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# FICE INTERNATIONAL STATEMENT ON PROMOTING APPROPRIATE AND QUALITY ALTERNATIVE CARE FOR CHILDREN AND YOUTH

***Preamble***

The editors are pleased to be able to include in this issue the *FICE International Statement on Promoting Appropriate and Quality Alternative Care Options for Children and Youth*. The statement reflects the continuing commitment of FICE International to the provision of quality residential care for children, a commitment that began when FICE was founded under UNESCO after World War II for the purpose of caring for the children left orphaned, disabled, and traumatized by the war.

In 1986, FICE reaffirmed this commitment in The Malmö Declaration[1], and furthered its advocacy for quality alternative care in 2007 with the Quality4Children Standards[2] developed in collaboration with SOS Children's Villages International and the International Foster Care Organisation (IFCO). These standards, which are available in 27 languages, were launched at the European Parliament in June 2007. FICE seeks to share "good practices", make tools available to improve conditions for children and young people living in alternative care, and ensure that their rights are fulfilled and best interests are met.

Over the past several years, the Quality in Care working group of FICE International has been exploring and discussing the various forms of evidence related to quality care, and especially the evidence pertaining to the provision of residential group care. As discussed in the Anglin and Henderson article that precedes this, there is a current debate within many countries as well as internationally about the appropriateness of residential care for young people.

The FICE Quality in Care working group reviewed the relevant available research, revisited its longstanding commitment to quality residential care, and drew upon the collective knowledge, experience, and expertise of its many members to create a draft discussion paper, which was presented at the FICE35 Congress in October 2024 in Split, Croatia.

The discussion paper prompted much thoughtful debate, resulting in a formal draft statement that was then discussed at the General Assembly of FICE in Vienna in September 2025. Following that meeting, feedback was solicited and received from participating FICE members, and much of it helped clarify and strengthen the final statement that is presented below.

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[1] *The Malmö Declaration* is available at https://docs.wixstatic.com/ugd/b9f7fe_ca69aca0ba854166b3763e2eaeefbf50.pdf

[2] *Quality4Children Standards for Out-of-Home Child Care in Europe* is available at https://www.sos-childrensvillages.org/getmedia/67a4237f-3456-4fa9-b6e9-e954075cadd0/Q4C_colour_2.pdf

FICE International intends this statement to serve a number of purposes, including:

- To support and encourage practitioners: Share the statement with front-line workers and caregivers to validate their commitment to quality care and strengthen morale.
- To advocate with confidence: Use it in dialogue with funders, policymakers, and public stakeholders, especially where alternative care options are misunderstood or under pressure.
- To translate and publish: Share it in national journals, newsletters, and websites. Each National Section is invited to translate the statement, and FICE International is happy to help format country-specific versions.
- To inspire reform and collaboration: Use the principles as a foundation for improving care standards, shaping training, and engaging in interagency collaboration.

FICE International hopes readers will find this statement a useful, flexible tool that supports advocacy, policy, and services on behalf of all young people who need quality alternative care.

# PROMOTING APPROPRIATE AND QUALITY ALTERNATIVE CARE OPTIONS FOR CHILDREN AND YOUTH

## A Statement From the FICE International Federal Council

This statement is intended as a guiding tool for professionals, policymakers, caregivers, children and young people, and the general public to collectively support quality, appropriate, and child-centred alternative care services.

FICE International affirms its unwavering commitment to the development and promotion of high-quality, appropriate care options for all children and young people who cannot live with their families of origin. In accordance with the "United Nations Convention on the Rights of the Child" and based on the "United Nations Guidelines for the Alternative Care of Children" we recognize that no single care model can meet the diverse needs and circumstances of children and families worldwide.

FICE International advocates for good quality care for children and young people, whether in family-based or group-care based settings. The central question appears to be: How do we assess the best interest of each individual child, and ensure each one is placed in an appropriate, nurturing, and safe living environment? Whenever a family of origin provides an environment conducive to an individual child's positive development, that is where a child should reside. However, because there are periods in some children's development when that is not possible, a quality alternative care setting can be a valuable option.

1. The participation of children and young people in decisions that affect them is fundamental. Their voices, experiences, and aspirations need and have to be respected, in order to help guide both individual care planning, quality development and system reform. Children and young people need to be meaningfully involved in all decisions that affect their lives, from placement to reintegration, and from policy to practice.

2. Every child needs at least one consistent, continuous, and developmentally supportive reflective caregiver for their personal development. Children have the right to grow up in safe, nurturing, and stable environments and it is important that we strive to ensure that each child experiences love and respect. Wherever possible, this should be within their own families, supported by timely, adequate, and community-based family-strengthening services.

3. When alternative care is required, we must ensure it is of high quality and tailored to the specific needs of the child, taking into account age, developmental stage, identity, culture, trauma history, and expressed preferences. Children must have knowledge of their rights, mechanisms for complaints, and opportunities for self-advocacy.

4. Infants and very young children should, whenever possible, be placed in family-based care. However, temporary residential settings with highly trained staff may be necessary in emergency situations or when no safe family-based alternative is available. In such cases, close oversight and early transition planning are crucial.

5. A diversity of care options is required — including kinship care, foster care, supported independent living, residential/small group care, specialised therapeutic placements, and protective shelters for mothers and their children. This plurality allows systems to respond appropriately to the individual needs of children and families, rather than forcing them to conform to one model. Large, impersonal or custodial institutions are not conducive to the best interests of the child.

6. The quality of alternative care — not the setting itself — is the decisive factor. Decades of research confirm that poor care is harmful in any setting and that high-quality care in any setting — if it is emotionally supportive, developmentally appropriate, well-structured, adequately resourced, and rights-based — can protect and promote the well-being of the child.

7. Every effort should be made to preserve, restore, or strengthen the child's connection to their family of origin and/or extended family. Reintegration should be a key focus of all care interventions, with intentional efforts to maintain ties to the child's community of origin, cultural identity, and spiritual roots. Whenever possible, care should be provided in local settings that facilitate regular contact with family, access to familiar services, and eventual reintegration into the community of origin.

8. It is necessary that gatekeeping processes be robust, transparent, and child-centred. Entrance into alternative care should only occur when appropriate and necessary and lead to tangible improvements in the safety, stability, and development of the child. Unnecessary removals should always be avoided.

9. The duration of care should be purposeful and child-centred, with clear plans for continuity, reunification, reintegration, or independent living that prioritise relational stability and the best interest of the child.

10. It is essential that all alternative care settings prepare children and young people for autonomy. This includes access to education, the development of independent living skills, financial literacy, and professional or vocational training appropriate to each young person's goals and circumstances. Expectations for achieving autonomy should be realistic and consistent with what would be expected of any young person at similar stages of life. No child or youth should be expected to manage entirely on their own. A strong support network — including, where appropriate, ongoing connection with the care setting — should be in place to accompany the transition to adulthood.

11. Effective alternative care systems require well-trained, supported, and supervised professionals who are caring, reflective and developmentally supportive, uphold children's rights, maintain safeguarding practices, and work in close collaboration with families and communities. All members of the social care workforce, including carers, educators, and support professionals, should be appropriately trained, supported, and resourced. Collaborative working practices across disciplines should be actively encouraged and structurally enabled. Efforts to improve pay, pensions, job security, and emotional support are essential to building a sustainable and committed care workforce.

## Next Steps

This statement is intended as a living tool for FICE International and its partners to actively promote, support, and assist system reform, advocacy, capacity-building, and the development of national standards. It seeks to reflect our professional knowledge, ethical commitments and our practical wisdom, shaped by direct service experience, research, and engagement with children and families. It is designed to be adapted to diverse legal, cultural, and institutional contexts.

FICE International offers this statement to all involved in child-serving systems, as a basis for national and international dialogues on how to ensure the best interests and well-being of each and every child in alternative care. We welcome opportunities for collaboration with individuals, groups, and organisations, aimed to further elaborate the elements of quality alternative care and explore how best to put these fundamental principles into practice on a consistent basis.

FICE International Federal Council[3]
Vienna, September 2025.

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