

# GENERAL PRINCIPLES OF REINTEGRATION

## General Principles of Reintegration

There are several principles for re-integrating children and these can be applied to children with disabilities.

### 1. **Child-centered and Family focused**

All decisions, interventions, and plans should be made on an individualized basis, keeping the child's best interest and safety paramount. Adequate time should be spent getting to know and understand the child to ensure sufficient understanding of their unique needs and use this understanding to guide interventions and planning.

### 2. **Take a rights-based approach**

All efforts to promote safe and effective reintegration must be based on a consideration of the full range of rights included in the UNCRC, and relevant national laws. All children, regardless of age, gender, ability or any other status, have a right to the preservation of family unity. They have a right to participate in all decisions that affect them, and decisions regarding their reintegration should be made with their best interests as a primary consideration

### 3. **Do no harm**

All reintegration processes should aim to benefit and not harm children. This includes consideration of issues such as preventing abuse by staff or other stakeholders, stigma, informed consent, and confidentiality. All agencies should carry out a risk assessment to identify and mitigate the risks associated with each reintegration program, and particular efforts will need to be made in programs involving public advocacy or awareness raising. As the benefits of reintegration usually far outweigh the harm, the existence of some risks should not be used as an excuse not to reintegrate children.

### 4. **Child participation and family self-determination**

There is an obligation to listen to children's views and to facilitate their participation throughout the process of reintegration. Children should be given relevant information in a manner appropriate for their age/development and encouraged/supported to participate in all matters concerning them with opportunities to express their views, hopes, fears, and wishes

### 5. **Worth, dignity, and strength of child/family**

Case management is based upon respect for the inherent worth and dignity of all people. Caseworkers should uphold and defend the physical, developmental, psychological, emotional, and spiritual integrity and wellbeing of every child and his/her family member. This should be reflected in all of the interactions with and decisions about each child and family member.<sup>61</sup> Caseworkers recognize that every

person (child or adult) has peculiar strengths and works to identify and build upon them to promote empowerment and resiliency.

#### **6. The principle of non-refoulement**

The principle of non-refoulement protects migrant children from returning to countries where there are substantial grounds for believing they will be at real risk of irreparable harm. Considerations include a substantial risk to the child's life, survival and development as well as deprivation of liberty, and requires careful consideration of child-specific human rights violations and child-specific drivers of migration, such as threats of child marriage and other forms of gender-based violence, forcible recruitment into state and non-state armed groups, trafficking and other forms of exploitation and abuse, including the worst forms of child labour.

#### **7. Principle of Deinstitutionalization for Persons with Disabilities**

According to the UNCRPD Guidelines on Deinstitutionalization, including in Emergencies, Deinstitutionalization promotes the dignity, autonomy, and inclusion of persons with disabilities by enabling them to live independently within their communities. Every person with a disability has the right to community living, and it is discriminatory to confine individuals in institutions based on judgements about their ability to live independently. Transitioning individuals from institutionalized settings to community-based living environments should prioritize restoring their dignity and respecting their diversity. This process should not assess capabilities solely based on disability but should focus on identifying and addressing the individualized supports and barriers that affect community living.

Family involvement in deinstitutionalization is permissible only with the full consent of the individual, maintaining respect for the person's choices. While family support may be preferred by some, it should not lead to institutionalization and should reinforce the person's right to independent living. This support, however, must be flexible, enabling individuals to retain control over how they receive help.