



# **5<sup>th</sup> BIENNIAL** INTERNATIONAL CONFERENCE

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ON ALTERNATIVE CARE FOR  
CHILDREN IN ASIA

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2023 BICON Report

## **Disclaimer**

*This report represents a summary of presentations and discussions held throughout the two days of BICON 2023. The BICON organizing committee wishes to acknowledge the breadth and depth of expertise and innovative practice in care across Asia and recognizes that only a small selection of that practice was highlighted during the 2023 BICON. Examples given were those raised by speakers and panelists and their inclusion in the report does not indicate endorsement by the organizing committee.*

*The recommendations found in the Declaration from the Heart of BICON are the collated and synthesized recommendations made by speakers and panellists throughout the two days. As such they do not necessarily represent the views of all organizing committee member agencies.*

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# 5th Biennial International Conference (BICON) on Alternative Care for Children in Asia

Co-created with young people with lived experience

6th-7th of September 2023  
Kathmandu, Nepal

Presented by:



Forget Me Not



Save the Children



SOS CHILDREN'S  
VILLAGES



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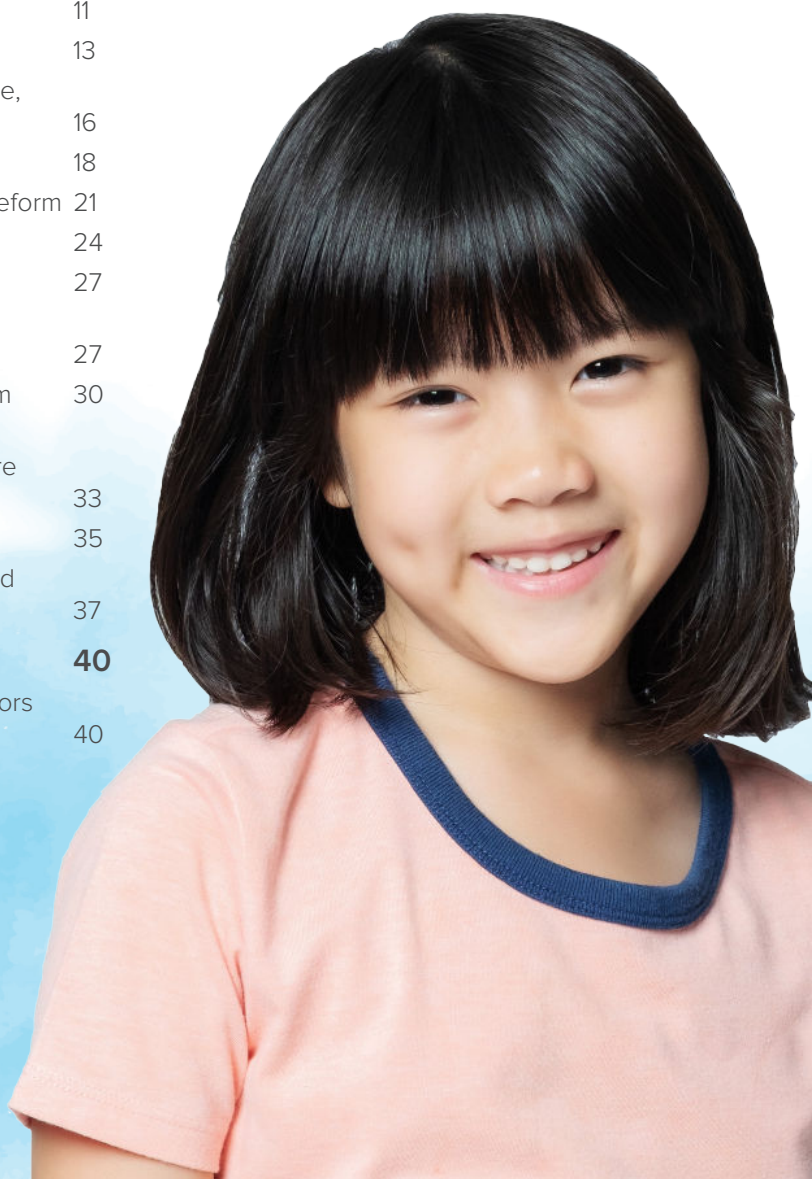
Martin James  
FOUNDATION



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## FOREWORD

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BICON – the biennial conference on alternative care in Asia is becoming more than a conference that happens every 2 years. It is a forum that captures the growing momentum for care reform for children in Asia. It is a celebration of the passion and ideas that exist within our sector and a call to action to bring about meaningful change for the millions of children across the continent in alternative care or at risk of being separated. BICON is a movement for care reform in Asia and we have ambitions to do more. Please join us by signing up for the [BICON Community](#), hosted on [Changemakers for Children](#).

This report showcases the 5th BICON, which took place over 2 days in Kathmandu, Nepal, in September 2023. Over 53 speakers and 300 participants, including over 50 young people with care experience, from across Asia and beyond joined us and shared their perspectives. BICON was also streamed to participants around the world.

As well as a summary of each session this report contains a Declaration from the Heart of BICON. This is a summary of the recommendations for action that were captured live at the event. This is BICON's call for action to the countries of Asia, to donors and the international community.

We would like to take this opportunity to thank in particular the BICON Care Experienced Young People Reference Group who were alongside us every step of the way as we planned this event together. They were joined by many more care experienced young people who took centre stage at BICON. The universal feedback about BICON has been about how amazing your contributions were. You challenged us and inspired us.

We would also like to acknowledge the support and guidance that we have received from esteemed members of the UN Committee on the Rights of the Child. Dr. Rinchen Chopel, Mikiko Otani, and the Chair of the Committee, Ann Skelton, joined us remotely from Geneva for this year's BICON. Your ongoing work to recognise the rights of children in alternative care and the harm caused to children by institutionalisation is so important.

Huge thanks to Nepal for being our gracious hosts and the teams at Forget Me Not, THIS and Shine Together for all their support on the ground.

With millions of children in alternative care in Asia we are all motivated to carry on this work to support families and bring about meaningful care reform for children. The momentum is growing. We are BICON. Please join us!

[BICON Community](#), hosted on [Changemakers for Children](#).

## THE BICON ORGANISING COMMITTEE:

Better Care Network, Family for Every Child, Forget Me Not, Hope and Homes for Children, Lumos, Save the Children, SOS Children's Villages International and Udayan Care.

## CARE EXPERIENCED REFERENCE GROUP - FOREWORD

BICON is a platform for care experienced youth to advocate our voices and experiences we have faced as care experienced youth. The 4th BICON was in December 2021 and more focused on the Asian Context and it was a virtual conference. The 5th BICON took place in Kathmandu, Nepal with the attendees of care leavers from different countries. We are the heart of BICON as our voices and experiences play a key role to bring the changes in care reform. We are from different countries, yet we somehow carry similar stories as care experienced youth.

We got a wonderful opportunity to build a beautiful connection with the amazing story tellers and youth advocate Care Leavers. We as care leavers somehow carry similar experiences no matter where we come from. We connected to one another and realized that we will always be there for each other. Many of us had this experience for the first time on such a huge platform to share our stories as care experienced youth. Sharing a story is a very difficult task to do but we believe that sharing our stories and experiences can change some care experienced children and young people's lives. Furthermore, through our interactions with other friends who had experienced similar situations in Nepal, India, and Sri Lanka, despite the similarities in our stories, each person is unique. As such, we all heal in different ways, and some of us may need a lifetime to fully recover. Nevertheless, it's okay if it takes a lifetime, and no one should feel pressured to get better.

We would like to thank the BICON Committee for giving us this opportunity to represent the voice of care experienced youth in Asia. Our heartfelt thanks to the care leaver reference group for their continuous guidance and support throughout the journey of BICON. Also, many thanks to all the care leavers who have bravely shared their personal stories to inspire us and to inform on care reform in Asia. Lastly, we would like to express our gratitude to everyone who contributed their insightful experiences and advice to help make the 5th BICON a huge success.

## SAFEGUARDING

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The care and safety of participants was of paramount importance in organising the conference. The organising committee established a Safeguarding team to ensure that Safeguarding was at the centre of all decision making and that the conference was a safe place for all involved.

A BICON Safeguarding Policy was developed and used to ensure that all contents and activities for the conference, before and during the BICON conference, had proper guidelines and procedures for ensuring that members and participants were safe and their data protected. The BICON Safeguarding Policy was signed-off by all organising committee members and the care lived experienced working group. The policy was published on the BICON website, and all participants (in-person and online attendees) were encouraged to ensure they had read and understood the Safeguarding policy, Data Protection Policy and Safeguarding protocols that were in place for the BICON Conference.

In order to ensure that the content of the BICON conference adhered to the Safeguarding policy, all content was first sent to the BICON Content Committee and the moderators for review before being signed-off for use during the Conference.

Before and during the BICON conference, Mark Riley (Hope and Homes for Children) and Gurneet Kalra (Udayan Care) acted as the Safeguarding team. The generic safeguarding guidelines were provided to all the participants (online and in-person) and a small desk was set-up just outside the main conference hall, which acted as a 'safeguarding desk' where any incidents or concerns could be raised and addressed. Additionally, a Safeguarding email address was provided to all participants and a dedicated 'Safeguarding' mobile phone number and WhatsApp account was established to ensure that incidents and concerns could be raised in multiple ways. These were published and various posters with these details were visible throughout the conference. The Safeguarding email account, telephone and WhatsApp account were monitored throughout the conference and queries were responded and addressed to in real time.

There were no serious safeguarding incidents reported before, during or after the conference. There were a number of suggestions related to safeguarding for future BICON conferences from participants, both online and in-person, and from the organising committee members. These have all been documented in an internal report and will be considered when planning the next conference.

# DECLARATION FROM THE HEART OF BICON 2023

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*This declaration reflects the combined recommendations and calls to action from BICON 2023. It is organized around the three main themes that emerged from sessions and discussions. The Declaration from the Heart of BICON 2023 was created live during BICON and presented by Karishma Singh, a care experienced young person, during the concluding session of BICON 2023. For this report, it has only been slightly edited for ease of reading.*

## THEME 1: INCLUSION AND WELL-BEING

**Institutionalization ALWAYS has a negative impact on long-term mental health and wellbeing.** This not only applies to childcare homes but also to boarding schools, educational hostels, and religious institutions which are often not regulated by governments.

**Promote meaningful inclusion and participation of all care-experienced persons** including those with disabilities, indigenous communities, and LGBTQIA+.

**No care reform without care experienced persons.** Listen to those in care and care-experienced persons, and value their voices and experiences. Ensure care-experienced persons are meaningfully engaged in policy making.

**Include children with disabilities as active participants** in the planning and delivery of care and care reform. Remove the barriers that hold them back and fight against stigma, pity and charity models.

**Respect children's right to the preservation of identity, language and culture.** These are universal rights that must be respected in all situations, and considered in all decisions pertaining to alternative care placements.

**Strongly advocate against volunteering and voluntourism in residential care** and end the practice of celebrity or other non-family visits to children in orphanages.

Provide parents and guardians with opportunities to develop **positive parenting skills and ensure access to counselling services for care-experienced children and young people** to ease family adjustment after reintegration. Facilitate peer support platforms for care-experienced people to engage with each other in the community.

**Provide holistic aftercare services** (education, training, housing, health, counselling, skills, mentoring, and employment opportunities) to all children and young people leaving care, recognizing the impact and challenges associated with leaving care.

**Ensure the voices of parents and caregivers are listened to.** Families should be consulted and have opportunities to shape policies and practices designed to strengthen families and support them in fulfilling their roles as primary caregivers of children.

“

Let's not just talk about care leavers' voices but also those still in care.”

(ANON FEEDBACK)



## THEME 2: VALUING AND NURTURING INNOVATION

**Identify local solutions.** Value local knowledge, and local practices - including those led by rights holders, in particular children and young people.

Expand **family strengthening programs** (income generation, scholarship schemes, sensitization programs) to prevent child and family separation.

**Ensure foster care and kinship care are properly supported;** including through appropriate legal recognition, adequate policies to operationalize kinship care and all types of foster care services, and appropriate support for caregivers. Kinship care and foster care should be further expanded for children with disabilities.

Harmonise foster care, kinship care and other support systems to align with existing community practices where families and communities can perceive support as a natural extension of their cultural traditions built upon a foundation of respect and understanding.

Facilitate and **incentivise the development of parent support networks** for families caring for children with disabilities to provide opportunities for peer support, learning, and sharing of experiences.

**Support families to develop positive parenting skills** and provide the services and support they need to care for their children. In particular, support families to enable them to care for children with disabilities.

Give children and young people in care **opportunities to develop life skills, self confidence and social skills** and reconnect with their families and communities as a part of reintegration efforts.

**Ensure care-experienced children and young people have access to mental health services,** whilst in care, in preparation for leaving care and as part of aftercare services.

**Encourage governments and donors to scale up innovative practices.** There are great examples of innovation at the local level across Asia ready for scaling.

**Educate donors to invest in sustainable solutions** that prevent child and family separation - not institutionalisation.

“

It is high time to embark on the process of socialisation rather than social isolation.”

RAKESH,  
CARE EXPERIENCED,  
INDIA.

## THEME 3: OUR MESSAGES TO POWER HOLDERS

**End institutionalisation** and support families and communities to care for their children.

**Ensure all children have opportunities for meaningful participation in decisions affecting them** and are supported to develop the skills and confidence to do so! This includes children and young people in and out of the care system.

**Develop mechanisms for regular interaction between care-experienced young people and the government.** This could include involving care-experienced persons in statutory monitoring committees, auditing aftercare service provision or monitoring the care reform process.

**Government leadership is essential!** National governments need to establish long-term care reform strategies to support progressive and responsible change, bringing together all stakeholders and fostering collaboration.

**Maintain robust child protection information management systems** and monitoring mechanisms that routinely capture data on all children in alternative care and enable and monitor the provision of aftercare services for care-experienced young people. Ensure case management and psychosocial **support services are in place for children in alternative care**, and link to the information management system, to monitor children's well-being.

**Strengthen and strictly enforce gatekeeping:** gatekeeping mechanisms should be regularly monitored to prevent unnecessary recourse to alternative care and ensure residential care is genuinely used only in exceptional cases as a last resort and temporary option.

**Enact volunteering regulations, including for training placements,** ensuring all placements involving contact with children are appropriate, and governed by child protection standards that include at a minimum mandatory background checks.

Governments should provide children and young people in alternative care with particular support to guarantee their right to the preservation of identity, including **access to legal identity documentation**.

**Strengthen the capacity of the social service workforce,** in particular, by providing additional training and supervision to social workers overseeing and supporting kinship care and foster care placements and building the capacity of child protection actors across government and civil society. Ensure local government duty-bearers are involved in developing and implementing solutions.

**Remove barriers to accessing government services** and initiatives, particularly barriers experienced by marginalized, nomadic and indigenous communities. Establish safe one-window operations to streamline access to social protection and social services. Increase investment and budget allocation to family-strengthening services.

**Address the root causes of institutionalisation** by scaling up and improving access to universal services, prevention and early intervention services, including quality inclusive education, social protection, food security and primary healthcare.

**Encourage donors to redirect funding from residential care to family-based care.** Child rights impact assessments should be conducted on all programs to ensure that they are not contributing to child separation as a part of donor due diligence.

**Sensitise government agencies, services, and businesses** towards the rights and support needs of care-experienced persons.

“

We are the Story.  
We are the  
Truth. We are the  
Evidence. No Care  
Reform without  
Care Experienced”

BIRENDRA,  
CO-FOUNDER SHINE  
TOGETHER, NEPAL

# SESSION SUMMARIES

## SESSION 1. HOUSEKEEPING AND SAFEGUARDING

Housekeeping procedures explained by **Anju Pun**

Safeguarding expectations and procedures presented by **Mark Riley & Gurneet Kalra**

To listen to session 1, click [here](#).

## SESSION 2. WELCOME TO THE 5TH BICON

**Session Moderator:** Anju Pun, Country Director, Forget Me Not, Nepal



### Speakers:

- **Honorable Urmila Aryal**, Vice-chair, National Assembly, Nepal
- **Bam Bahadur Baniya**, Vice-chairperson, National Child Rights Council, Nepal
- **Dikshya Thapa**, Co-founder of Shine Together Care Experienced Network in Nepal, representing the BICON Care Experienced Reference Group
- **Dr. Kiran Modi**, Founder and Managing Trustee, Udayan Care, India
- **Ms. Mikiko Otani**, Committee on the Rights of the Child
- **Dr. Rinchen Chopel**, Director General, SAIEVAC and Member of the UN Committee on the Rights of the Child, Bhutan

### Overview of presentations

The 5th BICON was opened by **Dikshya Thapa**, Co-founder of Shine Together Nepal and the representative of the BICON Care Experience Reference Group. Dikshya's opening remarks set the tone of the conference, by centering the conversation on the voices, experiences, and best interests of children and young people in care. She invited all participants to experience the conference through that lens.

“Imagine you're a child without family or home. What kind of future will you have?”

Dikshya highlighted a range of pertinent issues that needed to be systematically addressed across the care system. These included prioritising care in safe family settings, combatting the 'orphan myth' (inaccurate labelling of children and youth in care as orphans), and improving the reintegration process and aftercare services, particularly to address issues such as loss of identity, culture shock and emotional and psychological issues that can stem from abandonment and emotional deprivation.

“People don't understand what care experienced people have lost during all those years apart. We are unaware of our own legal identity and culture. We go through different mental health problems when not knowing whom to reach out to.”

Dikshya reiterated that BICON is a platform for care experienced young people to come together and raise their voices on key issues and challenges they face. Dikshya thanked the entire BICON care experienced reference group for their bravery, their continuous guidance and support throughout the journey of BICON. To reflect how vital it is that care-experienced people are front and centre of this conference, she highlighted a quote from the co-founder of Shine Together, Birendra Shahi

“ **We are the STORY, WE are the TRUTH and We are the evidence in ourselves to change the policy.**”

Dikshya closed her speech by describing what she would want for her family:

“ **Tomorrow If I start a family, I want my children to grow up in a healthy environment, not whose childhood is taken away where they will spend their entire life healing and rebuilding their identity and relationships. I want my government, my state and my country to provide such a strong child protection system to emphasize alternative care if that is the need.**”

**Dr. Kiran Modi**, Founder and Managing Trustee of Udayan Care, reflected on the establishment of BICON and its history, and the commendable progress in care reform that has been made at the global level and across Asia. Dr. Modi highlighted the need for coordinated action plans from governments, civil society and all stakeholders to eliminate this human rights violation and save the human dignity of children. Celebrating the growth of care leavers’ networks across Asia, including Sri Lanka, Nepal, and India, Dr. Modi underscored the increasing prominence of care-experienced individuals in these discussions.

**Bam Bahadur Baniya**, Vice-chairperson of the National Child Rights Council of Nepal, emphasized BICON’s potential to contribute significantly to improving standards in alternative care for children. Mr Baniya summarized key progress made in care reform in Nepal, including legislative and regulatory reforms, improved referral and coordination mechanisms and strengthening of subnational child protection systems. He commended the Government of Nepal for the progress made in reducing the number of residential care institutions in operation.

**Urmila Aryal**, Vice-chair of the National Assembly in Nepal emphasized the importance of providing a safe and caring family for every child. Reflecting on her tenure as the Minister for Women, Children, and Social Welfare 17 years ago, Ms. Aryal recalled issues like fake orphans, exploitation in inter-country adoptions, and the growth of childcare homes. She noted the progress made since then, citing BICON as an example where the focus has shifted towards family-based care rather than institutionalized care. Nepal has recognized children’s rights as a fundamental constitutional guarantee, defining alternative care and care reform, emphasizing that childcare institutions are temporary and a last resort. The law also advocates against separating children with disabilities from their families unless deemed in their best interest by competent authorities.

**Ms. Mikiko Otani**, member of the CRC committee, joining online, emphasized the Committee’s role in scrutinizing the implementation of the Convention on the Rights of the Child on a global scale. She referenced the 2030 SDG agenda, underlining its principle of leaving no one behind and emphasizing that children with experience in alternative care often find themselves left out. Ms. Otani pointed out the lack of access these children have to decision-making processes, emphasizing the core principle of child participation upheld by the Convention. She stressed the importance of creating a dedicated platform for these young individuals and acknowledged the efforts of civil society, children, and young people in raising awareness about their concerns.

Looking forward, Ms. Otani mentioned the upcoming focus of the Human Rights Council on social protection during its annual Children’s Rights Day. She emphasized the need to delve into the root

causes of alternative care and separation, aiming to prevent children from being placed in institutions. Social protection is key in this context, and Ms. Otani urged children, youth with care experience, and civil society organizations to contribute their expertise and perspectives to these essential discussions in the following year.

**Dr. Rinchen Chopel**, a member of SAIEVAC and the UN Committee on the Rights of the Child, joining online, expressed his strong support for BICON. He stressed the need for dedicated discussions between BICON events to drive change. He emphasized the necessity of transforming BICON into an ongoing advocacy effort, particularly urging greater involvement of care leavers and all children in addressing alternative care issues. He acknowledged the focus on deinstitutionalization while highlighting the importance of quality short-term emergency shelters in addressing disasters in Asia and worldwide.



### Calls to Action

- Advocate, collaborate and coordinate to ensure all children have a chance to thrive in safe, loving and nurturing families.
- Increase opportunities for meaningful participation of children and young people with care experience. Children and Care Leavers must be involved in all steps and stages of the care reform process.
- Create a dedicated platform for children with experience in alternative care.
- Address misconceptions around ‘orphanhood’ and put an end to the inappropriate labelling of care experienced children and youth as ‘orphans’.
- Promote localization and decentralization in care reforms. Engage local communities in identifying issues and designing solutions.
- Leverage BICON to build and sustain momentum.
- Accelerate efforts to phase out child institutionalisation whilst ensuring sufficient high-quality, appropriate, short-term alternative care is available for emergency situations.

*To listen to the full presentations from session 2, click [here](#).*

## SESSION 3. MOMENTUM FOR CARE REFORM IN ASIA

**Session Moderator:** Ms. Anju Pun, Country Director, Forget Me Not, Nepal



### Speakers:

- **Ms. Karishma Singh**, Founding member of CLAN, representing BICON Care Experienced Reference Group, India
- **Ms. Pabitra Lakai**, Care Experienced Young Person, Nepal
- **Mr. Aaron Greenberg**, Senior Regional Advisor for Europe and Central Asia, Child Protection · UNICEF, USA

## Overview of presentations

**Ms. Karishma Singh, Founding Member of CLAN (Care Leavers Association and Network), representing the BICON Care Experienced Reference Group,** opened her speech by affirming the ongoing relevance of three key themes from the 4th BICON in 2021:

1. Prevention of unnecessary separation.
2. Ensure suitable quality alternative care services, including foster care and kinship care for children for whom separation cannot be prevented.
3. Transform care systems and redirect resources away from institutional care services towards family-based care and community services that support children to live in families.

Ms. Singh highlighted several areas of progress since the 4th BICON:

- Increased representation of care-experienced persons within the BICON network.
- Increased recognition of care leaver challenges amongst the government and in key policy documents in India, which led to the aftercare financial aid package being doubled from 2000 to 4000 Rupees.
- Scaling up of Care Leaver Networks and social support for Care Leavers.

**Ms. Pabitra Lakai, Care Experienced Advocate, Nepal,** reflected on recommendations made during the CRC Day of General Discussion in 2021, where she co-presented a report on behalf of 1188 children and young people across the globe. In summarizing the key recommendations Ms. Lakai affirmed the importance of:

- Ensuring all children grow up in safe and nurturing families.
- Addressing the care needs and rights of children who are separated, unaccompanied or without care.
- Ensuring access to justice and accountability for children and young people in alternative care and their families.
- Delivering appropriate quality alternative care services in line with human rights standards.
- Transforming the alternative care system towards family-based care and community services that support children to live in families.
- Preventing family separation, including in the context of public health emergencies.

Reflecting on the progress that has been made since the 2021 DGD, Ms. Lakai identified the following key points:

- An increasing shift towards family strengthening, family-based care and move away from institutional models of care
- Improvements in disability inclusion and inclusive services for children and persons with disabilities.
- Increased awareness of child rights and the creation of child-friendly environments within institutional care, schools, colleges and other settings.
- A growing movement of Care Leaver Associations formed and led by care-experienced young people, who are increasingly shaping the care reform agenda.
- Growing awareness of alternative care issues amongst the public.
- Increased awareness of the importance of mental health and notions of child well-being amongst parents and caregivers.

**Mr. Aaron Greenberg, UNICEF, USA** joining online, noted the increase in political commitments made by governments all over the world to shift from institutional to family-based care systems. He highlighted the promising practice within the European Union of providing financial support to States to make this critical shift. Mr. Greenberg gave several examples of progress with deinstitutionalization efforts in Tajikistan and Uzbekistan, with funding from institutional care redirected towards foster care, prevention of separation, social work, and specialized services where necessary. He emphasized the importance of multi-stakeholder collaboration and engagement, noting that many institutions are privately run, including by faith-based actors. He also stressed the importance of taking an individualized approach to child reintegration highlighting that a one size fits all approach often leaves behind children with special needs, complex family backgrounds and children with disabilities. Increased representation of care-experienced persons within the BICON network.



### Calls to Action

- Efforts to promote youth well-being must be strengthened, including by connecting care-experienced young people to care-leaver networks to access peer support.
- Stakeholders should work together to ensure the recommendations from the 4th BICON and 2021 DGD are fully implemented across the entire Asian continent.
- Governments should strengthen the monitoring of institutional care facilities and improve accountability.
- Moratoriums on new admissions should be enforced to accelerate the shift towards family-based care. Annual reports and inspection outcomes should be scrutinized.
- Stakeholders must prevent the separation of siblings in alternative care and increase opportunities for family contact to preserve bonds with families that promote reintegration and well-being.
- Communities should be intentionally prepared to accept and embrace children being reintegrated out of residential care, including children with disabilities.
- Counselling and mental health support services should be scaled up and strengthened for children and young people in the community.
- Foreign funding of institutional care must be regulated and redirected towards family-based care services. Donor awareness-raising should be scaled to improve accountability and stamp out corruption and the commodification of children in institutional care.
- Governments must ensure that the child's right to a name, nationality and identity is respected for all children in alternative care, including for children with disabilities.
- Governments must strengthen and enforce gatekeeping to prevent unnecessary separation and institutionalisation of children.
- Governments should prioritize improving protections for children's rights in legislation and strengthen child rights governance and accountability mechanisms to ensure the effective implementation of child rights laws and policies.

To listen to the full presentations from session 3, click [here](#).

## SESSION 4. INNOVATIVE APPROACHES TO FOSTER CARE, KINSHIP CARE AND COMMUNITY SUPPORT

**Session Moderator:** Mr. G. Kumaresan, Child Protection Specialist, UNICEF, India



Speakers:

- **Ms. Anna Sakreti**, Program Advisor, Muhammadiyah, Indonesia.
- **Mr. Anderson Selvasegaram**, Executive Director, Suka Society, Malaysia.
- **Ms. Khadijah Madihi**, Founder, Asia Family First, Malaysia.



### Session Objectives and Context:

The session aimed to explore innovative approaches in alternative care, focusing on foster care, kinship care, and community support. Each speaker shared their experiences and insights, shedding light on the challenges and opportunities within these areas. The session emphasised the importance of cross-sectoral policy formulation, simplifying procedures, building community awareness, and tapping into cultural strengths to enhance the well-being of children in alternative care arrangements.

### Overview of presentations

**Ms. Anna Sakreti** presented on the foster care experience in Indonesia with Muhammadiyah. She highlighted three critical aspects of foster care: norms, structure and culture:

1. **Norms:** The Indonesian government has regulations related to foster care, and Muhammadiyah, as an organization, developed strong guidelines in 2010. A significant milestone was the development of a Fatwa policy on foster care in 2021 and professional guidelines for foster care in 2023.
2. **Structure:** The Minister of Social Affairs has established procedures regarding how to become foster parents and what constitutes a foster care institution. However, these procedures are often not implemented, causing significant delays in placing children in foster care. There are four kinds of foster care agencies, but the number of registered foster care agencies is significantly lower than the number of children in need. Criteria for foster parents includes being citizens, husband and wife, and the possibility of one of them being a foreigner. Foster care can be terminated if reunification with the biological family is successful.
3. **Culture:** Values, beliefs, and societal factors play a significant role in the development of foster care. Foster care is often motivated by faith, the desire to do good and is an option for those who cannot have children of their own. Challenges include concerns about the mental health of children in care, particularly when they become aware of their foster status; the stigma associated with foster care; and the risk of placement breakdown if the foster parents have biological children.



**Mr. Anderson Selvasegaram** presented on Kinship care and case management in Malaysia focusing on services for unaccompanied children from countries such as Myanmar and Afghanistan. As a non-signatory to the refugee convention, Malaysia lacks state protection for refugees, making the role of NGOs and CSOs vital. He highlighted the challenges faced by unaccompanied children, including trauma, immigration issues, and detention. The UNHCR and community workers typically refer these children, and they are assigned a case manager. The primary goals of this program are to ensure these children's safety, permanency, and well-being by placing them within family environments from their community, including neighbours and friends. Community members are trained and capacitated to support these children, creating a kinship family context.

Mr. Selvasegaram stressed the importance of working on the legal status of these children and providing holistic care, including education, mental health, and physical health services, through partnerships with various service providers. Notably, this program operates independently of state involvement. He explained why kinship care is preferred in these situations, citing the benefits of placing children with community members of the same ethnicity. This arrangement allows for preserving cultural, religious, and linguistic ties and helps children maintain relationships within their community, a concept deeply rooted in their culture. Continuous training for caregivers and support groups is crucial to bridge cultural differences and provide the best care possible.

**Ms. Khadijah Madihi** presented on community support systems, highlighting the importance of acknowledging existing community-based and culturally rooted practices. She emphasised the need to revisit the historical origins of these practices, especially in Asian communities. She discussed the concept of “continuum of care” deeply embedded in Asian culture. This extends beyond immediate family to include extended kinship networks, such as “grandma’s friends,” who play vital roles in child rearing and support. Ms. Madihi stressed the importance of leveraging these existing resources to prevent family separation and institutionalisation.

Ms. Madihi provided examples from Thailand, where a child safety campaign tapped into Tuk Tuk drivers to alert authorities to child safety concerns, a collaborative effort supported by Friends’ International. She contrasted government-run, top-down approaches in Thailand with the more autonomous, NGO-led models in Singapore, where family social service agencies were funded directly by the government. In her discussion of Cambodian practices, Khadijah highlighted a model that places the family and child at the forefront, allowing them to lead case management efforts. Families assess their risks and co-design solutions, focusing on their strengths. This approach emphasises sustainability through the active involvement of both family and community, at a cost of just \$10 USD per annum per person. She underscored the importance of recognising and tapping into community resources and culturally sensitive approaches to enhance the well-being of children in alternative care arrangements. These practices, deeply rooted in Asian culture, offer valuable insights into preventing family separation and promoting sustainable support systems.



#### **Calls to Action**

- Advocate for cross-sectoral policy formulation to simplify procedures and increase resources for foster care programs.
- Mainstream child-sensitive social protection for foster children into government policy, laws and regulation, as well as community structures.



### Calls to Action

- Develop IEC material and disseminate to the community that biological children and foster children have the same rights.
- Increase support for child care institutions to become foster care agencies through training, financial assistance and assistance of social workers.
- Build a database of children who are in need of foster care and parents who are ready to become foster parents.
- Increasing accountability of the different stakeholders in fulfilling their commitment to family care for children.
- Develop comprehensive case management systems, ensuring the involvement of case managers in follow-up and support for vulnerable children and their families.
- Strengthen community-based resources and culturally sensitive approaches to prevent institutionalisation and separation of families.
- Promote awareness and training for caregivers and support groups to bridge cultural differences and ensure the well-being of children in alternative care arrangements.
- Use the existing evidence already available with care experienced people, for policymakers to frame the policies based on the evidence.

To listen to the full presentations from session 4, click [here](#).

## SESSION 4. BREAKOUTS

### Session 4.1 Foster Care

**Session Moderator:** Lopamudra Mullick, Senior Program Manager, Railway Children, India



#### Speakers:

- **Anara Kalilova**, SEMYA, Kyrgyzstan
- **Amihan Abueva**, Regional Executive Director, Child Rights Coalition Asia, Philippines
- **DB Lama**, The Himalayan Innovative Society (THIS), Nepal

### Overview of presentations

This breakout session provided insight into technical approaches to developing and implementing formal foster care in the diverse contexts of Kyrgyzstan and Nepal, as well as the personal reflections of a child rights practitioner who became a registered foster carer in the Philippines. Speakers noted that while there had been initiatives to develop formal foster care in Asia, interventions have been extremely limited and more needs to be done for scaling of foster care provision.



### Calls to Action

- All stakeholders; authorized state bodies, NGOs, experts, service-providers, communities and families must coordinate their efforts to build an effective and sustainable system of foster care.
- Motivate more people to become foster carers, and make foster care more successful, by raising awareness and expanding services to rural areas.
- Ensure that a trained and professional social workforce is available at the local level.
- Local bodies should develop strong safeguarding procedures, including mechanisms for monitoring and support.
- Increase budget allocation for alternative care, including financial support for foster carers, and gatekeeping.
- Recognise informal foster care as a historical and traditional practice across cultures.
- Culture, ethnicity, religion and language must be considered when matching children with carers, and siblings should not be separated.

*To listen to the breakout session presentations, click [here](#).*

## Session 4.2 Kinship Care

**Session Moderator:** Ms. Sandhya Mishra, Director, Miracle Foundation India



### Speakers:

- **Ms. Rija Maharjan**, Child Protection Coordinator, The Himalayan Innovative Society (THIS), Nepal
- **Mr. Issac Arulappan**, Founder, Cornerstone, India
- **Ms. Lopa Bhattacharjee**, Director, Family for Everychild

### Overview of presentations

This workshop focussed on different innovative practices to informal foster care and kinship care. Rija Maharjan from the Himalayan Innovative Society (THIS) spoke on her experiences of kinship care, and the organisation's learning and experiences. Isaac Arulappan, from Cornerstone in India, spoke about his organisation's experience of moving away from institutional care and towards kinship care. Finally, Lopa Bhattacharjee spoke about Family for Every Child's inter-agency guidance for practitioners on kinship care.



### Calls to Action

- Governments should officially recognise the effectiveness of kinship care in preserving family relationships, enabling children to stay in touch with their culture, and contributing to greater stability, child mental health and wellbeing outcomes.
- Create an enabling atmosphere for kinship care through collecting evidence, advocating for kinship care, developing policies and strategies, and strengthening the social service workforce.
- Promote and support individualized, responsible parenting.
- Ensure that transitions are well-informed and that the local community and local authorities are involved in the reunification process.
- Develop family-based support systems encompassing nutrition, livelihood counselling, education, vocational training, regular professional monitoring, parenting education, safety nets, counselling support, and holistic case management.
- Develop comprehensive guidelines to address practitioners' concerns and enhance the quality of kinship care.
- Consider the local context and social norms, and involve children, families and individuals with lived experience, to ensure effective interventions.
- Promote and nurture the presence of child and family advocates in every community.
- Formalisation of kinship care should not be a prerequisite; instead, the focus should be on providing multifaceted support tailored to individual needs.

*To listen to the breakout session presentations, click [here](#).*

## Session 4.3 Community Approaches

**Session Moderator:** Dr. Ganga B Gurung, National Director, SOS Children's Villages Nepal



### Speakers:

- **Mr. Raju Ghimire, Deputy Director**, Voice for Children Nepal, representing the Alternative Care Working Group of Nepal
- **Ms. Ranjana Srivastava**, Assistant Director, Udayan Care, India
- **Mr. Subhadeep Adhikary**, Program Manager, Children in Need Institute (CINI), India

### Overview of presentations

The session highlighted the importance of community-based approaches for at-risk and vulnerable children, including promoting family-based alternative care at both stakeholder and beneficiary levels. The session's first half was on the Alternative Care Working Group (ACWG), which is a collaboration between several CSOs in Nepal coming together for the cause of strengthening Alternative Care. The

second half dealt with various practices and effective community approaches/models on alternative care shared by Ms. Ranjana Srivastava and Mr. Subhadeep Adhikary, including efforts by central and state governments in India. Speakers focused on the importance of community gatekeeping, global and national laws, schemes and programs on family and community strengthening, collaborative approaches between various stakeholders, promotion of deinstitutionalization, child participation, specifics for community models and finally, strengthening of the belief of family being the best place for a child's holistic development.



### Calls to Action

- Ensure support and build capacities of local Government bodies and frontline workers for effective implementation of Alternative Care practices.
- Create “safe spaces” in communities to act as single-window support units for at-risk children and families.
- Ensure capacity building of child protection actors from both Government and Non-Governmental Organizations, and build inter-departmental convergence for the holistic benefit of children.
- Redirect resources at the community level and ensure improved access to schemes and policies for beneficiaries, especially family support programs.
- Ensure robust monitoring and follow-up mechanisms for beneficiaries for sustained aid.
- Ensure the participation of children in decision-making processes.
- Strengthen policy making at the Government level for exhaustive and detailed guidelines for Alternative Care for children.
- Promote awareness generation on Alternative Care and prevention of children from separation at the community level through district administration, frontline workers etc.

To listen to the breakout session presentations, click [here](#).

## SESSION 5. CHILDREN WITH DISABILITIES AND CARE REFORM

**Session Moderator:** Leena Prasad, Associate Director, Udayan Care, India



### Speakers:

- **Ms. Barma Magar**, Shine Together Nepal, BICON Care Experienced Reference Group
- **Dr. Nidhi Singhal**, Director of Research and Training, National Centre for Autism, India
- **Mr. Deepak Raj Sapkota**, Executive Director, Karuna Foundation Nepal



### Session Objectives and Context:

This session highlighted the importance of including children with disabilities in care reform and respecting child rights within alternative care settings. The testimony of Ms. Barma Magar, a young person with lived experience of being institutionalised due to a visual impairment, underlined the urgency of transforming both care systems and societal attitudes. It included examples of how efforts to increase parental awareness and empowerment can support children with disabilities to stay with their families and demonstrate the importance of inclusion.

### Overview of presentations

**Ms. Barma Magar**, member of Shine Together Nepal, outlined the challenges faced by children with disabilities in institutional care settings. With 11 years of experience within these systems, Ms. Magar described the discrimination and neglect experienced by individuals with disabilities. Ms. Magar emphasized that institutionalization should never be the solution. She stressed that children, regardless of their situations, have the right to a family. Ms. Magar urged the government to support families with disabled children, providing essential services, accessible systems, and proper education guidance to prevent institutionalization due to disability. She called for a collaborative effort between the government and communities to collect data on children with disabilities. This data would aid in providing necessary services, including healthcare, accessible facilities, and educational support, ensuring that no child ends up in institutions due to their disability.

**Dr. Nidhi Singhal** highlighted the importance of promoting acceptance of children with disabilities, particularly at the family and community level, and the critical need to address attitudinal and cultural barriers for children with disabilities. She advocated for the empowerment of parents of children with disabilities to support parents in fulfilling their role as primary caregivers, noting the detrimental impacts of stigma on parents' own perception of their capacity to provide care. Dr. Singhal gave an example of a WHO program run in partnership with the Ministry of Health in India that promotes disability inclusion through parent empowerment programs.

**Mr. Deepak Raj Sapkota**, Executive Director of Karuna Foundation Nepal, shared insights into their Disability Prevention and Rehabilitation Program, a model of inclusive development placing people with disabilities, women, and children at its core. Sapkota emphasized viewing disability as a political issue, aligning with the social model and the UN Convention on the Rights of Persons with Disabilities, describing disability as the result of the interaction between varying functional abilities and an environment not accommodating these differences, expressed as the formula:  $\text{Disability} = \text{Functional Limitation} \times \text{Environment}$ . Mr. Sapkota stressed the importance of inclusion in all settings, highlighting the DID standard encompassing equality, accessibility, non-discrimination, full participation, and embracing human diversity. Inclusive education, family settings, communities, and care systems are key components. The foundation's approach is marked by close collaboration with local governments and active community involvement. Their programs focus is on prevention and early intervention, including through strategic interventions during pregnancy and early childhood, aligning with the WHO matrix of Community-Based Rehabilitation, addressing Health, Education, Livelihood, Empowerment, and Social factors. In addition, the program seeks to prevent the separation of children from their families and support children with disabilities, who are in institutional care to integrate back into the community. Sapkota highlighted key challenges, including the absence of comprehensive data on disabilities, the diversity within disabilities requiring tailored support, and the crucial stages of Identification, Recognition, and Acceptance.



### Calls to Action

- Governments should increase the support available to families of children with disabilities, to prevent unnecessary separation and institutionalization due to disability.
- Stakeholders need to work together to address social attitudes, stigma and discrimination towards persons with disabilities, including children, and promote children's full participation in family and community life.
- Parents need to be empowered to understand and fulfil their role as the primary caregivers of children, including parents of children with disabilities. This requires a shift in community attitudes towards disability from a deficit to a diversity-focused perception of disability.
- Facilitate parents' participation in policy forums, acknowledging the importance of lived experience in shaping decisions, policies and designing services for children with disabilities.
- Governments should ensure mechanisms are in place to routinely capture and collate comprehensive data on disability. Data should be used to inform the allocation of budget, design and delivery of essential services to children with disabilities and their families.
- Stakeholders should prioritize training and awareness raising for medical professionals, who are often the first point of contact for parents of a child with a disability, as part of addressing community attitudes and promoting the empowerment of parents and families.
- Governments should increase budgetary allocations towards disability inclusion and services. Funding from institutional models of care should be reallocated and redirected to scaling up community-based rehabilitation services.
- Move away from the medicalized 'prevention' and 'cure' model. Focus on respecting and embracing diversity. Work towards moving societal barriers for persons with disabilities as the goal of prevention.
- Include the voices of children and young people with disabilities and provide the necessary support to ensure meaningful participation.
- Ensure all young people with disabilities transitioning out of institutional care access appropriate support to prepare them for integration and community and family-life.

*To listen to the full presentations from session 5, click [here](#).*

## SESSION 6. CULTURE AND IDENTITY

**Session Moderator:** Sumnima Tuladhar, Executive Director, CWIN Nepal



### Speakers:

- **Ms. Ruma Budha Magar**, Co-founder, Shine Together, and BICON Care Experienced Reference Group
- **Mr. Sushil Babu Chhetri**, Freelance film-maker & photographer and Care-experienced Activist, Nepal
- **Mr. Manoranjan Dash**, Changing the Way We Care/Catholic Relief Services, India
- **Mr. Deep Purkayastha**, Executive Director, Praajak, India



### Session Objectives and Context:

This session focussed on the importance of maintaining cultural identity, the role of faith and culture in the provision of care and explored the impact of voluntourism/tourism on culture and identity. Speakers with lived experience highlighted how the lack of respect for their culture, identity and language have affected their lives and their relationships. The need to respect indigenous methods of childcare was underlined, as was the importance of engagement with faith-based actors in the reform process.

### Overview of presentations

**Ms. Ruma Budha Magar**, Co-founder of Shine Together and a member of the Care Experienced Reference Group at BICON, recounted her personal journey of spending 11 years in two different institutions, highlighting the difficulties she faced in terms of language and culture. While in Kathmandu, she learned Nepali, but upon reuniting with her community, she couldn't communicate with them because they spoke Magar Kham. She also mentioned the shift in her religious beliefs from Hinduism, which she followed in institutional care, to Christianity, which her family practised. This transition made her feel disconnected from her true self and tied down by new rules and expectations.

She emphasized that care-experienced young people like her often struggle with identity, obtaining legal documents, understanding different languages and cultures, and finding their place in society. Ms. Magar considered herself fortunate to eventually obtain citizenship, thanks to the support of 10 family members from her mother's side who vouched for her. However, she noted that many individuals in similar situations still face challenges in securing legal identity, which in turn affects their access to higher education, financial services, and employment opportunities.

“ Our cultural roots and identity are what make us who we are. It defines us as individuals.”

**Mr. Sushil Babu Chhetri**, a freelance filmmaker, photographer, and care-experienced activist from Nepal, emphasized the essential need for care reform processes to be shaped by the voices of care-experienced persons. Mr. Chhetri recounted his experiences in an abusive orphanage, which he



described as a “human zoo.” Despite the outward appearance, the orphanage was a place where the children were trained to appease donors, erasing their identities and aspirations in the process. They were required to falsely declare themselves as orphans and profess fabricated ambitions to appeal to donors, all as a part of sustaining the ‘orphanage business’.

“ We were taught to erase our culture, our background, we were Hindu, Buddhist, Christian... .. on Sunday to Church, on Monday, Thursday to another religion, because they gave us a donation.”

“ Every day I had to live this, repeating that I was an orphan, that I wanted to be a pilot, until slowly I started living it...This is how I started living the orphanage culture.”

“ Thousands of my friends, we are a product of guilt trip, saviour complex, a sympathy story. I don't want to be a sympathetic character at this conference. I'm here to tell my story and say there should be no alternative care conversations without us.”

Mr. Chhetri was rescued from the abusive orphanage and taken to another orphanage, however acknowledged that although conditions improved, he was still stuck in the orphanage culture. Mr. Chhetri transitioned out of the second orphanage once it began to run out of funds. Transitioning out of care posed its own set of challenges. He spoke about the unrealistic expectations placed on care leavers when they returned to their families. Often viewed as a financial security and insurance, they faced immense pressure to provide for their families. In addition, Mr. Chhetri stated that even after nine years back living with his family, they still struggled to understand each other and deal with attachment issues.

“ When we return to our families, we are like a book full of questions, without answers.”

**Mr. Manoranjan Dash**, Changing the Way We Care (CTWWC) India shared about CTWWC's work to shift from institutional care to promoting nurturing family environments for children in India. Mr. Dash drew attention to the thousands of children residing in institutions, particularly those operated by the Catholic Church in Tamil Nadu, where 90% of childcare institutions are church-run. He underscored the disparity between what children truly need – a sense of belonging, love, and family – and what institutions often provide, shelter, food, and education. To bridge this gap, the initiative engaged well-meaning churches in conversations about aligning their efforts with scientific research, national laws, and international frameworks, such as UN protocols, regarding alternative child care.

**Mr. Deep Purkayastha**, Executive Director, Praajak, India discussed Praajak's work with the Baid nomadic community in India. They first noticed children and families settling in tents near railway stations. Parents would leave for the entire day and avoid contact with social workers. Many of these families had young children who were begging on railway platforms. Praajak established a drop-in centre to support these children. Many of the children who attended were hesitant to inform their parents, explaining that their parents would become angry because they expected their children to beg and ‘look dirty’ to earn money. Mr. Purkayastha highlighted the importance of understanding culture and background in order to design appropriate interventions for children and families. He stressed the need to consider culture and background in order to design appropriate interventions for children and families. He explained that children from the Baid nomadic communities traditionally collected honey from the wild. However, the destruction of biodiversity had adversely impacted this livelihood. Social stigma and discrimination made

it challenging for them to work in their villages. These factors led to children turning to begging as their primary economic activity. He stressed the importance of approaching the discourse of child rights and child protection from an indigenous perspective and listening to the unique experiences, beliefs and caregiving practices of these families. Failing to do so can lead to inappropriate interventions, including unnecessary separation and institutionalisation.



#### **Calls to Action from Care Experienced People in this session:**

- **Birth registration:** Local governments must help children raised in the institutional care system to ensure their birth registration and legal documentation based on their biological identity, without which a citizenship certificate cannot be accessed.
- **Protecting our origins:** Every individual has the right to flourish in their biological origin. Thus, there must not be any change in the name, surname, religion or belief of a child even if they are in the care system.
- **Proper documentation (data and profile):** Maintain a complete record of all the children who are in and out of the care system (basic profile, health status), as well as a care plan for each child after leaving the institution and submission of their documents to the local authorities.
- **Preserving right to culture and identity:** Each individual is shaped by their culture and religion. Thus, each child must be allowed to learn and practice their culture and be close to their roots even while they are in care, as they must return to their society once they are out of the institutional care system.
- **Respect for religious freedom.** Residential care should not be used as a mechanism for religious conversion or proselytization. Organisations operating residential care for such purposes should be shut down.
- **End orphanage voluntourism.**
- **Share the stories of care experienced youth** to raise awareness of orphanage trafficking with families and communities.
- **Put care experienced persons' voices at the centre** of care reforms.
- **End child institutionalisation:** Orphanages, both “good” and “bad” create a culture that detaches children from family, community, culture, society and reality and is harmful to children.

*To listen to the full presentations from session 6, click [here](#).*

## SESSION 7. DAY 1 CLOSING SESSION

**Session Moderator:** Leena Prasad, Associate Director, Udayan Care, India



### Speakers:

- **Ms. Nimali S Kumari**, BICON Care Experienced Reference Group, Sri Lanka
- **Ms. Rija Maharjan**, Child Protection Coordinator, The Himalayan Innovative Society (THIS), Nepal



### Session Objectives and Context:

Nimali and Rija closed day 1 of the conference by highlighting the key messages that came out of the sessions. They drew attention to the need for care experienced voices to shape discussions on care reform, development of alternative care services and the need to respect children's culture and identity.

*To listen to the full presentations from session 7, click [here](#).*

## DAY 2

## SESSION 9. BICON CARE EXPERIENCED REFERENCE GROUP TAKEOVER

**Session Moderator:** Ms. Dikshya Thapa, Chair and Founder, SHINE Together, Care Experienced Network Nepal



### Speakers:

- **Ms. Dikshya Thapa** - SHINE Together - Care Experienced Network Nepal
- **Ms. Junu Lama** - SHINE Together - Care Experienced Network Nepal
- **Ms. Ruma Budha Magar** - SHINE Together - Care Experienced Network Nepal
- **Mr. Birendra Shahi** - SHINE Together - Care Experienced Network Nepal
- **Ms. Surja** - Care Leavers Association Network Delhi, India
- **Mr. Albert Justin** - Miracle Foundation, India
- **Ms. Nimali S Kumari** - Generation Never Give Up, Sri Lanka
- **Mr. Dhanushka Prabath Kumara Jayarathna** - Generation Never Give Up, Sri Lanka
- **Mr. Rakesh Guha** - LIFT Fellow, India
- **Ms. Kalpana Kindo** - Miracle Foundation, India
- **Ms. Karishma Singh** - Care Leavers Association Network Delhi, India
- **Mr. Manoj Udayan** - Care Leavers Association Network Delhi, India



### Session Objectives and Context:

During this session, led by the BICON Care Experienced Reference Group, representatives from Care Experienced networks from India, Nepal, Sri Lanka highlighted the challenges faced by young people reintegrating out of institutional care, and the impact of institutionalization on mental health, and made recommendations for governments, CSOs, donors and other stakeholders.

“ This is the moment we have all been waiting for. We are all from different countries yet we somehow carry similar stories as care experienced. We are the heart of BICON. This should not just be a conversation; it should be a call to action.”

### Overview of presentations

**Ms. Dikshya Thapa** opened the session with a role play involving a member of the audience who played the role of a child in care whose name was changed by the institution. This was a powerful way to highlight the loss of identity experience by so many children and youth in institutional settings. **Ms. Junu Lama** recited a poem she had written titled ‘To I, Me and My’, which captured the suppressed feelings and experiences of many young care leavers.

These presentations were followed by a video that highlighted several critical themes, including the impact of institutional care on young people’s socialization, and mental health impacts on social integration after leaving care. Lack of proper documentation and loss of identity was highlighted as a critical challenge impacting young people’s ability to access services including banking, legal services, identity cards and citizenship. The importance of financial literacy training and career counselling in preparation for leaving care was also highlighted, and examples were given of the challenges young people face when they reenter society without these supports. The video reinforced the importance of care reforms to phase out institutional care and ensure comprehensive services and supports are in place for young people exiting the alternative care system.

**Ms. Ruma Budha Magar and Mr. Birendra Shahi** addressed key challenges faced by care-experienced young people in Nepal, including:

- Lack of proper documentation and legal identity crisis
- Lack of aftercare services
- Mental health issues
- Lack of career counselling and guidance
- Adjustment and socialization
- Lack of counselling for children and parenting skills
- Vulnerability to exploitation and abuse

Ruma and Birendra emphasized the need for counselling, guidance, and support services to address these challenges effectively, providing essential assistance to care-experienced young people in Nepal.

**Mr. Albert Justin and Ms. Surja** spoke of the challenges and needs of care-experienced youth in India, including:

- Access to psychosocial support
- Community support
- Skills development and employment
- Financial literacy and management
- Educational support
- Documentation and identity
- Access to services, including health care

Albert and Surja called for stakeholders to support care leavers, both individually and at a systems level to ensure that care leavers have the social support and services to live a meaningful and stable life. Surja shared a short video called *'Turning 18: The Invisible Youth'* which captured her experience of being in care, leaving care and accessing aftercare services.

**Mr. Dhanushka Prabath Kumara Jayarathna and Ms. Nimali S Kumari** shared the experiences and challenges of care-experienced youth in Sri Lanka, particularly those that impact their transition into adulthood and independence. They stressed that the priority should be on preventing child institutionalisation in the first place and addressing the lack of support for families to prevent separation. In summarizing the key challenges Dhanushka and Nimali raised the following points:

- Lack of career guidance and support makes their entry into the workforce and society daunting.
- The divorce rate among care leavers is high, as having not grown up in a family themselves, they may find forming a family more difficult.
- Lack of financial literacy and the absence of soft skill development training make navigating the challenges of adulthood more difficult.
- Lack of housing and permanent address increases insecurity.
- The absence of adequate support for higher education limits their opportunities for advancement.
- Restrictions are placed on care leavers by some CCIs, including being barred from revisiting the institution for any reason. Additionally, the lack of a monitoring system further exacerbates the struggles care leavers face.
- Stigma and negative perceptions lead to children being labelled as troublemakers rather than providing the necessary support and understanding they require.

Addressing these challenges requires a holistic approach, focusing on education, social support, financial literacy, and fostering a sense of belonging within families and communities.

**Mr. Rakesh Guha** stressed the importance of family-based care in India. Rakesh noted that family is the primary source of love, care and affection and plays a wider role in the socialisation process. It's the place where children learn about the norms of society and where education takes place. Family is the basic unit of social organisation. Rakesh summarized the benefits of families and family-based care as follows:

- Promotes healthy attachments.
- Provides an environment conducive to social learning.
- Allows children to grow up as a part of the ecological system that includes family, community, culture and wider society.
- Families support identity formation as interactions between parents, children and other family members shape identity in an iterative way.

Rakesh highlighted the issues faced by children with disabilities, including commodification, drawing on his own experience of being in an institution, and having his photo taken and used in marketing materials to generate profits for others. He noted the importance of early intervention for families with children with disabilities to prevent separation.

**Ms. Kalpana Kindo** shared the recommendations identified by the Care Experienced Reference Group. These included:

- Proper data collection and documentation of young care experienced people to map potential after-care services.
- Strict and regular monitoring of minimum guidelines for sheltering children in institutional care.
- Strict monitoring of set regulations for volunteering and operating institutional care.
- Providing space for voices of care experienced young people in policy making, with proper follow-up.
- Parenting skills for guardians and counselling services for care experienced young people post-reunification to ease family adjustment.
- Provision of aftercare services (education, health, counselling, and employment opportunities).
- Family Strengthening programs (income generation activities, scholarship schemes, sensitization programs) to prevent family-child separation.

**Ms. Karishma Singh** concluded the session with a few reflections. She noted the importance of language, highlighting the particularly sensitivities around referring to care experienced young people as ‘care leavers’, and the need to expand outreach to care experienced young people to ensure everyone has access to opportunities to share their experiences, express their wishes and collectively shape the care reform agenda to ensure change is achieved!

*To listen to the full presentations from session 9, click [here](#).*

## SESSION 10. SYSTEMS APPROACHES TO CARE REFORM

**Session Moderator:** Ms. Tessa Boudrie, Asia Regional Director, Hope and Homes for Children



Speakers:

- **Mr. Mohammad Rabiul Islam**, Additional Director (Social Security) Department of Social Services Government of the People’s Republic of Bangladesh.
- **Mr. Milan Dharel**, Former Executive Director, National Child Rights Council Nepal
- **Ms. Edith Binnema**, Chief of Party, Family Care First Program, Save the Children Cambodia
- **Mr. Otto Sestak**, Head of Learning and Engagement, Hope and Homes for Children



### Session Objectives and Context:

The process of transitioning care systems from institution-based to family care is complex and touches on many different areas of government policy. A holistic, systemic approach is needed. This session shared approaches from 3 different countries and provided practical advice and tools to encourage similar initiatives elsewhere.

### Overview of presentations

**Mr. Mohammad Rabiul Islam** outlined Bangladesh's journey in reforming its child protection system, highlight key progress made in bringing national legislation into conformity with the CRC. Mr. Islam highlighted the scale of institutional care across the country, noting the prevalence of privately run institutions (4000 institutions caring for approximately 10,000 children) when compared to the 91 government run institutions caring for 7056 children. He highlighted a decline in admission into government institutions however noted the lack of an overarching gatekeeping mechanisms to regulate admission of children across both public and privately run institutions. To address this gap, a national committee was formed to draft the National Child Protection Gatekeeping Policy, which is currently under development.

“ **Children are the future of the nation and it is our duty to provide them support and protection and ensure that they can access quality education and healthcare services.**”

**Mr. Milan Dharel** reaffirmed families as the environment in which a child's interests can be best met, yet noted the challenges with ensuring all children in Nepal have access to safe and caring families. The Children's Act of 2018 formally integrated alternative care into the national child protection system. The country has since embarked on a journal of deinstitutionalization and prioritization of family-based care. Key steps that have been taken include:

- Offence for irregular admission of children into institutional care created in the Children's Act 2018.
- Strengthening of local child protection systems in 300 local governments jurisdictions.
- Improving regulation of childcare homes to enforce regulatory compliance.
- 50% reduction in the number of childcare homes in operation and reintegration of children with families back into their families and communities.

Mr Dharel stressed the importance of gatekeeping and developing a common understanding and consistent approach across relevant sectors. He highlighted the potential for inconsistency, giving the example of the education sector's intention to institutionalize 8000 children with disabilities to access education at the same time the child protection system was undergoing deinstitutionalization. He stressed the importance of interagency coordination, harmonization of policy, garnering political will and having a common and shared agenda that crosses over relevant sectors including child protection, education, health, security and local government.

**Ms. Edith Binnema** presented highlights from the Family Care First Project in Cambodia that commenced in 2015. The project objectives are to:

- Prevent unnecessary child-family separation.
- Reduce the number of children living in orphanages and other residential care institutions.

- Increase the number of children reintegrated into appropriate, protective, and permanent family-based care.
- Reduce the number of orphanages and other residential care institutions.

The three strategic pillars of the program are to:

1. Create an enabling environment for care reform and strengthen the child protection system for care reform.
2. Facilitate a network of 58 Child Protection NGOs for shared learning and influencing policy.
3. Sub-contract partners for direct service delivery and field experiences for policy reform and research agenda.

Ms. Binnema stressed the importance of creating an enabling environment for family-based care as part of care reforms. She gave the example of the Kinship Care and Foster Care study in Cambodia as a key piece of research that underpinned the development of legislation, regulation and guidelines for kinship and foster care. The study identified characteristics of kinship carers and challenges to providing kinship and foster care including:

- Foster care and kinship care require intensive “casework” – from assessment to reintegration/permanency - requires **high capacity of staff**.
- **Limited resources and services** for children and families at risk or to support reunification.
- Families caring for children with disabilities or other special needs require additional training, support, and resources for the children.
- Most **kinship carers have a high commitment but have limited resources** and some are older and have difficulty providing adequate care.
- Some children cannot be reunified with the birth family and options for permanency (such as domestic adoption) are sometimes complicated.

The study resulted in a suite of key recommendations to enhance and scale up kinship and foster care in Cambodia.

**Mr. Otto Sestak** shared key learning from Hope and Homes for Children’s 30+ years of experience of implementing care reforms in different countries and contexts. Otto noted several keys to achieving systems level change including:

1. Understand the context
2. Know yourself
3. Think systemically
4. Learn and adapt
5. Recognize that change is personal

To support countries in implementing reforms, drawing on this framework and the organization’s extensive experience, Hope and Homes developed a [Roadmap for Care Reform for Children](#) that outlines the importance of reforms and sets forth a practical approach to achieving reforms in varying contexts.

*To listen to the full presentations from session 10, click [here](#).*



## SESSION 11. WELLBEING AND MENTAL HEALTH: SUPPORTING CHILDREN IN ALTERNATIVE CARE AND CARE EXPERIENCED YOUTH

**Session Moderator:** Ms. Tessa Boudrie, Asia Regional Director, Hope and Homes for Children



### Speakers:

- **Asst. Prof. Sombat Tapanya, PhD.**, Clinical Psychologist at Peace Culture Foundation (Thailand)
- **Ms. Junu Lama**, Co-founder, Shine Together Network Nepal, Care Experienced Reference Group
- **Mr. Manoj Udayan**, Udayan Care, Care Experienced Reference Group



### Session Objectives and Context:

The impact of institutionalisation on the mental health and well being of children and those who leave care was highlighted as a major issue during the 4th BICON in 2021. This session built upon the advocacy of the previous BICON by sharing perspectives and exploring how to support children and young people in care and build resilience.

### Overview of presentations

**Mr. Sombat Tapanya** discussed the importance of responsive care in child development, emphasizing the significance of warm and nurturing care for healthy growth. Responsive care leads to secure attachment, emotional regulation, and self-regulation, forming the foundation for healthy relationships in adulthood. Achieving this involves consistent attachment figures and a healthy parenting experience, characterized by emotional support, clear boundaries, and positive reinforcement rather than punishment. Mr Tapanya highlighted the importance of trauma-informed care for children in alternative care, focusing on safety (both physical and emotional), consistent routines, empowerment through involvement in decision-making, and understanding the impact of trauma. A consistent attachment figure and a healthy parenting experience, informed by trauma awareness, are fundamental in providing effective care. Mr Tapanya introduced a project called “Parenting for Lifelong Health,” aimed at training parents with low incomes in positive parenting techniques, reflecting the organization’s commitment to enhancing the caregiving environment for vulnerable children.

**Ms. Junu Lama** discussed the impact of voluntourism in orphanages on the mental health of care-experienced children. Sharing from personal experience she described the detrimental effects of short-term voluntourism visits on children in care. While she acknowledged having positive memories with voluntourists, she also expressed the difficulties in trusting others due to these encounters. Voluntourism, particularly in orphanages, has become prevalent in South Asia due to the saviour complex and increased internet accessibility. This trend encourages the institutionalization of children, turning their care into a profitable business. Vulnerable children and parents are exploited by those in power, leading to financial gains at the expense of the children’s well-being. She described her own interactions with volunteers,

who would form temporary bonds but then leave, causing emotional distress. These volunteers often took photos and shared them online without the children's consent, leading to bullying and exploitation. These experiences cause psychological distress, including attachment disorders, emotional instability, feelings of abandonment, separation anxiety, and trust issues.

“ How do you expect a child to understand that no one is permanent in your life?”



**Mr. Manoj Udayan** emphasized the profound impact growing up in care can have on mental health and well-being. Drawing from personal experiences and conversations with other care-experienced young people, he highlighted the serious mental health challenges faced by these individuals, including depression, social isolation, persistent nightmares, difficulties in forming relationships, and a pervasive sense of hopelessness. Leaving care is the most emotionally challenging time, yet it is the time when there is a total lack of support. The specific challenges faced by care leavers include separation from families, frequent placements, loss of friends and caregivers, and financial stress, which has been aggravated by the COVID-19 pandemic. This is exacerbated by the inadequate access to specialist mental health support, caused by barriers like lack of knowledge about whom to contact, feelings of hopelessness, the high cost of services, and societal stigma.

To address these challenges, Mr. Udayan outlined several critical needs for care-experienced individuals:

- **Family Network:** Care leavers require a trustworthy support network, ensuring permanency in relationships and a non-judgmental environment. Connections with friends and family are more important than formal counselling.
- **Dedicated Services:** Accessible and high-quality services tailored to the unique needs of care leavers are essential. This includes helpline numbers specifically for care leavers, specialized counselling centres, and a shift from independence to interdependence, allowing shared responsibility. Additionally, maintaining connections with caregivers is crucial.
- **Peer Support:** Peer support is a vital resource for care leavers, offering understanding and shared experiences.

“ It is not the bruises on the body that hurt!  
It is the wounds of the heart and the scars on the mind”



### Calls to Action

- Volunteering should not be part of vacations. Every foreigner travelling for vacation must know that their positive intentions can negatively affect a child's mindset.
- Discourage hosting birthday or anniversaries of high level people, celebrities, in institutions, to avoid unnecessary voluntourism. This is a waste of funds that could be going towards families.
- Government should strictly implement protocols and strong gatekeeping mechanisms such as background checks.
- Government should adopt a more practical approach towards international and national voluntourism.
- Provide options to volunteer in youth and community empowerment organisations rather than orphanages and child care homes.
- Comprehensive, quality and affordable services for care experienced young people when preparing to exit alternative care and aftercare, including access to special counselling centres, helplines and peer support.

To listen to the full presentations from session 11, click [here](#).

## SESSION 12. POWER OF DATA AND EVIDENCE

**Session Moderator:** Rajeev Kumar, Director of Programme, SOS Children's Villages International, Asia Office



### Speakers:

- **Professor Marian Bakermans-Kranenburg**, University Institute of Psychological, Social and Life Sciences, Portugal
- **Honorable Surendra Acharya**, Minister of Women, Children and Senior Citizens, Nepal
- **Kanthamane Ladaphongphattana**, Ph.D., Thailand
- **Dr. Gurneet Kaur Kalra**, Ph.D., Udayan Care, India



### Session Objectives and Context:

Knowledge is power but there are still significant gaps in data related to children and young people in alternative care settings. This session highlighted examples of data and evidence generation in this field and also highlighted the important role that practitioner data can provide. It also looked at how countries need to address the gaps in data that exist. Marian Bakermans-Kranenburg spoke about the work of the Lancet Commission in this area with a focus on Asian countries. Gurneet Kaur spoke about the journal - Institutionalised Children Explorations and Beyond and released its recent issue. Lastly, Kanthamane Ladaphongphattana spoke from a practitioner perspective on data collection and outcomes.

## Overview of presentations

**Prof. Marian Bakermans-Kranenburg** shared highlights from the Lancet meta-analysis. The study comprised an analysis of over 300 studies on child institutionalisation conducted over a 65-year period involving over 100,000 children across 60 countries. The study documented the range of development harms associated with institutionalisation and concluded that institutions are a form of structural neglect and are settings that fall outside of the environment of evolutionary adaptiveness. The study furthermore concluded that care provided in smaller residential care facilities (small group homes) is still inadequate and developmental and mental health outcomes remain worse for children who grow up in small group homes when compared to families. The risk of abuse in small group homes was also highlighted as a significant theme. The analysis found that children can make rapid progress after deinstitutionalization with significant recovery noted in growth, head circumference and cognition. In terms of costs, institutions were found to be on average 3 times more expensive than foster care. Prof. Bakermans-Kranenburg highlighted the importance of reliable data on children in alternative care and clear and unambiguous definitions of care arrangements, with small group homes included in the definition of residential care.

**Surendra Acharya**, Minister for Women, Children and Senior Citizens, Nepal described Nepal's journey to care reform with its 2018 recognition of the inherent harms of institutional care and the right of every child to grow up in a safe and loving family. This recognition was incorporated into the children's regulation 2022 and for the first time, deinstitutionalisation and alternative care have been included in the 16th periodic plan of Nepal. Surendra affirmed the Government of Nepal's commitment to leading care reform as a duty and responsibility to children working to ensure that all children can live in safe and loving families. However, Surendra acknowledged that much remains to be done to implement this across seven provinces and 753 local governments of Nepal. Surendra welcomed the opportunity for the Ministry, the National Child Rights Council to learn from other countries participating in BICON particularly from experiences of scaling up kinship care foster care for children unable to live with their biological families.

**Kanthamane Ladaphongphattana, Ph.D.**, described how data and evidence have been systematically collected and used to progress care reforms in Thailand since 2014. Prior to 2014 the number of residential care institutions operating across the country was unknown. Voluntourism was a significant driver, yet there was a lack of data on the scale of voluntourism. Without concrete data, alternative care advocacy was dismissed, and progress was thwarted. By 2015, efforts to establish baseline data on residential care commenced. At least 219 unlawfully operating privately run institutions were identified, 64% of which were affiliated with Christian organizations, despite only 1% of the Thai population identifying as Christian. 95% of children in residential care were living with their parents or relatives prior to admission and 90% had at least one living parent. This data was used to advocate for the government to take steps to bring the alternative care system into alignment with international guidelines. Additional data on kinship care was gathered and used to strengthen the case for reforms. 24% of children in Thailand live in unsupported kinship care. The average cost of residential care is USD \$133 per child per month, which well exceeds the average monthly household income and is much higher than the cost of family-based care.

Next, a mapping of residential care institutions was conducted, and a database was developed. Institutions were concentrated in areas with high numbers of Christians and tourists. In 2021 the first Alternative Care National Action Plan was developed to guide the deinstitutionalization process and promote family strengthening.

**Gurneet Kaur Kalra, Ph.D.**, discussed the significant impact of the Academic Journal [Institutionalised Children Explorations and Beyond](#), a publication that has played a pivotal role in bridging research gaps in family strengthening and alternative care across South Asia. Supported by SOS Children's Villages, ICB aims to create a regional platform for sharing discourse and uniting stakeholders to address issues

related to laws, practices, and evidence-based research in the field of alternative care. This year, in September 2023, ICB celebrated the release of its 20th issue, which covered the evolution of alternative care in Asia in the decade since the first issue, which was launched alongside the first BICON in 2014. ICB's influence is not limited to academia; it has actively contributed to policy and practice changes. For instance, the [Beyond 18 Study](#) in 2018 made recommendations to strengthen the voices of care leavers and increase investment in aftercare. These recommendations led to tangible outcomes, including India's Mission Vatsalya plan in 2022, introducing individual aftercare plans and increased financial support for care leavers. Additionally, care leaver networks have been established in multiple cities, culminating in the formation of a National Care Leavers Network.



### Calls to Action

- Increase efforts to gather relevant data and evidence across the region. Data is required to understand the scope of issues and is essential to effective advocacy.
- Promote open-sharing agreements to encourage collaboration in research and improve data accessibility.
- Invest in comparative research to support the identification of innovative practices across the region.
- Emphasize the need to conduct longitudinal studies to track the trajectories of care-experienced persons and understand long-term trends and outcomes.
- Collaborate to identify and address gaps in data across the region and ensure policies and practices are evidence-based.

*To listen to the full presentations from session 12, click [here](#).*

## SESSION 13 & 14. BICON CONCLUDING REMARKS AND RECOMMENDATIONS

**Session Moderator:** Lopa Bhattacharjee, Director, Family for Every Child, India



### Speakers:

- **Prof. Ann Skelton**, Chair of the UN Committee on the Rights of the Child
- **Ms. Karishma Singh**, Founding Member of CLAN, representing the BICON Care Experienced Reference Group
- **Dr. Kiran Modi**, Founder and Managing Trustee, Udayan Care
- **Ms. Tessa Boudrie**, Asia Regional Director, Hope and Homes for Children
- **Ms. Anju Pun**, Country Director, Forget Me Not Nepal
- **Ms. Dikshya Thapa**, Co-Founder and Chair, Shine Together Network, representing the BICON Care Experienced Reference Group



## Session Objectives and Context:

The final session was an opportunity to share reflections on the significance of BICON 2023 and present a summary of emerging themes and recommendations.

## Overview of presentations

**Prof. Ann Skelton**, chair of the UN Committee on the Rights of the Child, welcomed the innovative approaches outlined over the past two days, and most importantly, the voices of care experienced young people as the representation of the inclusive spirit that was sought by the 2021 UN Day of General Discussion. Prof. Skelton highlighted the three key themes that emerged from BICON 2023; inclusion and wellbeing, valuing and nurturing innovation and power holders and champions. She drew attention to a key point of consensus amongst champions; that institutionalisation is harmful and an abuse of human rights, and affirmed the plan to support champions, governments, and civil society to accelerate deinstitutionalization and prioritize care reform efforts across the continent. Prof. Skelton concluded by congratulating the work done at BICON 2023 and wished all stakeholders well as they return to their countries to continue with the hard work of putting reform strategies into practice.

**Ms. Karishma Singh**, representing the BICON Care Experienced Reference Group and the BICON Organising Committee, presented the Declaration from the Heart of BICON which comprised a summary of recommendations from BICON 2023, on the topics of Inclusion and Well-being, Valuing and Nurturing Innovation, and Our Messages to Power Holders. The full declaration text can be found at the beginning of the report.

**Dr. Kiran Modi** provided a closing speech and remarked on the hugely enriching experience of BICON, which has emerged as a critical platform for care reform in Asia. She drew attention to the diversity of speakers at BICON 2023 which brought together experts from across government, civil society, and experts with lived experience. She reflected on the depth of discussions that had taken place, the appetite to engage with the complexity of issues facing children in the region, and the need to strengthen both collaboration and accountability moving forward. She declared that the time is now. There is enough clarity for the policy and advocacy agenda as made clear by the pragmatic experience of practitioners, policymakers and young people to take this moment of epiphany to its logical end. Let's together chart out the course and direction for the 6th BICON.

**Ms. Anju Pun** stated that BICON is alive, and very much safe in the leadership of our young people. Noting the recommendations contained in the Statement from the Heart of BICON, Ms. Pun implored participants to come together, one force, one voice, to implement the call for action and recommendations that we have.

**Ms. Dikshya Thapa** closed BICON 2023 with an important reminder: Children are not a distraction from more important work, they are the most important work. BICON reflects how far we have come together, hand in hand, for all the care experience children and young people, for the change in care reform:

“ This conference has highlighted major challenges we face as care-experienced young people. Ruma shared the importance of culture and identity. Sushil shook us all when he talked about erasure of our identity. Barma strongly highlighted issues of disabilities in institutional care. Children with disabilities are at high risk of physical, mental and emotional neglect. Rakesh was right when he reminded us that family is the first source of learning, and Manoj was right when he reminded us that who to trust is the biggest constant for care leavers. Karishma highlighted the importance of reflecting on the progress from the BICON 2021 recommendations and being proud

of it. Pabitra strongly reflected on the overview of the recommendations generated from the 2021 UN Day of General Discussion 2021 and we reflected together on the challenges we have faced in the context of the Asian region. Surja's documentary reminded me of my transition, I was moved out of one institution to another when I was 9. 9 or 18, It's not the age that matters, but the pain you feel over again for years.

If we leave these concerns unaddressed and return home, tomorrow another child will be experiencing this situation. This is why recommendations must be a call to action, which Kalpana addressed very strongly. We must ensure that these challenges must stop and never happen again. Let's make sure that child safety and protection systems are properly resourced and that vulnerable children and those with lived experience of care do not continue to pay the price with their wellbeing.

On behalf of all care experienced young people in Asia, I would like to thank all of you. Thank you to the Government of Nepal for improved decisions and policies to protect children.

As Albert Justin from Miracle Foundation stated "We know we cannot change any care leaver's past, but we can change their and our future."

*To listen to the full presentations from session 13 & 14, click [here](#).*

# ANNEX

## BICON SESSION RAPORTEURS, ASSISTANT MODERATORS AND FACILITATORS

We wish to acknowledge the important contribution made by rapporteurs to the documentation of the BICON 2023 conference and express our thanks to each rapporteur.

Rapporteurs assigned to each session fulfilled the critical role of capturing an overview of each session, the key points, challenges, solutions and calls to action made, and examples of promising practice highlighted by speakers. Session overviews featured in this report heavily relied on the reports produced by rapporteurs. Special thanks goes to Samuel O'Hara from Hope and Homes for Children for collating and streamlining all of the session reports in preparation for the writing of this report and Rebecca Nhep of Better Care Network for the drafting of this report.

Session 2:	Nolan Quigley, Hope and Homes for Children
Session 3:	Gurneet Kaur Kalra, Udayan Care
Session 4:	Lopa Bhattacharjee, Family for Every Child
Session 4.1:	Jeremy Southon, Hope and Homes for Children
Session 4.2:	Aisling Ledwith, Lumos
Session 4.3:	Arush Kalra, Udayan Care
Session 5:	Samuel O'Hara, Hope and Homes for Children
Session 6:	Samuel O'Hara, Hope and Homes for Children
Session 7:	Samuel O'Hara, Hope and Homes for Children
Session 9:	Jeremy Southon, Hope and Homes for Children
Session 10:	Nolan Quigley, Hope and Homes for Children
Session 11:	Aisling Ledwith, Lumos
Session 12:	Aisling Ledwith, Lumos
Session 13:	Samuel O'Hara, Hope and Homes for Children

In addition, we also wish to acknowledge and thank the assistant moderators and facilitators for each session, for their vital support, including:

- *Tessa Boudrie, Hope and Homes for Children*
- *Leena Prasad, Udayan Care*
- *Vuthaya Charoenpol, SOS Children's Villages International - Region Asia*
- *Anju Pun, Forget Me Not Nepal*
- *Nolan Quigley, Hope and Homes for Children*
- *Lopa Bhattacharjee, Family for Every Child*
- *William Gali, Family for Every Child*
- *Rajeev Kumar, SOS Children's Villages International - Asia Office*