Diakonía.

A. INTERNATIONAL REGULATIONS

We start our analysis of international regulations with the **Universal Declaration of Human Rights** of 1948 (UDHR), the **International Covenant on Economic, Social and Cultural Rights** of 1966 (ICESCR), and the **International Covenant on Civil and Political Rights** of 1976 (ICCPR). These documents set forth a wide range of **social, economic, political, civil, and cultural rights** naturally applicable to children in any context.

In the case of the **UDHR**, the **rights to life, liberty, and security** (art. 3); to **non-discrimination** (art. 2); to seek asylum (art. 14); to an **adequate standard of living** (art. 25); **or to education** (art. 26) were established. The ICESCR reiterated the prohibition of discrimination (art. 2.2), as well as the right to an adequate standard of living (art. 11) and to education (art. 13), and it added **protection and assistance to the family** (art. 10) and the right to health (art. 12). Lastly, the ICCPR ensured once more the right to non-discrimination (art. 2) and to life (art. 6) and, within this document, it is worth noting the **prohibition of torture and other cruel, inhuman, or degrading treatment or punishment**, enshrined in article 7, as well as the specific protection of children (art. 24) and minorities (art. 27). Most of these rights are somewhat violated or disrupted in the case of migrant children, whether they are refugees or not.

In 1989, the **Convention on the Rights of the Child** (henceforth, "the Convention" or "CRC") emerged due to the need to emphasise that children should also be entitled to human rights and specify some of the requirements of said rights in their particular situation, as well as to implement specific protection techniques (Lázaro, 2010). The Convention was ratified by Spain in 1990, **marking a significant shift in the perception of children by recognising them as deserving of special attention and protection and as social, economic, political, civil, and cultural actors**. The CRC, the most widely ratified human rights instrument in history, with the exception of the United States, **ensures and sets minimum standards to protect the rights of children in every circumstance** (UNICEF, n.d.).

The CRC comprises 54 articles that encompass a wide range of civil, political, social, economic, and cultural rights. The four principles on which the Convention is built, which are also rights, are the following: **non-discrimination, primacy of the best interests of the child, ensuring survival and full development, and participation of the child.**

PRINCIPLES OF THE CONVENTION ON THE RIGHTS OF THE CHILD (CRC)

BEST INTERESTS OF THE CHILD:

Foreseen in article 3 of the CRC. The **United Nations' Committee on the Rights of the Child**, in its General Comment No. 14 (2013), has indicated that this concept has three dimensions:

* LEGAL PRINCIPLE:

If a legal provision is open to more than one interpretation, the interpretation which most effectively serves the child's best interests should be chosen.

* RULE OF PROCEDURE:

the decision-making process should include an evaluation of the possible impact of the decision on children and adolescents.

* SUBSTANTIVE RIGHT:

It implies that any measure related to a child should be based on the consideration of their best interests, which should be taken as a primary consideration above any other legitimate interest (Lázaro, 2010).

RIGHT TO NON-DISCRIMINATION:

According to article 2 of the CRC, children and adolescents are entitled to enjoy their rights without discrimination of any kind, irrespective of their ethnic origin, gender, religion, disability, or any other status.

RIGHT TO LIFE, SURVIVAL, AND DEVELOPMENT:

Article 6 of the CRC states that children and adolescents have the right to life; to an adequate standard of living for their physical, mental, spiritual, moral, and social development; and to enjoy the highest standards of health and well-being.

PARTICIPATION OF THE CHILD:

This right, which can also be defined as the right to be heard and recognised in article 12, means that children and adolescents should be able to freely express their views in all matters affecting them and that these views should be given due weight in accordance with their age and maturity.

In addition to the Convention, there are other international treaties affecting accompanied migrant children, such as the **Convention relating to the Status of Refugees** of 1951 and its 1967 Protocol, which acknowledge the right to international protection and non-refoulement. As stated above, these regulations will be developed in the next section.

There are also other international regulations and protocols that reflect a joint commitment to the protection of the rights of children and adolescents in different contexts. For instance, the United Nations' **Convention on the Rights of Persons with Disabilities**, ratified by Spain, ensures equal rights for minors with disabilities, something to be taken into consideration given the broad range of circumstances presented by the children and adolescents that come to our reception centres. **The General Comment No. 6 (2005) of the Committee on the Rights of the Child provides guidance on the protection of unaccompanied minors** separated from their families. Additionally, the **Optional Protocols on child prostitution and child pornography**, ratified by Spain, reinforce protection from sexual exploitation.

Regarding violence against children, the **Convention on the Elimination of All Forms of Discrimination against Women (CEDAW)**, ratified by Spain, addresses this issue from a gender perspective. Other international initiatives, such as the **Millenium Development Goals and the Sustainable Development Goals (SDGs)**, have strengthened global commitment with the protection and well-being of children, namely:



* **SDG 4:** ensures equitable access to inclusive quality education.

* **SDG 3:** ensures adequate healthcare and accessible health services.

* **SDG 16:** promotes peaceful and inclusive societies, providing a safe environment.

These goals create a comprehensive framework to ensure a sustainable and decent future for children and adolescents around the world.

B. EUROPEAN REGULATIONS

At European level, the European **Convention for the Protection of Human Rights and Fundamental Freedoms**, approved by the Council of Europe in 1950 and in force since 1953, stands out. Ratified by Spain in 1977, this convention **protects human rights and fundamental freedoms in Europe** and, even though it does not address the rights of children and adolescents specifically, its case law has contributed to the reinforcement of the protection of their rights, including aspects such as **the right to family life, the protection from inhuman or degrading treatment, and the right to a fair trial**.

The **Charter of Fundamental Rights of the European Union**, on the other hand, explicitly protects the rights of children and adolescents in the EU, ensuring **rights such as dignity, integrity of the person, equality, non-discrimination, protection of the child, and the right to education**.

The **European Charter of Children's Rights**, adopted in Strasbourg in 1992, is another crucial instrument that recognises and protects the rights of children and adolescents in Europe. This Charter **sets forth fundamental rights such as the right to life, health, education, protection from violence, and exploitation, and the right to voice their views on matters affecting them**, reflecting the commitment of EU Member States with these principles.

In parallel, the conventions of the Council of Europe set forth essential measures to protect and promote the rights of children and adolescents. The **Convention on the Adoption of Children**, ratified by Spain in November 2009, **guarantees that adoption processes are in the best interests of the child, ensuring their well-being and protection**. On the other hand, the **Convention on the Protection of Children against Sexual Exploitation and Sexual Abuse** (Lanzarote Convention), ratified by Spain in July 2010, **establishes measures to prevent and fight against the sexual exploitation of children**, protecting minors in situations of abuse and violence.

Additionally, the **European Convention on the Exercise of Children's Rights**, ratified by Spain in December 1997, acknowledges and protects the rights of children and adolescents in every area of their lives, **ensuring their participation in matters affecting them and their access to a safe and decent life**. Furthermore, the **Istanbul Convention**, ratified by Spain in June 2014, **focuses on the prevention and fight against gender violence and domestic violence**, recognising the impact that this kind of violence has on children and establishing **measures to protect children and adolescents who are witnesses or victims of such situations**.

Finally, it is worth mentioning the **European Child Guarantee**, an initiative proposed by the European Commission in 2021 which **aims to break the cycle of child poverty**, urging Member States to implement specific measures. Its purpose is to ensure that children and adolescents have **access to quality services that foster their comprehensive development and their social integration**. This includes the identification of specific groups who are in need, such as migrant children.

C. NATIONAL REGULATIONS

Regarding Spanish regulations, a good starting point is the **Spanish Constitution of 1978, which recognises and ensures the fundamental rights of all individuals, including children, as the basis for a democratic society**. **Spanish Organic Law 2/2006 on education regulates the right to education** and sets the general principles of the Spanish education system, **ensuring quality and equitable access**. **Spanish Organic Law 3/2007 on the effective equality of women and men, on the other hand, ensures equal opportunities for boys and girls**, as well as the prevention and eradication of gender violence, specifically protecting children and adolescents who are victims of this kind of violence.

Furthermore, **Spanish Organic Law 4/2000 on the rights and freedoms of foreign nationals in Spain and on their social integration** sets forth measures to **protect migrant and refugee children and adolescents**, ensuring their well-being and comprehensive development.

Additionally, **other Spanish Laws**, such as **Law 27/2003 regulating the order for protection of domestic violence victims**, **Organic Law 1/2004 on comprehensive protection measures against gender violence**, and **Law 39/2006 on the promotion of personal autonomy and care for dependant persons**, **provide a comprehensive legal framework to protect vulnerable children and adolescents**.

In recent decades, **Spain has experienced significant progress in the protection of the rights of children**, implementing policies and legal frameworks that foster their well-being and comprehensive development. The first great milestone was **Spanish Law 1/1996, of 15th January, on the legal protection of minors** (henceforth, **LOPJM**, as per the Spanish acronym), which transposed into Spanish legal system the CRC and, **among other rights, that of the bests interests of the child and the right to be heard** (Olaguibel, 2022).

This Law also **establishes that foreign children and adolescents living in Spain “have the right to education, healthcare, and basic social services and benefits in the same conditions as Spanish minors”** and also that the aim of public policies will be to achieve their “full integration into the Spanish society”. Besides, this law stresses that, **due to their special vulnerability, public administrations will safeguard minors who are in need of international protection**.

The following most important milestones in this sense were the **reforms to the protection system applied by means of Spanish Organic Law 8/2015**, of 22nd July, modifying the protection system for children and adolescents, and **Spanish Law 26/2015**, modifying the protection system for children and adolescents, which reinforced the legal framework for the protection of the rights of children and adolescents in Spain. **These laws strengthened the measures for prevention, detection, and response to violence against children and child abuse**, in addition to **improving the mechanisms for coordination between public administrations and the actors involved** in the protection of children while **substantiating the best interests of the minor**. The latter aspect is absolutely decisive for the Plan, since we have observed that the best interests of the child are not being determined or considered. **The first article of Spanish Organic Law 8/2015 states that, in order to determine the best interests of the child, the following general criteria should be taken into account:**



- a. **The protection of the right to life, survival, and development of the minor, and the satisfaction of their basic needs**, both from a material, physical, and educational perspective and from an emotional and affective one.
- b. **The consideration of the wishes, feelings, and views of the minor**, as well as of their right to progressively participate – according to their age, maturity, development, and personal evolution – in the process of determining their best interests.
- c. **The convenience of their life and development taking place in an adequate family environment that is free of violence.** Their stay with their family of origin will be prioritised and their family bonds will be preserved as long as it is feasible and favourable for the minor. In the event that a protection measure is agreed upon, family-based care will be prioritised over residential care. If the minor has been separated from their nuclear family, the feasibility and convenience of their return to their family will be assessed considering the evolution of the family since the protection measure was adopted, and the best interests and needs of the minor will always prevail over those of the family.
- d. **The preservation of the minor's identity, culture, religion, convictions, sexual orientation and identity, or language, as well as their non-discrimination** for these or any other conditions, including disability, ensuring a harmonious development of their personality.

The recent **Spanish Organic Law 8/2021**, of 4th June, on the **comprehensive protection of children and adolescents against violence (LOPIVI**, as per the Spanish acronym), also represents an important landmark in the promotion and protection of the rights of children and adolescents in Spain. Its inception stems from the willingness to overcome the existing fragmentation of the legislation on children and adolescents' care; drive a right-based approach; and provide a comprehensive, multi-level, customised, and specialised response to victims of violence. **It has promoted measures at different action levels** (awareness, prevention, early detection, intervention, and repair) and in different areas (family, education, social intervention, protection centres, health, sports and leisure, and digital- and police-related ones) **with particular emphasis on the prevention approach, good treatment, and the reinforcement of the right of the minor to be heard** (Martínez y Escorial, 2021).

Some contributions of the LOPIVI are of particular importance in the context of the reception system. The Law introduces three great concepts:

- ▶ Creating a law that offers comprehensive protection against violence, requires a redefinition of this concept. Therefore, the **LOPIVI brings a new and wider definition of violence**, which, according to article 2, means **“any action, omission, or negligent treatment that deprives minors of their rights and well-being, that threatens or interferes with their orderly physical, mental, or social development, regardless of the way or means by which it is perpetrated**, including any violence exerted through information and communication technologies, especially digital violence”.⁷
- ▶ **Good treatment:** the law does not exclusively focus on enabling a framework for the elimination of violence against children and adolescents, but rather it also **proposes the principle of good treatment, which is the one that fosters all the fundamental rights of children in order to ensure their holistic development giving due consideration to the best interests of every child**, ensuring their participation in the assessment and determination of the same, and without any discrimination.

- ▶ Both aspects give rise to the third concept: **safe environments**. Pursuant to article 3, **a safe environment is that which respects the rights of children and fosters a physically, psychologically, and socially protective atmosphere, including the digital environment.** Another essential matter that is further developed by the LOPIVI is the detection and reporting of cases of violence. It is necessary to create mechanisms that allow to be informed about the highest possible number of cases and, to that end, **it is fundamental that every person who is aware of a potential situation of violence reports it to the competent authority.**

In this sense, **the LOPIVI extends the regulation on the duty to report that was already set forth in the LOPJM** by considering different actions depending on the individual who reports the behaviour and its seriousness. On the one hand, there is general duty to report, which affects citizens as a whole (art. 15), but the **LOPIVI sets a reinforced duty to report in situations of violence** (art. 16) for “those people who, due to their position, trade, profession, or activity, are entrusted with assisting, caring for, teaching, or protecting children and adolescents and, in the exercise of their functions, have become aware of a situation of violence against children and adolescents”. **Within the broad group of individuals that this definition may encompass, the LOPIVI refers specifically to “the personnel [...] of asylum reception centres”.**

This forces us to **rethink the way we work** to ensure that our centres **guarantee safe environments where children are protected from violence** and that, in case of violence, we detect it early and act accordingly.

Lastly, the **Spanish National Action Plan for the Implementation of the European Child Guarantee (2022-2030)**, approved by the Spanish Council of Ministers in 2022, undertakes to **ensure equitable access of children and adolescents to essential services such as education, health, nutrition, housing, and social protection.** This plan, which is part of the National Strategy on Children and Adolescents, **aims at reducing child poverty and fostering the well-being of young people in Spain.**

These efforts have enhanced identification of the above and care, the training of experts in children protection, and the awareness and participation of civil society in **the defence of the rights of children and adolescents in Spain. However, in relation to migrant or refugee children, there are still impediments in the asylum application procedures and a lack of specialised resources and services to attend to their specific needs is observed**, as well as insufficient coordination between the different public administrations and the organisations responsible for their protection (Save the Children, 2020).

These legal postulates, internalised by adults who live or work with children, already lead to **a right-based approach that guarantees that children are listened to, that their best interests are prioritised and, as a consequence, that they are protected.** Furthermore, they are significant grounds to justify the creation of this plan, irrespective of the context of the children. Nevertheless, precisely **because of the context within which this Plan is developed, there is a legal framework for protection** that requires its own specific chapter.

⁷ The law adds that “In any case, the following shall be understood as violence: physical, psychological, or emotional abuse; physical, humiliating, or denigrating punishment; neglect or negligent treatment; threats, defamation, and libel; exploitation, including sexual violence; corruption; child pornography; prostitution; bullying; sexual harassment; cyberbullying; gender violence; genital mutilation; human trafficking for any purposes; forced marriage; child marriage; unsolicited access to pornography; sexual extortion; and public dissemination of private data; as well as the presence of any violent behaviour in their family sphere”.



4

CHILDREN IN THE INTERNATIONAL PROTECTION RECEPTION SYSTEM AND IN ASYLUM PROCEDURES



4. CHILDREN IN THE INTERNATIONAL PROTECTION RECEPTION SYSTEM AND IN ASYLUM PROCEDURES

In our context, the inclusion of this approach, one that ensures the detection of the specific needs of children and adolescents who are in **Diaconía España's reception centres**, is essential from a two-fold perspective: on the one hand, for the adaptation of the international protection reception system and, on the other, to ensure the substantive and procedural guarantees of the international protection system.

It is worth noting that all of the above are specific legal imperatives of the international protection and reception rules, although we will see that, in spite of that, **this framework has deficiencies that, once again, justify the creation of this Plan.**

A. CHILDREN IN THE RECEPTION SYSTEM

In relation to the reception system, this work is in line with the requirements of articles 14, 21, and 23 of the **European Reception Conditions Directive (2013/33/EU)**. Article 24, which we will not analyse here, is focused on unaccompanied minors.

Firstly, **article 14 of the European Reception Conditions Directive ensures the access of international protection applicants who are minors to the education system under similar conditions as those of nationals** for so long as an expulsion measure against them or their parents is not enforced. This access may be provided in reception centres and shall include secondary education even if the minor has reached the age of majority. Access to the education system shall not be postponed for more than three months from the date on which the application for protection was lodged and, if necessary, preparatory classes, including language classes, shall be provided. **Where access to the education system is not possible due to the specific situation of the minor, the Member State concerned shall offer other education arrangements** in accordance with its national law and practice.

Article 21 of the European Reception Conditions Directive recognises minors as a **vulnerable group**, urging Member States to take into account their specific situation.

Similarly, in Spain, an intent to offer special protection for children and adolescents can be inferred from **article 6 of Spanish Royal Decree 220/2022**, of 29th March, approving the Regulation governing the reception system for international protection, when it sets **ensuring specialised attention to individuals a situation of vulnerability as one of its general principles, including specific and individualised treatment for children and adolescents.**

In this sense, the **Resolution of the SEM**, of 9th January 2023, intends to develop a system of indicators based on the individual circumstances of recipients that facilitates the planning of the reception itinerary and, where appropriate, the implementation of basic or reinforced reception conditions. Among these indicators, **age is mentioned in several sections as one of the factors to be taken into account in order to determine the situation of vulnerability of system beneficiaries**, even though what should be done to satisfy such reinforced reception needs is not stated. This makes it impossible to properly meet said needs.

This hindrance increases when we observe that **the governing documents of the reception system, the Management Guide and the Itinerary Management Procedure, do not consider the best interests of the child**: these are barely mentioned and, when they are actually mentioned, it is merely in relation to financial aid for adults or activities aimed at keeping minors away from daily life at the centres.

The lack of consideration of children and adolescents' best interests during the assessment process of the reception itinerary, as well as the absence of a space for them to be heard, poses significant challenges. Additionally, the lack of stability caused by having to move to other centres and towns negatively affects their schooling and health. **Accompanied children face unique challenges when it comes to their psychosocial integration, which highlights the need for both psychological and legal specialised assistance** (Medusa Derechos Humanos, 2023).

We believe that children cannot be a mere secondary reference in our system's governing documents. For this reason, **we aim to fill the gap that we have detected and to ensure a proper response to the needs and rights of children at each stage of their reception process.**

B. CHILDREN IN THE INTERNATIONAL PROTECTION PROCEDURE

The introduction of a child-centred approach and the proper identification of their needs in the reception system is not only important because it is in itself a right of the child, but rather because it has an impact in their international protection procedures, as well as in those of their family.

The 1951 Geneva Convention relating to the Status of the Refugees protects children and adolescents through the instrument of asylum, in the same way as adults, by preventing the refoulement of those individuals who are persecuted for any of the reasons set out therein. In this line, **the European Asylum Procedures Directive (2013/32/UE)**, in paragraph 29 of its preamble and in article 24, **mentions age as a circumstance that may raise the need for special procedural guarantees** of those applicants who "should be provided with adequate support, including sufficient time, in order to create the conditions necessary for their effective access to procedures and for presenting the elements needed to substantiate their application for international protection".

The same thing happens at national level, as **Spanish Law 12/2009**, of 30th October, regulating the right to asylum and subsidiary protection (henceforth, "**Asylum Law**") indicates, in article 46, paragraphs 1 and 2, that "**the specific situation of international protection applicants or beneficiaries in a vulnerable situation, such as minors,**" among others, shall be taken into account, and that the measures needed to provide them with special treatment, where appropriate, in international protection applications, shall be adopted.⁸

However, as the UNHCR (2009) points out in its child-specific guidelines on international protection, **the Convention has been traditionally interpreted in view of the experience of adults**, which means that **many requests for a refugee status**

submitted by children have been assessed incorrectly or have been generally overlooked.

Among the warnings highlighted by the European Asylum Support Office (2019) in relation to accompanied refugee children and adolescents is the fact that **the best interests of the child and those of the parents do not always align**. In such cases, **it is essential to listen to the views of the minor** at the time of the interview, as well as during the assessment of the application. Besides being supported by the Convention on the Rights of the Child, this also allows the body examining the case to explore the specific grounds for international protection of the minor, which may have not been considered if the minor did not feel comfortable sharing them in the presence of their parents, such as in matters of sexual orientation or gender identity. In this sense, the authorised doctrine (Lázaro et al., 2016) stresses **the need to individualise the role of the minor in the international protection application procedure** (even if it takes place as part of a family).

The UNHCR agrees with the above in its guidelines for refugee children, reaffirming the importance of addressing children's asylum application in a different manner to those of adults and recognising that minors may suffer in a different way due to their immaturity, vulnerability, and different stages of development. **Individual circumstances, including age, are important when evaluating asylum applications, especially when the damage suffered is serious but less serious than the threat to life or freedom.** In certain situations, actions and threats that do not reach the threshold of persecution for adults may entail persecution in the case of minors. Thus, **the need to listen to children proves to be even more pressing**, both on the part of the legal operators who study the case and on the part of those professionals who defend it or who may gather relevant information for the defence of the case.

It is worth noting that in **nine member states of the European Migration Network and in Norway, accompanied refugee minors can submit an international protection application on their own behalf**, although this option is usually subject to specific age requirements. Among **the good practice proposed by this Network to ensure the right of minors to be heard** in asylum procedures, several key measures are included:

1. **Qualified personnel:** it is essential that the personnel be qualified to listen to the minor.
2. **Adapted interviews:** interviews must take place in appropriate facilities based on their age.
3. **Diverse means of communication:** minors are allowed to use different means to inform the authorities of their wish to be interviewed.
4. **Independent analyses:** for refugee adolescents who are above 15 years old, independent analyses of their flight story are conducted, paying special attention to potential independent grounds for asylum, as done in the Netherlands (EASO, 2019).

This is certainly a pending matter for the Spanish legislation and administrative practice.

⁸ It is worth noting that the way in which said procedural guarantees are adopted is subject to regulatory development and that, in this sense, the legislator keeps postponing, since 2009, any progress regarding the regulation of the Asylum Law.



5

JUSTIFICATION AND APPROACH



5. JUSTIFICATION AND APPROACH

The importance of **ensuring the rights of children and adolescents**, especially in the case of **accompanied migrant or refugee children and adolescents**, **underlines the imperative need for an effective protection**. This recognition encourages us to design an **action plan focused on addressing the specific challenges faced** by this vulnerable group.

Despite the progress made in the protection of unaccompanied migrant or refugee children, **the attention given to accompanied children is still insufficient**. This results in a **lack of support adapted to the unique needs** of these children and their families, **thus aggravating their vulnerability**.

THIS IS ALARMING CONSIDERING THAT APPROXIMATELY 33% OF THE INDIVIDUALS IN THE RECEPTION SYSTEM ARE ACCOMPANIED MINORS. SOCIAL ENTITIES AND ORGANISATIONS HAVE EXPRESSED LEGITIMATE CONCERNS ON SEVERAL OCCASIONS ON THE DIFFICULT SITUATIONS THEY OBSERVE, WHICH INCLUDE CASES OF EMOTIONAL, PHYSICAL, AND SEXUAL ABUSE, AS WELL AS THE ABSENCE OF A COMPREHENSIVE SUPPORT PLAN.

Diaconía España has treated the creation of its Plan for Children as a priority in its **operational agenda**, reflecting its compromise with the protection and well-being of migrant children and adolescents who are refugees or in need of international protection. **The financial support of the Step Up Fund, an initiative of the Dutch Council for Refugees**, emphasises the importance and relevance of the project within the context of the protection of human rights and the integration of refugees in Europe. **This financial support will enable Diaconía España to strengthen its capabilities to implement effective strategies and actions in favour of accompanied children.**

Diaconía España, through its daily work with accompanied children and adolescents, **has identified certain deficiencies in the international protection reception system in Spain**. The importance of this Plan is based on the effort to **propose solutions to said deficiencies** while influencing several actors within the system itself.

In the first place, **it directly benefits children and adolescents by providing them with spaces for active participation** and promoting their inclusion in decision-making, which allows them **to express themselves, develop skills, strengthen their resilience**, and rebuild their lives in a safe environment. In addition, **the person responsible for the minor also benefits from it**, since the active participation of children creates an **environment that favours communication, mutual support, and the consolidation of family ties**.

This allows them to become involved in **the decisions affecting minors under their care**, thus reinforcing their role as responsible protectors. Similarly, **professional teams benefit from it** since they receive **clear guidance and specific tools** to work with children and adolescents, which strengthens their professional skills and fosters a collaborative work environment. Furthermore, by recognising and valuing the perspective of children, **an organisational culture based on human rights and equal opportunities is fostered**.

THE PLAN FOR CHILDREN IS CREATED BASED ON THE NEEDS IDENTIFIED WITHIN DIACONÍA ESPAÑA'S NETWORK OF RECEPTION CENTRES FOR INTERNATIONAL PROTECTION APPLICANTS, INCLUDING THE REFLECTIONS AND PROPOSALS OF MINORS, THEIR FAMILIES, AND THE PROFESSIONAL TEAMS THAT WORK WITH THEM IN THE RECEPTION CENTRES. THIS PARTICIPATORY APPROACH HAS A UNIQUE VALUE BECAUSE IT TAKES INTO ACCOUNT THE MAIN ACTORS WITHIN THE RECEPTION SYSTEM.



In this context, **the plan defies paradigms that are rooted in traditional practice and concepts**, challenging the normalised, Western, adult-centred vision that has been predominant when protecting children. The aim is **to ensure that children and adolescents have a voice and a vote in those decisions that affect them**, acknowledging their views according to their age and maturity.

The adoption of an intercultural, cross-sectional, human right-based approach with the active participation of children and adolescents is essential for several reasons:

- ▶ **Respect for human dignity:** it recognises the inherent dignity of migrant and/or refugee children and adolescents, protecting their rights and ensuring a dignified treatment at every stage of their migration, as stipulated by the Universal Declaration of Human Rights and the Convention on the Rights of the Child (UNICEF, 2007).
- ▶ **Promotion of equality and non-discrimination:** by valuing cultural diversity, the discrimination with which marginalised groups are faced is effectively tackled, ensuring that every voice is heard. The cross-sectional approach recognises that inequalities emerge from the interaction of multiple factors, such as gender, ethnicity, social class, sexual orientation, disability, and migratory status (Anthias, 2002; La Barbera, 2016; Nash, 2008).
- ▶ **Inclusive and participatory approach:** active participation of children and adolescents in the creation, implementation, and evaluation of plans ensures that their needs and perspectives are taken into account. The Convention on the Rights of the Child recognises their right to express their views and be heard in every matter affecting them (Lansdown, 2005).

This plan entails continuous awareness and training of all the actors involved in the protection of accompanied children, fostering a **critical reflection on practice and values** to align actions with the principles of respect, dignity and participation of children.





6

NEEDS ASSESSMENT

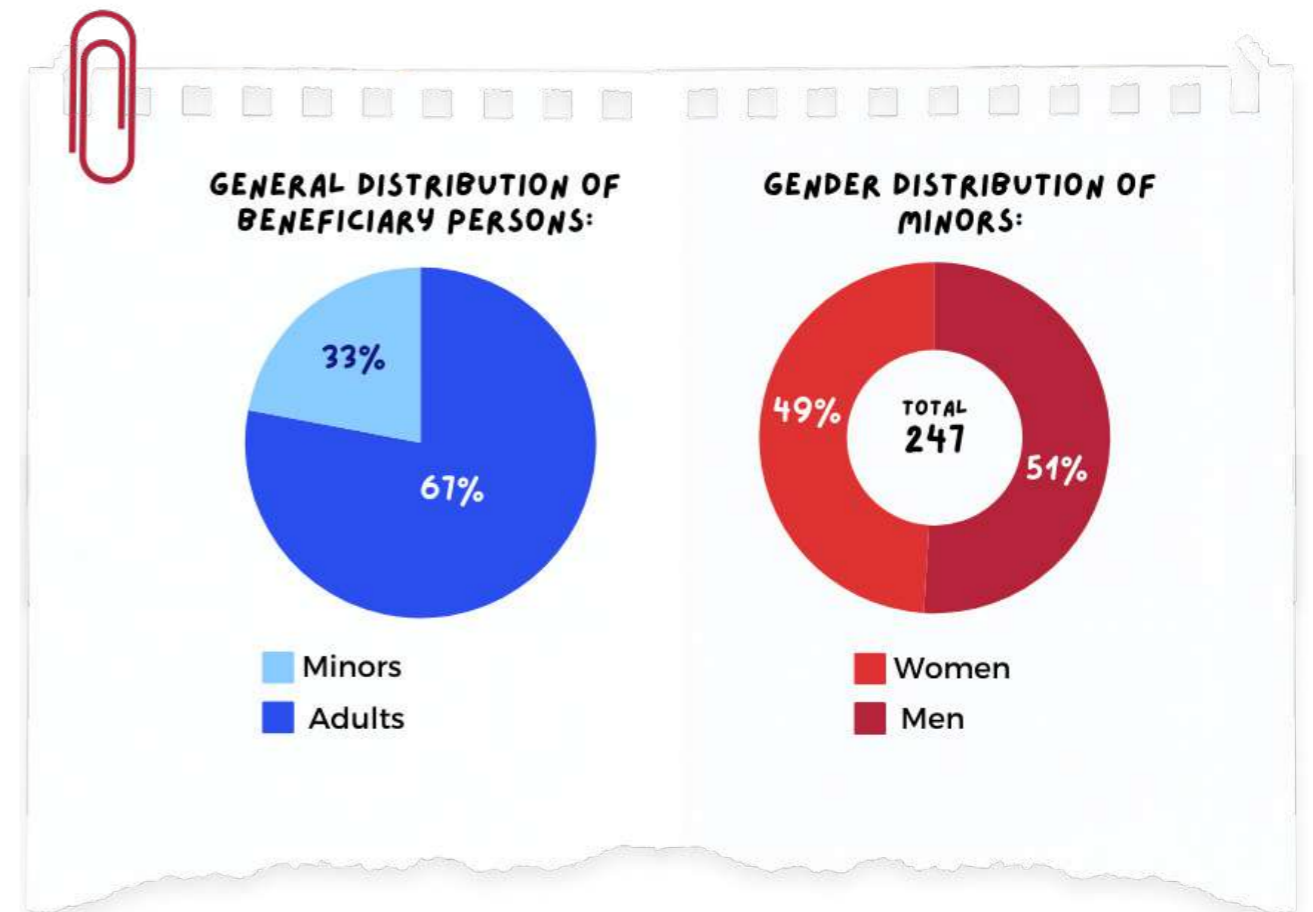


6. NEEDS ASSESSMENT

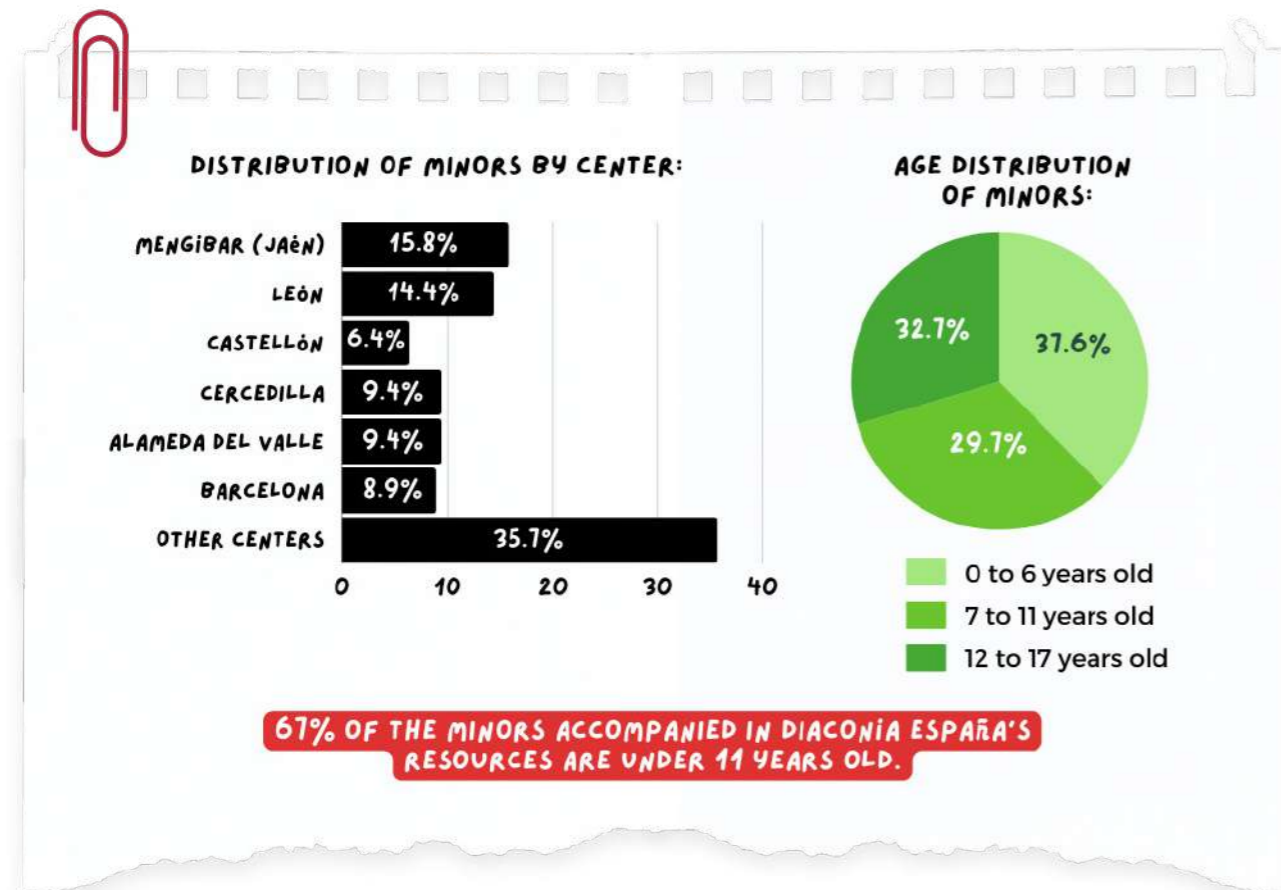
This section of the Plan for Children reflects the results of the elaboration process of the assessment of problems, needs, and interests of migrant or refugee accompanied children and adolescents who live in Diaconía España's reception centres within the framework of the international protection reception system. This assessment aims to identify the needs of children in a holistic and comprehensive manner.

6.1. STATISTICAL DATA ON CHILDREN AND ADOLESCENTS IN DIACONÍA ESPAÑA'S RECEPTION CENTRES

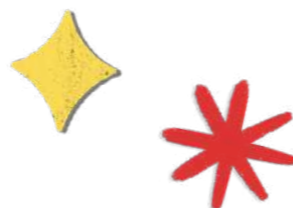
In 2023, Diaconía España accommodated a total of 247 minors between the ages of 0 and 17 in their reception centres of the international protection system. These minors represent 33% of the beneficiaries of the reception places at Diaconía España, with a gender breakdown of 49% women and 51% men.



Diaconía España's reception centres are located in the Spanish provinces of Madrid, Cádiz, Jaén, Castellón, Lugo, Barcelona, Toledo, and León. The centre of Mengíbar (Jaén) has the greatest concentration of minors, 15.8% of the total, which means that almost one out of every six minors under our care are located in this municipality. Their ages are mainly between 0 and 6 years old. The centre of León (14.4%) has the second highest number of minors, with a relatively balanced distribution among the different age groups. Most of the minors between the ages of 0 and 6 are in Castellón (6.4%), Cercedilla (9.4%), and Alameda del Valle (9.4%). The age group from 7 to 11 years old is more prevalent in Barcelona (8.9%). The remaining reception centres have a more balanced distribution among the different age groups.



The analysis reveals that the age group from 0 to 6 years old is the largest, representing 37.6% of the total, followed by the group from 12 to 17 (32.7%) and from 7 to 11 years old (29.7%). It has been noted that almost 67% of the accompanied minors in Diaconía's centres are under 11 years old, which demonstrates the need to focus our care and resources on early childhood and those who are still in their school years. These data are very useful for Diaconía España, since they facilitate the planning and allocation of resources in the different centres, taking into account the differences among the different age groups.



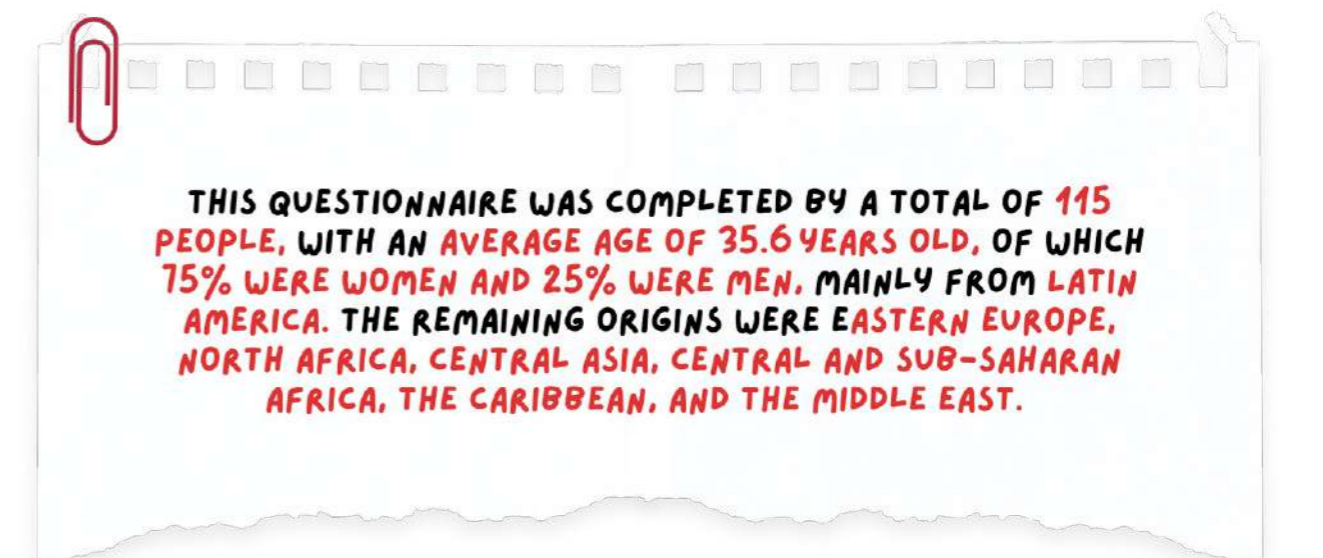
6.2. METHODOLOGY

The assessment process for the elaboration of the 2024 Plan for Children has been carried out by means of a **participatory methodology focused on the rights of children and adolescents**. This methodology was based on the **creation of an inclusive, safe, and respectful environment, encouraging active participation** of children and adolescents **in the decisions** that affect them and **ensuring that their rights are respected and protected**.

The methodology adopted seeks a **comprehensive approach**, taking into account the main **actors involved** in the international protection reception system: **children themselves, families, and the professional teams** at the different locations. Specific topics were selected in order to analyse the needs of the above actors: **spaces for children, vulnerabilities, family relationships, education, and nutrition and health**. The selection criteria for these topics is **aligned with the strategic axes of the European Child Guarantee**.

In order to understand the experiences and needs of children, different sessions were conducted **using non-formal methods, such as drawing**, which allowed children and adolescents **to express themselves in a creative way and without any language barriers**. These sessions were conducted at the **centres of Jaén and León**, which had the highest concentration of minors in 2023.

Additionally, in order to assess the needs and suggested improvements from the perspective of the professional teams, **matrix-tables were used and sent to every location**, thus facilitating the **identification and organisation of the most relevant information** in relation to the needs of children and adolescents. Regarding the **families, a questionnaire collecting data on different areas of interest** was implemented. This was supplemented by a **descriptive statistical analysis** to provide an overview of the results obtained and detect relevant patterns to guide future actions.



This comprehensive methodology ensures a complete understanding of the needs and aspirations of all the actors involved in taking care and protecting accompanied migrant or refugee children and adolescents.

6.3. RESULTS OBTAINED FROM THE NEEDS ASSESSMENT (PROFESSIONALS, CHILDREN, AND FAMILIES)

The data gathered reveal several important aspects that encompass different topics and reflect the concerns, demands, and aspirations identified by the different actors involved: professional teams, children and adolescents⁹, and families. This section will analyse in detail the findings obtained, providing a comprehensive picture of the current needs and priority intervention areas in terms of infrastructure and services addressed to children and adolescents.

6.3.1. SPACES FOR CHILDREN

This section will analyse in detail the findings obtained, providing a comprehensive picture of the current needs and priority intervention areas addressed to children and adolescents.

* Lack of Child-Specific Spaces

Some of the analysed reception centres do not have sufficient spaces and resources dedicated exclusively to children and adolescents. The guides of the international protection reception system do not provide for the existence of said spaces, so no specific resources for their implementation are foreseen. This gap has a negative impact on the well-being and safety of minors.

To make up for this lack of spaces, we have resorted to the referral to external resources specialised in children and adolescents. However, this is not always possible due to the lack of external resources that are able to work with refugee children and to the fact that many of the reception centres of Diaconía España are located in areas that are far from city centres, where there are usually more resources available.

Additionally, the lack of specific spaces for the different stages of childhood makes it difficult to develop appropriate activities and adequate social interactions for each age group, which highlights the importance of providing safe and varied environments. Within the reception centres, several concerns are raised, such as the need for spaces for minors that are more private and away from other adult beneficiaries of international protection, and the importance of a calm, orderly, and properly lit atmosphere, especially for studying.

Currently, regular and stimulating activities are carried out with minors at the reception centres of Diaconía España. The amount and quality of the services offered to children are positively influenced by the commitment of the professional teams and by their professional involvement in guaranteeing the rights of the minors. Those centres that offer more activities and support have less co-living problems, whereas other locations are faced with more difficulties in order to adapt the available resources and offer more services. This underlines the need of this Plan for Children as a reference framework for coordinated and unified action among the different locations.

⁹ Los dibujos que aparecen a lo largo de todo el Plan, han sido elaborados por la infancia y adolescencia residentes en centros de acogida de Diaconía España.

6.3.2. VULNERABILITIES

We move into the second part of our needs assessment, focused on the vulnerabilities identified at Diaconía's reception centres. The aim of this section is to examine risk areas and the different types of vulnerability that are present in these environments, ranging from psychosocial risk situations to unfavourable socio-economic conditions.

* Adaptation Processes: Negative Impact of Language Barriers

The assessment refers repeatedly to the negative influence of language barriers, especially with regard to school performance and the process of adaptation to their new environment. In general, children and adolescents from non-Spanish-speaking countries find it difficult to express themselves in Spanish. This language barrier has a negative impact on their ability to adapt to the school system, affecting their academic performance and making their integration with their equals at school or high school more difficult. These consequences have a negative impact on their well-being and their process of integration in the country.

* Identification of vulnerabilities

Among the vulnerabilities identified in relation to children, difficulties such as language delay, autism spectrum disorders (ASDs), and eating disorders have been detected. In relation to families, certain conditions that increase the vulnerability of children have been identified. Poor parenting skills or the lack thereof leads to parenting styles that range from authoritarian styles to, in cases of particularly vulnerable families, negligent ones. Workshops are currently being held in order to improve these skills, although it is necessary to offer an accompaniment that is specific and adapted to each case.

A positive aspect that is worth noting is the general predisposition of families to work with their children and to improve communication. Nevertheless, another particularly vulnerable aspect among families in the international reception system is migratory grief, which aggravates certain mental health issues and affects their parenting style.

* Low Involvement of Social Services

Professional teams note the lack of involvement of social services in the care and support for these vulnerable situations, which entails the need to improve resources and intervention in this area. The lack of active participation on the part of social services reveals a significant gap in the provision of support to vulnerable families and minors. This lack of involvement may be due to a number of factors, which range from the lack of resources to the personnel's need for more training and awareness when it comes to the identification and handling of cases of violence and other forms of vulnerability.

Proper training of social services' personnel is key to ensure an effective and sensitive response to the needs of families and minors in a vulnerable situation. This training should not only address the identification and management of

cases of violence, but also **the promotion of intervention practices focused on the well-being and safety of those affected by them.**

* Training of International Protection Teams

Professional teams prove to have basic knowledge to intervene in cases of vulnerability and violence. However, an **urgent need for more specialised training** has been identified. The complexity of the problems faced by minors and their families requires in-depth and up-to-date knowledge in different areas. **Receiving specialised training allows reception teams to develop specific skills to identify, assess, and effectively address the needs and the risks associated with each situation.** In this sense, the importance of empathy, cultural sensitivity, and interdisciplinary collaboration when working with families and minors who are at risk should be emphasised.

* Risks during Adolescence

Adolescence is a critical stage of development, marked by various specific risks such as **eating disorders, self-harm, consumption of toxic substances, and a tendency to emotionally dependent relationships.** Furthermore, **addiction to technology and social isolation** have been identified as the **main challenges in this group.** These factors highlight the importance of paying special attention to this development stage. Therefore, **it is essential that specific interventions be implemented to prevent this risky behaviour** by means of **educational and emotional support** programmes specifically designed for adolescents.

* Response Capability in Emergency Situations

Based on the information collected, professional **teams have reported to have basic knowledge on how to respond to emergency situations.** Their maxim is to “observe, inform, and report”. However, they agree on **the need for more specific training** on these topics, particularly in **cases of violence against children.**

Among families, the concern for the safety of their children within the centre **and the access to specific resources for emergencies is an important aspect.** Even though some families report that their children have experienced vulnerable or dangerous situations, these cases only represent a minority. Most claim to respond adequately to emergencies and to know how to proceed, although there is a group that recognises that they do not always do so, which stresses **the need for continuous training and preparation in this sense.**

6.3.3. FAMILY RELATIONSHIPS

In this third part, **the interaction dynamics between minors and their families** in the context of the reception centres **are analysed.** Mainly the following has been detected:

* Different parenting styles

The professional teams who work with the families at the reception centres **observed different models of parenting**, ranging from permissiveness to authoritarianism, **with a common lack of positive parenting skills.** Nevertheless, **at Diaconía’s reception centres various tools have been implemented** to address this situation. In some locations, **a joint effort between the areas of psychology and social education** has been observed and has allowed teams to **foster positive parenting workshops**, which are essential to improve parenting styles.

Besides, **during the first years of parenting**, there is a notable **rigidity, rigorousness, and inflexibility towards children**, something that is addressed, where possible, at **workshops with the families.** This inflexibility contrasts with **negligent parenting styles among more vulnerable families**, such as single-parent families or those with mental health issues.

From a family perspective, perceptions of childcare differ from the aforementioned styles. **In a survey conducted with families, most families stated that they manage conflict with their children by explaining the consequences of their actions and setting clear rules.** Furthermore, **an important percentage talks to their children and negotiates** with them in order to solve problems, allowing them to make decisions and take responsibility according to their age. This dissonance between both perceptions may indicate a **bias towards social desirability**, which **leads families to overvalue their parenting capabilities** with the aim of seeming “exemplary parents”.

* Level of Family Involvement

In many locations, a high level of family participation in the upbringing of minors has been reported, although in some areas a lack of supervision has also been noted. Nonetheless, **most cases reveal a strong commitment to the promotion of children’s self-sufficiency and responsibility**, as well as to their holistic upbringing and education.

The results of the survey completed by the families indicate that **a significant percentage of parents dedicates more than 10 hours a week to shared activities with their children**, while **another group spends between 1 and 3 hours a week.** However, **most of them recognise the importance of daily interaction** and of having conversations with their children.

During adolescence, a tendency to **resort to the local team of the reception centre as an authority figure** to support their parenting is observed among parents. In addition, the teams have reported **the phenomenon of “parentification” of minors**, where roles are reversed and **children and adolescents take responsibility for looking after the family.**



* Reconciliation Difficulties

At one of the reception centres, a noticeable difficulty among mothers has been identified **when it comes to reconciling caring for the minors** and attending Spanish lessons. This situation reflects a wider issue, since mothers face the need to improve their linguistic competence while being responsible for caring for their children and educating them. Hence, mothers express great difficulty in balancing family responsibilities and domestic chores, which causes them to suffer considerable stress. **The lack of time and energy affects both the well-being of the mothers and the quality of care and attention** provided to their children, and the lack of adequate solutions for reconciling these responsibilities poses a significant challenge for families.

6.3.4. EDUCATION

Education is essential for the integration and development of minors, but it faces significant obstacles within the context of the international protection reception system. We have identified the following areas with difficulties:

* Support with School Work

Parents face numerous impediments to support their children with their schoolwork, a situation worsened by the language barrier in the case of non-Spanish-speaking families. The efforts made by many centres of Diakonía España to offer this type of support is worth noting, as it demonstrates a special commitment to the education of children and adolescents. However, this support is not available at every location; some centres opt for the referral to external resources or, in some cases, do not offer any kind of school support. This variability when it comes to the availability of this kind of support in different locations highlights the need for a more homogeneous and equitable approach. It is essential that access to free school reinforcement programmes be ensured, especially to reduce the education gap and be able to ensure access to education under equal conditions.

* Language and Digital Barriers

Family monitoring of the education of children and adolescents is hindered by language and digital barriers. These barriers hamper smooth and effective communication between educational institutions and families, making it difficult to understand schoolwork and academic progress. Additionally, meetings with form tutors and school meetings attended by families are challenging, since they often lack the linguistic and digital skills needed to properly support their children in their education. Minors face difficulties to adapt to new environments and education systems after migrating to a new country, which complicates their integration and academic progress.



* Relations with School Centres

In spite of the coordinated efforts of the professional teams and families to establish and maintain smooth communication with schools and high schools and build solid relationships, significant obstacles to these relationships are perceived. In many cases, although communication channels are established, the support offered by school centres is usually insufficient and it does not fully satisfy the needs of the minors and their families. Limitations in the support received from schools and high schools can lead to difficulties in accessing specialised educational resources, curriculum adaptations, or individualised support programs, which could negatively affect the academic progress and general well-being of the minors.

* Study Spaces

Some centres have created dedicated areas for study, which reflects an effort to effectively satisfy the educational needs of children and adolescents. This approach underlines the importance of the physical environment in the educational process of young people. During childhood (from 6 to 12 years old), children usually carry out their schoolwork in common spaces at the centre, in addition to having a desk in their rooms. In spite of this, the conditions and available resources in these spaces still need improvement.

* Access to Nursery Schools

In some locations, a lack of places available in nursery schools is observed, which poses an additional challenge for families in relation to reconciliation and caring for their children. This situation not only affects them in terms of time availability, especially in the case of mothers, but also limits the ability of families to focus on their personal goals during their process of adaptation to and integration in the country. Additionally, the lack of opportunities for early socialisation and active development of children has a negative impact in their emotional and social growth.

* Cases of Bullying and/or Discrimination

Cases of bullying have been identified in some locations, which causes great concern for the safety and well-being of children and adolescents in school and community environments. It is particularly alarming to observe that **some of these cases may be linked to ethnic/racial reasons**, as evidenced in two centres, which stresses **the need to address discrimination and promote inclusion in these environments**. Bullying does not only negatively affect the educational experience of minors, but it **may also have serious consequences for their mental and emotional health, as well as for their academic performance**. This highlights **the importance of implementing effective strategies for the prevention of and response to bullying in schools and communities, as well as of promoting a culture of respect and tolerance among students in the centres**.

* Need for Technological Resources

At one of the centres in particular, **an urgent need for technological resources in order to improve the quality of education** is identified. The availability of controlled technological resources for children and adolescents at reception centres can **provide valuable tools for interactive learning and for the development of digital skills**, preparing them to face new challenges. Furthermore, access to adequate technological resources may help bridge the digital divide and promote equity in education.

6.3.5. NUTRITION AND HEALTH

This section is focused on analysing the dietary and health conditions of minors, identifying potential activities to develop this essential element for their comprehensive well-being.

* Nutrition and Health-Based Approach

In various reception centres, children and adolescents' nutrition and health are prioritised by means of the implementation of a balanced diet and proper healthcare. Although many minors prefer food that is rich in carbohydrates and fat, they also show interest in healthy alternatives and they wish to have more say on their food choices. This approach focused on food and healthcare is reflected in specific actions, such as **following balanced diets in many reception centres of Diagonía España**. On the part of the families, the nutrition of children and adolescents is perceived to be excellent or good, which suggests that the effort to ensure a proper diet at the centres is effective.

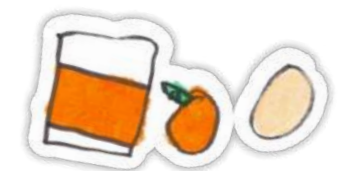
Additionally, it is worth noting **the proper access to healthcare and the provision of at least one healthy meal a day** through the school cafeteria in some locations, although it is still considered that **there may be room for improvement in terms of the quality and variety of food choices offered**.

* Access to the Healthcare System

The access to the healthcare system in the reception centres is generally considered to be good, ensuring the right to health at every stage of development. However, **deficiencies have been detected at some centres in relation to particularly vulnerable cases**. These deficiencies **may be linked to various factors**, such as **limited access to medical services, cultural or language barriers** that hinder communication with health professionals, and **socio-economic problems** affecting the ability of families to obtain specialised and adequate healthcare.

* Coverage of Dental Expenses

The lack of coverage of dental expenses in the Spanish public healthcare system represents an important problem for many families that lack the financial resources to pay for adequate dental services. This situation may result in **untreated oral health problems**, which may trigger **chronic pain, infections, and serious long-term complications**. Therefore, **preventive dental care is crucial to keep a good oral health** and prevent conditions during childhood and adolescence. Although agreements with dental clinics have been arranged in some municipalities in order to offer this service to children, **this practice is not widespread**.



6.3.6. OTHER PROBLEMS

In this section, we have detected **some problems that have arisen repeatedly** throughout the process of gathering information in relation to the different areas of analysis:

* Access and Referral to External Resources

In certain locations, the difficulty to refer minors to external resources, due to the isolation of many centres, highlights the need to improve the connections and access to these services. Referrals to external resources, such as nursery schools or urban camps, are an effective strategy to supplement the internal supply when it is limited. Additionally, **the passivity of public bodies, especially social services, in situations in which their intervention is required, stresses the importance of achieving more proactivity and commitment on the part of these institutions.**

* Inadequate Use of Technology

The excessive use of digital devices implies a significant obstacle for the communication and healthy development of children and adolescents, as pointed out by both the professionals who work at the reception centres and the families. This problem highlights **the urgent need to foster a proper balance in relation to the use of technology**, since the concern for its excessive use is widespread among all ages.

* Limited Activities and Outdoor Spaces

The lack of outdoor activities underlines the pressing **need to create healthier and more accessible environments for children to play**, fostering an active and healthy lifestyle. **Most families appreciate games and leisure time in the development of their children**, considering that it is essential to have specific areas where children can play and interact with each other. This highlights **the importance of providing safe and diverse environments that facilitate socialisation and learning.** Furthermore, they emphasise the importance of **having green areas, playgrounds, and proper equipment** such as swings and rubber surfaces to ensure the safety of minors while they enjoy their recreational activities.

Children specifically demand activities related to drawing, painting, and manual crafts, which shows a clear need for creative expression. These activities are not only essential for cognitive and emotional development, but also offer **a way for them to express their feelings and thoughts in a constructive manner.**

To sum up, the thorough assessment of needs carried out in the sections on spaces for children, vulnerabilities, family relationships, education, and nutrition and health **have revealed a number of key elements to improve the stay of accompanied children and adolescents at Diaconía España's reception centres.** These findings **provide a solid foundation to develop proposals and recommendations** that effectively address the needs that have been identified, thus promoting a healthier, safer, and more enriching environment for children and adolescents at reception centres. **The next section sets out the objectives of the Plan adapted to the needs that have been identified.**





7

OBJECTIVES



7. OBJECTIVES

This Plan for Accompanied Children and Adolescents is framed within the Project “4Children: Comprehensive Diaconía’s Action Plan for the Protection of Accompanied Minors in the Context of the International Protection System in Spain”, funded by the Dutch Council for Refugees. This document responds to objectives 1 and 3 within said project:

- ▶ **Informing about the needs of children and adolescents** at Diaconía’s international protection centres (Objective 1).
- ▶ **Suggesting and proposing measures and solutions to the needs that have been identified** (Objective 3).

IN ADDITION TO MEETING THESE OBJECTIVES, THE PLAN FOR CHILDREN HAS THE FOLLOWING OVERALL OBJECTIVE: “ENSURING THE PROTECTION OF CHILDREN AND ADOLESCENTS, GUARANTEEING THAT THEIR RIGHTS ARE RESPECTED BY FOSTERING THEIR WELL-BEING AND COMPREHENSIVE DEVELOPMENT, AND A REPRESENTATIVE PARTICIPATION OF ACCOMPANIED CHILDREN AND ADOLESCENTS WHO LIVE IN RECEPTION CENTRES OF DIACONIA ESPAÑA”.



SUBJECT AREA	STRATEGIC LINES	SPECIFIC OBJECTIVES
SPACES FOR CHILDREN	Line 1. Ensuring a safe environment for children.	<p>S.O.1 Ensuring that minors do not have access to toxic products and dangerous objects.</p> <p>S.O.2 Promoting the use of utensils and tools that are adapted for children.</p> <p>S.O.3 Facilitating accessible information on the protection of children (noticeboard)</p> <p>S.O.4 Raising awareness among adults who live in the reception centres on the protection of children.</p> <p>S.O.5 Establishing channels and tools that ensure the participation of children and adolescents in all the matters affecting them (suggestion boxes, assemblies, etc.)</p>
	Line 2. Offering child-specific spaces.	<p>S.O.6 Adapting spaces and resources within reception centres to the needs of children and adolescents.</p> <p>S.O.7 Fostering the participation of children and adolescents in international protection centres.</p>
VULNERABILITIES	Line 3. Reinforcing the protection of accompanied children and adolescents from vulnerabilities.	<p>S.O.8 Ensuring proper prevention of, early detection of, and response to cases of violence and emergency situations.</p> <p>S.O.9 Addressing vulnerabilities specific to children and adolescents in the context of the reception system.</p> <p>S.O.10 Promoting collaboration and coordinated action with social services.</p>
FAMILY RELATIONSHIPS	Line 4. Fostering positive parenting of minors, regardless of their family situation.	<p>S.O.11 Ensuring better family reconciliation, especially in vulnerable cases.</p> <p>S.O.12 Training families in positive parenting skills.</p>
EDUCATION	Line 5. Driving support and integration of minors in the education system.	<p>S.O.13 Coordinating specific actions with educational centres and institutions.</p> <p>S.O.14 Mitigating the language and digital barriers of children and adolescents.</p>
NUTRITION AND HEALTH	Line 6. Ensuring a healthy lifestyle among minors.	<p>S.O.15 Addressing migratory grief.</p> <p>S.O.16 Supporting children and adolescents with specific medical conditions.</p> <p>S.O.17 Promoting actions that foster a healthy lifestyle.</p>





8

PROPOSED MEASURES



8. PROPOSED MEASURES

These proposals and measures are aimed at **providing a framework for action, facilitating key guidance for the implementation of effective interventions** focused on the needs identified in relation to accompanied children and adolescents. **In the last months of 2024, the implementation of some of the recommended measures will be initiated in previously selected reception centres of Diaconía, those of Mengíbar (Jaén) and León.**

Forty-seven measures have been proposed. They are distributed along the different subject matters and are coherent to the specific objectives proposed above⁹.

1. SPACES FOR CHILDREN

Line 1. Ensuring a safe environment for children

- ▶ **SO1.0.1.** Dissemination of information materials and safety guides.
- ▶ **SO1.0.2.** Use of safety locks in those cupboards and drawers that may be within reach for children where toxic products are kept.
- ▶ **SO1.0.3.** Establishment of proper signs warning about any danger.
- ▶ **SO2.0.1.** Production and distribution of a list of utensils and tools that are adapted for children.
- ▶ **SO3.0.1.** Creation of clear and appealing information materials (brochures, posters, infographics), accessible both for children and adolescents and for families.
- ▶ **SO3.0.2.** Availability of noticeboards in common spaces, ensuring that the information is updated.
- ▶ **SO4.0.1.** Implementation of an awareness-raising campaign on safe environments for children addressed to other beneficiaries in the reception centres.
- ▶ **SO4.0.2.** Training for families in the reception centres on matters related to the prevention of violence against children and on good treatment.
- ▶ **SO5.0.1.** Creation of a suggestion box specifically for children and adolescents and adapted to their ages where they can express their interests and needs.
- ▶ **SO5.0.2.** Creation of a database of digital resources that are of use when working with children and adolescents.
- ▶ **SO5.0.3.** Production of a guide on the introduction of a child-based approach into the asylum procedure, incorporating specific reasons for international protection linked to childhood.



Line 2. Offering child-specific spaces

- ▶ **SO6.0.1.** Allocation of dedicated spaces and schedules for games in the reception centres for children to play and develop child-appropriate activities.
- ▶ **SO6.0.2.** Facilitation of a “silent area” within the centres as a dedicated space for studying.
- ▶ **SO7.0.1.** Establishment of a monthly programme of outdoors recreational and leisure activities for children and adolescents.
- ▶ **SO7.0.2.** Preparation of a mapping of resources specialised in children in each location.
- ▶ **SO7.0.3.** Increased participation of children and adolescents in local initiatives and activities.

2. VULNERABILITIES

Line 3. Reinforcing the protection of accompanied children and adolescents from vulnerabilities

- ▶ **SO8.0.1.** Creation of risk maps for both the centre and specific activities.
- ▶ **SO8.0.2.** Inclusion of a child-based approach in protocols of action and referral in emergency situations.
- ▶ **SO8.0.3.** Training of the teams in violence, emergency situations, and existing protocols focused on children and adolescents.
- ▶ **SO8.0.4.** Appointment of a dedicated professional for children in every reception centre of Diaconía.
- ▶ **SO9.0.1.** Development of indicators to detect vulnerabilities related to refugee children.
- ▶ **SO9.0.2.** Organisation of workshops that allow for the self-identification of vulnerabilities (eating disorders, self-harm, consumption of toxic substances, and tendency to emotionally dependent relationships, addiction to technology).
- ▶ **SO9.0.3.** Establishment of agreements and networking contacts for the referral to external resources focused on vulnerable children (disability and mental and physical health).
- ▶ **SO9.0.4.** Training of technical teams in the detection, handling, and monitoring of vulnerabilities in relation to accompanied children and adolescents.
- ▶ **SO10.0.1.** Creation of a proposal for a joint working group for cases requiring consultation with, communication with, and intervention of social services.
- ▶ **SO10.0.2.** Increased consultations with social services in those cases that require their intervention.

3. FAMILY RELATIONSHIPS

Line 4. Fostering positive parenting of minors, regardless of their family situation

- ▶ **SO11.0.1.** Ensuring the application of the “supervision procedure for unaccompanied minors”.
- ▶ **OE11.0.2.** Production of monitoring tools and work plans with single-parent families who are particularly vulnerable (for instance, due to mental health).
- ▶ **SO12.01.** Provision of training workshops for families on the rights of children and on positive parenting tools.
- ▶ **SO12.02.** Production of information materials in the native languages of participants addressing parenting styles.
- ▶ **SO12.03.** Establishment of the discussion group “mothers’ group” focused on the exchange of experiences among mothers with minors under their care.

4. EDUCATION

Line 5. Driving support and integration of minors in the education system

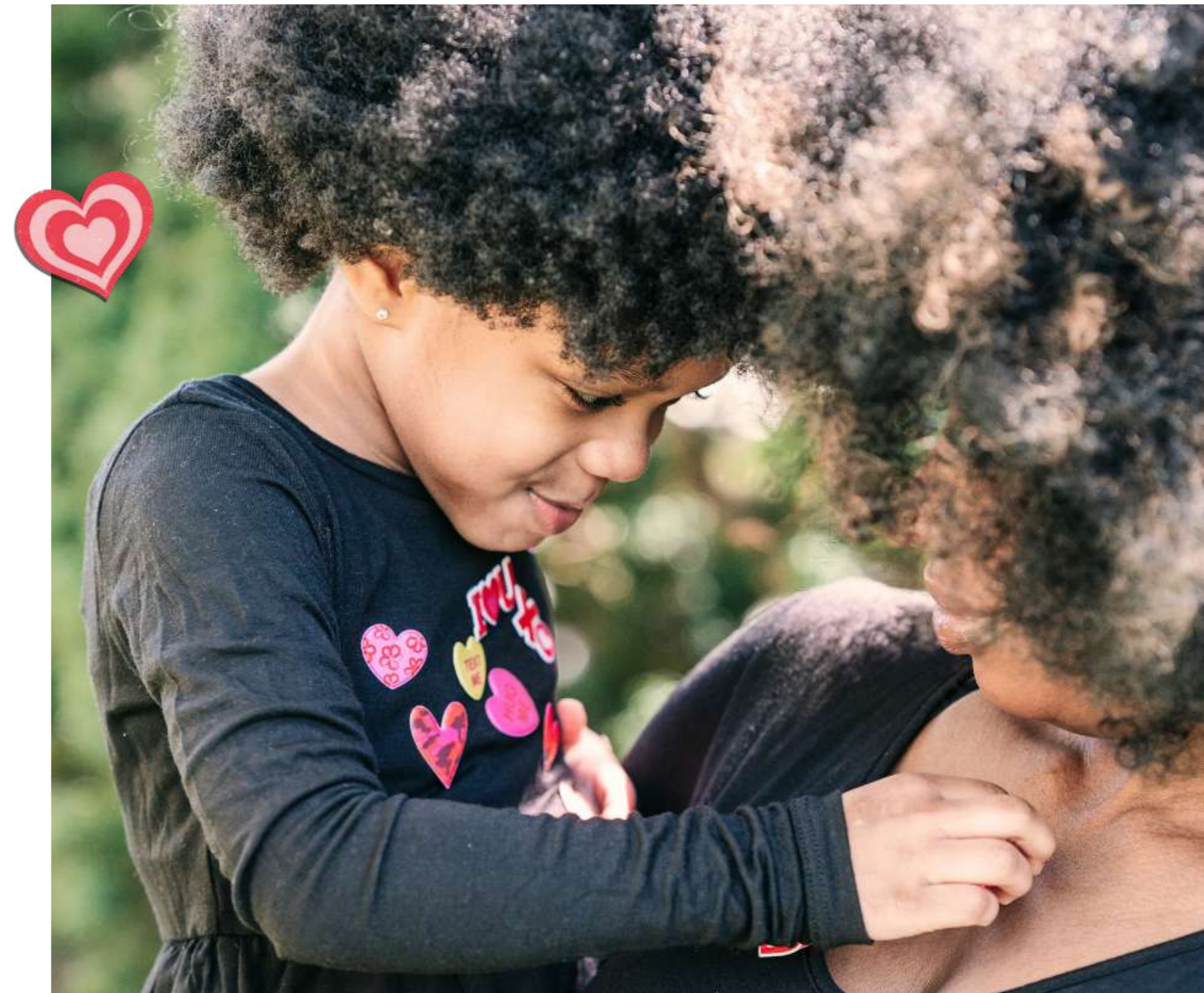
- ▶ **SO13.01.** Monitoring of families’ communication with form tutors and schoolteachers.
- ▶ **SO13.02.** Establishment of a working group with educational institutions to jointly address cases of bullying involving beneficiary minors.
- ▶ **SO13.03.** Provision of awareness-raising workshops for the personnel of educational institutions on the reality of refugee children.
- ▶ **SO13.04.** Promotion of agreements or covenants for the reservation of nursery school places.
- ▶ **SO14.01.** Creation of a school support programme for children and adolescents with learning difficulties.
- ▶ **SO14.02.** Distribution of technological resources in reception centres, fostering responsible use of the same.
- ▶ **SO14.03.** Implementation of recreational Spanish language immersion activities for non-Spanish-speaking adolescents.

5. NUTRITION AND HEALTH

Line 6. Ensuring a healthy lifestyle among minors

- ▶ **SO15.01.** Creation of a system of indicators of children’s migratory grief.
- ▶ **SO15.02.** Training of the educational team and families on strategies to address children’s migratory grief by means of workshops and training sessions.

- ▶ **SO15.03.** Dissemination of materials (storybooks, songs...) for children on the topic of migratory grief.
- ▶ **SO.16.01.** Referral of every child and adolescent who requires specialised medical care to external resources.
- ▶ **SO.16.02.** Establishment of agreements, covenants, and networking contacts with medical centres, organisations from the health sector, etc.
- ▶ **SO.17.01.** Implementation of a monitoring system for the diet and physical activity (sports) of children and adolescents.
- ▶ **SO.17.02.** Promotion of agreements, covenants, and networking contacts with sports and leisure associations, organisations, and facilities.
- ▶ **SO.17.03.** Inclusion of the choices of children and adolescents in the weekly menu proposal in reception centres with cafeteria.





9

COORDINATION, MONITORING, AND ASSESSMENT SYSTEM



9. COORDINATION, MONITORING, AND ASSESSMENT SYSTEM

In order to implement the Plan for Accompanied Children and Adolescents, a **coordination, monitoring, and assessment system** is required, both to verify compliance with the objectives and to assess the execution of the proposed measures. In addition to this, **it becomes necessary to have constant feedback and to adapt to both the context where the Plan is being executed and the needs of accompanied children and adolescents, as well as to have a training plan** for the professional team, which will have to work in a holistic and coordinated manner, and for beneficiaries of the reception centres.

The coordination and supervision team of the entity, together with the multidisciplinary teams of each reception centre, will be in charge of coordination, taking into account the holistic intervention of all the areas, such as the social area, psychological area, legal area, health area, education area, etc. **This coordination will also extend to different competent public administrations and other entities of the third sector.** To this end, **effective and efficient communication channels** are required, as well as a monitoring system by means of **regular meetings to monitor the Plan's progress.**

To monitor the Plan, **specific indicators have been set for each objective**, as well as the corresponding **verification sources**, as shown in **Annex 1 "Objective Matrix of the 2024 Plan for Accompanied Children and Adolescents"**. The aforementioned indicators will be taken into account to **set the targets** for the achievement of the proposed objectives, and the necessary monitoring tools will be developed in order to achieve proper monitoring of the Plan.

The assessment of the Plan will be performed annually, carrying out the corresponding monitoring every 6 months, an intermediate assessment, and, finally, the yearly assessment at the end of the year. Taking into consideration the participatory nature of the Plan, **efforts will be made to involve key actors:** beneficiaries (children and adolescents), families, and professional teams (depending on their duties and responsibilities). The final goal of this stage will be **a report on the results where both the achievements and challenges identified in the implementation of the Plan will be included.** Lastly, the report will also serve to inform about the necessary updates of this Plan, with the aim of **offering specific solutions to the needs identified.**





10

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10. BIBLIOGRAPHY AND OTHER SOURCES CONSULTED

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11

ANNEXES



11. ANNEXES



1. OBJECTIVE MATRIX OF THE PLAN

AREAS	STRATEGIC LINES	SPECIFIC OBJECTIVES	ID	EXPECTED RESULTS	INDICATORS	SOURCES FOR VERIFICATION
SPACES FOR CHILDREN	Line 1. Ensuring a safe environment for children (Art. 3 of LOPIVI)	S.O.1 Ensuring that minors do not have access to toxic products and dangerous objects.	SO1.0.1	Dissemination of information materials and safety guides.	Number of materials disseminated.	Delivery note for materials.
			SO1.0.2	Use of safety locks in those cupboards and drawers that may be within reach for children where toxic products are kept.	Percentage of cupboards and drawers with safety locks installed.	Report on installed locks. Photographs.
			SO1.0.3	Establishment of proper signs warning about any danger.	Number of warning signs installed in risk areas.	Report on installed signs. Photographs.
		S.O.2 Promoting the use of utensils and tools that are adapted for children.	SO2.0.1	Production and distribution of a list of utensils and tools that are adapted for children.	Number of utensils and tools identified and distributed by means of the list.	List of adapted utensils and tools. Purchase invoices. Report on the distribution of utensils.
		S.O.3 Facilitating accessible information on the protection of children (noticeboard).	SO3.0.1	Creation of clear and appealing information materials (brochures, posters, infographics), accessible both for children and adolescents and for families.	Number of information materials created.	Information materials prepared. Minutes of the meetings held to prepare the materials.
			SO3.0.2	Availability of noticeboards in common spaces, ensuring that the information is updated.	Updating frequency of noticeboards.	Photographs of noticeboards.
		S.O.4 Raising awareness among adults who live in the reception centres on the protection of children.	SO4.0.1	Implementation of an awareness-raising campaign on safe environments for children addressed to other beneficiaries in the reception centres.	Number of campaigns implemented and number of campaign recipients.	Publications in digital media and social networks. Report on the campaign reach. Meeting minutes.
			SO4.0.2	Training for families in the reception centres on matters related to the prevention of violence against children and on good treatment.	Number of training sessions held and participants trained.	List of participants. Satisfaction surveys.
		S.O.5 Establishing channels and tools that ensure the participation of children and adolescents in all the matters affecting them (suggestion boxes, assemblies, etc.)	SO5.0.1	Creation of a suggestion box specifically for children and adolescents and adapted to their ages where they can express their interests and needs.	Number of suggestion boxes created and suggestions received.	Photographs. Report on the needs of children and adolescents.
			SO5.0.2	Creation of a database of digital resources that are of use when working with children and adolescents.	Number of available digital resources.	Access link to the resource database.
			SO5.0.3	Production of a guide on the introduction of a child-based approach into the asylum procedure, incorporating specific reasons for international protection linked to childhood.	Number of guides created and disseminated.	Guide prepared with its specific reasons.

<p>Line 2. Offering child-specific spaces.</p>	<p>S.O.6 Adapting spaces and resources within reception centres to the needs of children and adolescents.</p>	<p>SO6.01</p>	<p>Allocation of dedicated spaces and schedules for games in the reception centres for children to play and develop child-appropriate activities.</p>	<p>Number of spaces designated and assigned dedicated hours per week.</p>	<p>Photographs. Programme scheduled for children and adolescents.</p>
		<p>SO6.02</p>	<p>Facilitation of a "silent area" within the centres as a dedicated space for studying.</p>	<p>Number of silent areas designated.</p>	<p>Photographs.</p>
	<p>S.O.7 Fostering the participation of children and adolescents in international protection centres.</p>	<p>SO7.01</p>	<p>Establishment of a monthly programme of outdoors recreational and leisure activities for children and adolescents.</p>	<p>Number of activities carried out monthly.</p>	<p>List of monthly activities. List of activity participants.</p>
		<p>SO7.02</p>	<p>Preparation of a mapping of resources specialised in children in each location.</p>	<p>Number of resources mapped.</p>	<p>Link to the mapping document.</p>
		<p>SO7.03</p>	<p>Increased participation of children and adolescents in local initiatives and activities.</p>	<p>Number of minors participating in local activities.</p>	<p>List of participants in local activities.</p>



AREAS	STRATEGIC LINES	SPECIFIC OBJECTIVES	ID	EXPECTED RESULTS	INDICATORS	SOURCES FOR VERIFICATION		
VULNERABILITIES	Line 3. Reinforcing the protection of accompanied children and adolescents from vulnerabilities	O.E.8 Garantizar una buena prevención, detección precoz y actuación frente a las situaciones de violencia y emergencia	SO8.0.1	Creation of risk maps for both the centre and specific activities.	Number of risk maps created.	Link to the risk maps.		
			SO8.0.2	Inclusion of a child-based approach in protocols of action and referral in emergency situations.	Number of protocols including a child-based approach.	Protocol of action and referral in emergency situations.		
			SO8.0.3	Training of the teams in violence, emergency situations, and existing protocols focused on children and adolescents	Number of training sessions conducted and number of trained individuals.	Workshop/training sheets. List of participants. Satisfaction surveys.		
			SO8.0.4	Appointment of a dedicated professional for children in every reception centre of Diaconia.	Number of dedicated professionals appointed.	List of dedicated professionals for children.		
		S.O.9 Addressing vulnerabilities specific to children and adolescents in the context of the reception system.	SO9.0.1	Development of indicators to detect vulnerabilities related to refugee children.	Number of indicators developed.	List of vulnerability indicators.		
			SO9.0.2	Organisation of workshops that allow for the self-identification of vulnerabilities (eating disorders, self-harm, consumption of toxic substances, and tendency to emotionally dependent relationships, addiction to technology).	Number of workshops conducted and number of participants.	Workshop/training sheets. List of participants. Satisfaction surveys.		
			SO9.0.3	Establishment of agreements and networking contacts for the referral to external resources focused on vulnerable children (disability and mental and physical health).	Number of agreements and networking contacts established.	Collaboration agreements. Meeting minutes. Referral reports.		
			SO9.0.4	Training of technical teams in the detection, handling, and monitoring of vulnerabilities in relation to accompanied children and adolescents.	Number of training sessions conducted and number of participants trained.	Workshop/training sheets. List of participants. Satisfaction surveys.		
		FAMILY RELATIONSHIPS	Line 4. Fostering positive parenting of minors, regardless of their family situation.	S.O.10 Promoting collaboration and coordinated action with social services.	SO10.0.1	Creation of a proposal for a joint working group for cases requiring consultation with, communication with, and intervention of social services.	Number of working group proposals created.	Joint work proposal.
					SO10.0.2	Increased consultations with social services in those cases that require their intervention.	Number of consultations with social services carried out.	Record of consultations with social services.
S.O.11 Ensuring better family reconciliation, especially in vulnerable cases.	SO11.0.1			Ensuring the application of the "supervision procedure for unaccompanied minors".	Number of minors supervised under this procedure.	Record of minors.		
	SO11.0.2			Production of monitoring tools and work plans with single-parent families who are particularly vulnerable (for instance, due to mental health).	Number of monitoring tools produced and work plans implemented.	Link to tools produced.		
S.O.12 Training families in positive parenting skills.	SO12.01			Provision of training workshops for families on the rights of children and on positive parenting tools.	Number of training workshops conducted and number of participants trained.	Workshop/training sheets. List of participants. Satisfaction surveys.		
	SO12.02			Production of information materials in the native languages of participants addressing parenting styles.	Number of information materials produced and distributed.	Link to materials produced.		
	SO12.03			Establishment of the discussion group "mothers' group" focused on the exchange of experiences among mothers with minors under their care.	Number of discussion groups established and meetings held.	List of participants. Activity report.		

AREAS	STRATEGIC LINES	SPECIFIC OBJECTIVES	ID	EXPECTED RESULTS	INDICATORS	SOURCES FOR VERIFICATION
EDUCATION	Line 5. Driving support and integration of minors in the education system.	S.O.13 Coordinating specific actions with educational centres and institutions.	SO13.01	Monitoring of families' communication with form tutors and schoolteachers.	Number of families under monitoring and number of meetings with form tutors held.	Monitoring record.
			SO13.02	Establishment of a working group with educational institutions to jointly address cases of bullying involving beneficiary minors.	Number of working groups established and cases addressed.	Meeting minutes. Collaboration agreement.
			SO13.03	Provision of awareness-raising workshops for the personnel of educational institutions on the reality of refugee children.	Number of awareness-raising workshops conducted and number of participants.	Workshop/training sheets. List of participants. Satisfaction surveys.
		S.O.14 Mitigating the language and digital barriers of children and adolescents.	SO13.04	Promotion of agreements or covenants for the reservation of nursery school places.	Number of agreements or covenants signed and places reserved.	Agreements and/or covenants signed.
			SO14.01	Creation of a school support programme for children and adolescents with learning difficulties .	Number of school support programmes created and number of participants.	List of participants. Monitoring table on the language learning action. Lesson plan sheets.
			SO14.02	Distribution of technological resources in reception centres, fostering responsible use of the same.	Number of technological resources distributed and users trained in the responsible use of the same.	Photographs. Invoices, donation agreements.
NUTRITION AND HEALTH	Line 6. Ensuring a healthy lifestyle among minors.	S.O.15 Addressing migratory grief.	SO15.01	Creation of a system of indicators of children's migratory grief.	Number of indicators created.	List of migratory grief indicators.
			SO15.02	Training of the educational team and families on strategies to address children's migratory grief by means of workshops and training sessions.	Number of workshops and training sessions conducted and number of participants trained.	Workshop/training sheets. List of participants. Satisfaction surveys.
			SO15.03	Dissemination of materials (storybooks, songs...) for children on the topic of migratory grief.	Number of materials disseminated.	List of materials disseminated. Photographs.
		S.O.16 Supporting children and adolescents with specific medical conditions.	SO16.01	Referral of every child and adolescent who requires specialised medical care to external resources.	Number of referrals conducted.	Referral reports. Record of referred minors.
			SO16.02	Establishment of agreements, covenants, and networking contacts with medical centres, organisations from the health sector, etc.	Number of agreements, covenants, and networking contacts established.	Agreements and/or covenants signed.
		S.O.17 Promoting actions that foster a healthy lifestyle.	SO17.01	Implementation of a monitoring system for the diet and physical activity (sports) of children and adolescents.	Number of minors under diet and physical activity monitoring.	Record of diet and sports monitoring.
			SO17.02	Promotion of agreements, covenants, and networking contacts with sports and leisure associations, organisations, and facilities.	Number of agreements, covenants, and networking contacts established.	Agreements and/or covenants signed.
			SO17.03	Inclusion of the choices of children and adolescents in the menu proposals.	Number of menu proposals including the	Minutes of the assembly with children and

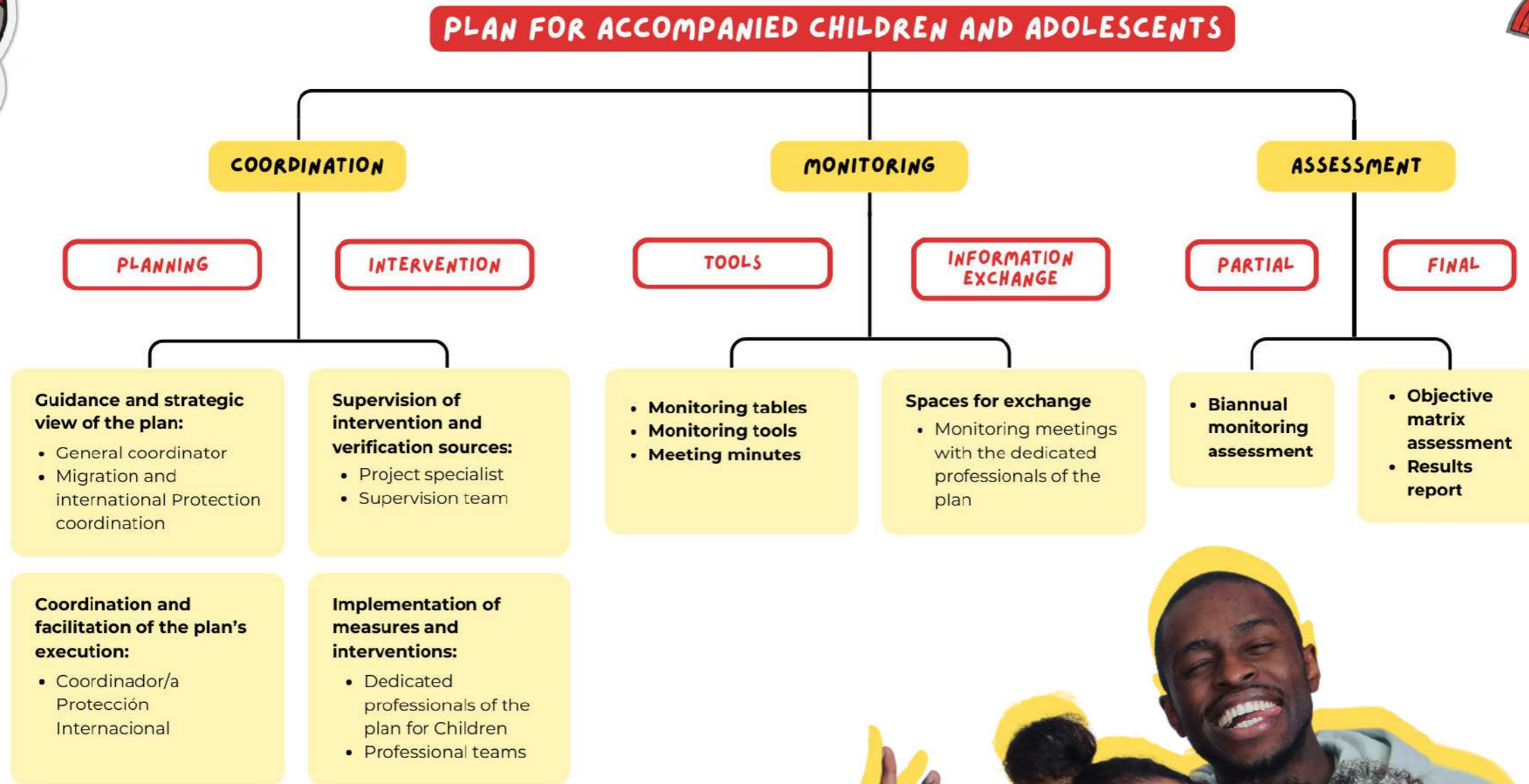
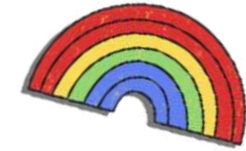
2. ROLES AND RESPONSIBILITIES WITHIN THE PLAN

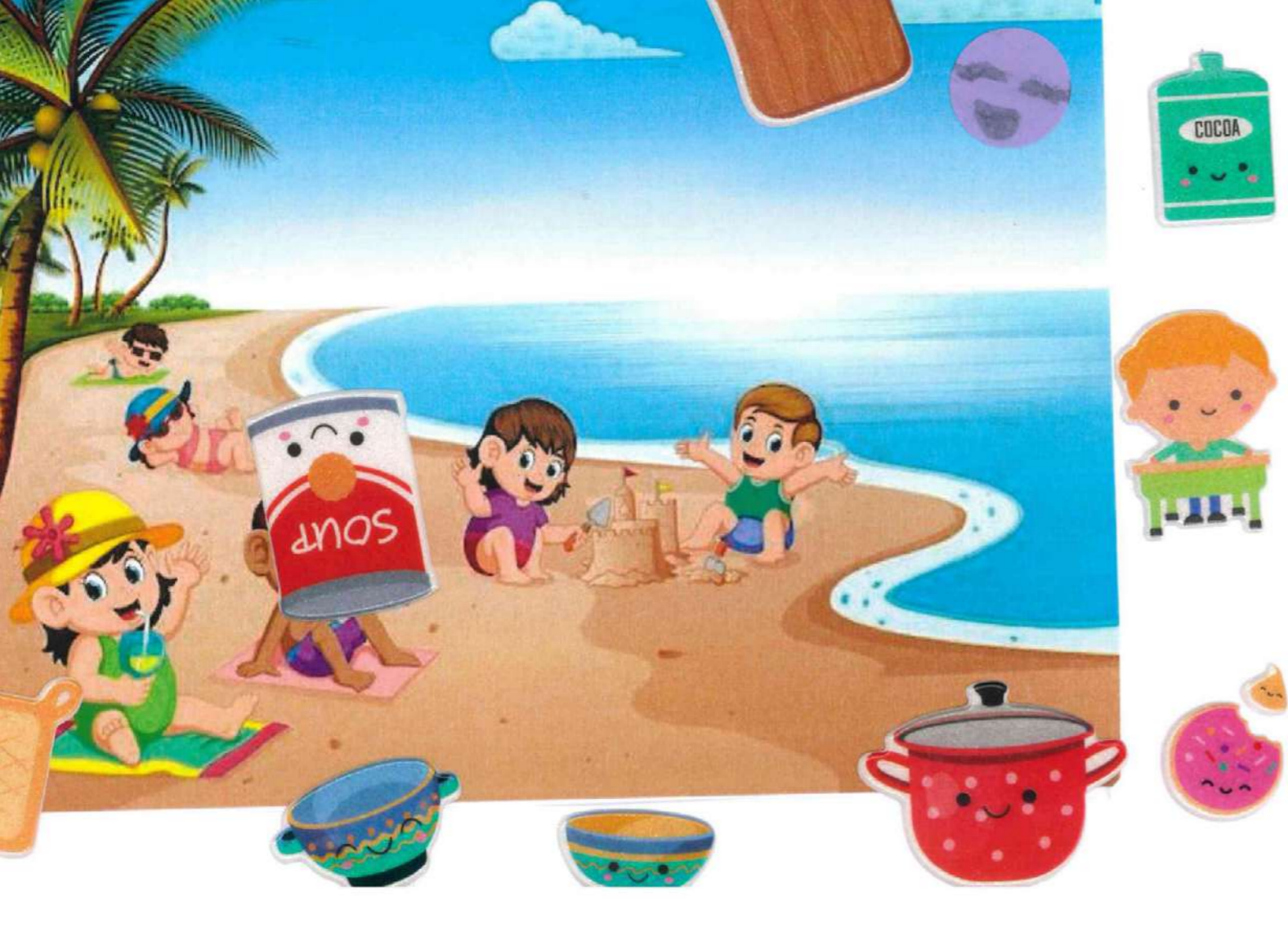


POSITION	RESPONSIBILITY
GENERAL COORDINATION	<ul style="list-style-type: none"> Ensuring that there is a child-based approach within the entity's strategy. Taking into account calls for proposals whose subject matter is children.
MANAGEMENT OF THE MIGRATION AND ASYLUM AREA	<ul style="list-style-type: none"> Facilitating coordination and communication channels with other public and private entities to manage risk situations. Revising and approving the Plan for Children. Presenting the Plan to the rest of the board and areas of the entity. Incorporating the provisions of the Plan for Children into planning, monitoring, budgeting, and resource allocation, and supervising them. Coordinating with Human Resources to ensure compliance with regulations related to the protection of children.
NATIONAL COORDINATION OF THE INTERNATIONAL PROTECTION PROGRAMME	<ul style="list-style-type: none"> Promoting awareness and understanding of the Plan for Children among professional personnel and volunteers. Supervising that the relevant personnel receive training on the Plan and undertakes to follow it. Facilitating the creation and application of protocols, procedures, and tools to ensure the safety of beneficiaries. Proposing risk analyses for the protection of children and adopting appropriate measures based on the results. Participating in events, meetings, and working groups with different organisations, public administrations, etc. in relation to the Plan for Children.
PROJECT SPECIALIST	<ul style="list-style-type: none"> Incorporating the Plan for Children into the objective matrix and the technical reports of the programme. Supervising and providing support so that the Plan is effectively implemented. Coordinating and scheduling training sessions in relation to children together with the training and language learning supervisor. Monitoring the execution of the Plan and assessing the results. Driving updates to the Plan for Children for the coming years.
SUPERVISION TEAM OF THE HEAD OFFICE	<ul style="list-style-type: none"> Enabling personnel to obtain the knowledge, skills, and commitment necessary to support the protection of children. Supervising that the personnel in the reception centres acts responsibly and according to the Plan for Children. Managing risk situations detected together with the person in charge of the Plan for Children and the Coordination of International Protection, including referrals to competent local authorities or third parties. Preparing the reports required to document risk situations together with the child protection supervisor. Ensuring the development of proper tools to support the Plan's gender-based approach and the detection of situations of trafficking in human beings and gender violence. Counselling the teams on legal and/or psychosocial matters related to the protection of children.
LOCAL COORDINATION OF THE RECEPTION CENTRE	<ul style="list-style-type: none"> Ensuring effective communication between the local professional team and the team of the head office in relation to the protection of children and adolescents. In coordination with the dedicated professional for children, ensuring the implementation and compliance with the Plan for Children. Mapping available resources related to children and adolescents in the municipality.
DEDICATED PROFESSIONALS FOR CHILDREN IN THE RECEPTION CENTRES	<ul style="list-style-type: none"> Detecting risk situations and immediately communicating them to the coordination of reception centres. Providing support for the implementation of the Plan in the centre. Ensuring the protection of individuals who are subject to violence, discrimination, etc. by communicating and referring cases to the competent administrations, in application of already established protocols. Facilitating the creation of safe and friendly environments for children and adolescents in the centres for the development of basic daily life activities. Ensuring that the measures related to children and adolescents are implemented. Monitoring cases related to children and adolescents in collaboration with the coordination of the centre and the supervision team.
PROFESSIONAL TEAMS AND VOLUNTEERS OF THE RECEPTION CENTRES	<ul style="list-style-type: none"> Being aware of the Plan for Children and the guidelines for action. Detecting risk situations and communicating them to the dedicated professional for children protection in their centre or, failing this, to the supervisor of the reception centres. Attending the necessary training to become qualified on matters related to children. Providing any required documents for the performance of their work with children and adolescents. Ensuring that the measures related to children and adolescents are implemented.



3. COORDINATION, MONITORING, AND ASSESMENT SYSTEM OF THE PLAN





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