



Using a systems perspective to examine child protection systems and practice: A scoping review on child abandonment and institutionalisation in the Maghreb

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ARTICLE INFO

Keywords:

Child protection system
Maghreb
Child institutionalisation
Scoping review
Child abandonment

ABSTRACT

The Maghreb (Algeria, Libya, Mauritania, Morocco (including Western Sahara), Tunisia) has high rates of child maltreatment and child abandonment, leading to high rates of child institutionalisation. This review aims to provide an estimate of the prevalence of children in institutions in the countries of the Maghreb and to compare and contrast the child protection systems in the region. Using a scoping review approach, we identified 44 relevant studies from databases including Academic Search Premiere, Africa-Wide Information, Policy file Index, Google, and Google Scholar. Estimated children in institutions were as follows: Algeria 550,000, Libya 80–145,000, Mauritania 45,850, Morocco 471,006, and Tunisia 140,000. Common elements included limited child protection resources, lack of transparent databases, limited separation between religion and state, *Shariah's* influence on social and cultural norms, and a *kafala* system, an Islamically prescribed form of permanent guardianship for abandoned children. Mauritania and Tunisia had dedicated child protection codes, and all countries except Libya reported to the CRC. The literature indicates that components of the child protection systems in the countries of the Maghreb are fragmented with competing purposes, prioritising existing communitarian cultural mores over child protection. High rates of child abandonment and institutionalisation in the region result from inadequate child safeguarding structures and the stigmatisation of unmarried mothers and their children. *Kafala*, is a common element of Maghrebian child protection systems, with little alternative care provision, such as foster care. The scoping review highlights the opportunity to develop and adapt existing child safeguarding and alternative care structures and practice between countries of the Maghreb. Intra-regional research is urgently needed to facilitate changes and reduce rates of child abandonment and institutionalisation.

1. Introduction

The Maghreb is a culturally distinct geographical sub-region in North Africa of five countries – Algeria; Libya; Mauritania; Morocco (including Western Sahara); and Tunisia. Countries in the region share Amazigh and Arab genealogies, and a more recent colonial history, as well as a Sunni Maliki Islamic background (Planet Contreras, 2007). In recent years, high rates of child maltreatment and abandonment which lead to institutionalisation have been described in the countries of the Maghreb (Elghossain et al., 2019; UNICEF, 2019a, 2019b). The

institutionalisation of children can be characterised as an Adverse Childhood Experience (ACE) and may compromise brain development (Bick & Nelson, 2016), as well as social and emotional wellbeing (Van Ijzendoorn et al., 2020).

1.1. Child abuse and institutionalisation in the Maghreb

UNICEF (2019a, 2019b) reports high rates of child abuse in the countries of the Maghreb. A systematic review of the prevalence of violence experienced by young people in the region found that the rate

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of violence exceeds other regional or global estimates (Elghossain et al., 2019). Traditional family and community structures in the Maghreb began to fragment in the twentieth century and have not been replaced by any effective frameworks for the support of vulnerable families (Bilo & Machado, 2018; Yassin et al., 2016). An increase in rural to urban migration due to climate change, high unemployment, poverty, and the stigmatisation of people living outside traditional family structures are significant factors which cause and perpetuate high vulnerability of children (Bouojoyour et al., 2017; Machado et al., 2018; Waha et al., 2017). Vulnerability, marginalisation and abuse lead to a higher risk of abandonment and institutionalisation of children, particularly where the existence of the child is the cause of stigma.

It is estimated that between 3.18 and 9.42 million children aged 0–17 years are living in institutions worldwide (Desmond et al., 2020). It is also estimated 50–90% of these children have living parents known to them, and their placement is often due to poverty, parental inability to provide care, and the perception of improved care and education in institutions (Bunkers et al., 2014). An institution is a place where children are separated from their parents, housed together away from the general population, and receive impersonal supervision rather than intimate care from primary caregivers (Ezell et al., 2011; Rauktis et al., 2009). While high rates of child abuse and abandonment have been recorded for the Maghreb region, there is little research documenting the number of children in institutions in the region.

All countries in the Maghreb operate a version of a *kafala* system: an Islamically sanctioned form of permanent adoption for children who do not have legal guardians – i.e. their parents have relinquished parental rights (Yassari, 2015). However, as reported elsewhere (Bunkers et al., 2014), the majority of children in institutions in the Maghreb have parents who have retained their parental rights, but they were placed in institutions when their parents were unable to provide care (Maestral International, 2019). Such children are ineligible for *kafala* and with high rates of poverty, limited social services and no viable alternative care options, such as foster care, institutionalisation remains an important intervention in child protection processes in the Maghreb, and often the only intervention. The aim of this scoping review is to provide an estimate of the prevalence of child institutionalisation in the countries of the Maghreb and to compare and contrast the components of the child protection systems in the region.

1.2. Systems approach to child protection

We conducted a scoping review to identify the components of the child protection systems in the countries of the Maghreb (Munn et al., 2018). We adopted a systems approach for review and analysis (Wulczyn et al., 2010). We used the systems approach to identify the multi-sectoral actions and interventions required to strengthen child protection and health systems in Low- and Middle-Income Countries (LMICs) (Kruk et al., 2022). System wide interventions encompass a range of strategies to reduce institutionalisation, such as: parenting interventions that have been proven to decrease the number of children requiring child protection services (Backhaus et al., 2023); strengthening and improving access to social services through training for professionals and advocacy in communities (Goldman et al., 2020); establishing alternative care options, such as foster care (Davidson et al., 2017) and ensuring data on child protection cases are routinely collected, analysed and reported (Eurochild & UNICEF, 2021; Thoburn, 2007). A systems approach acknowledges this interrelation of actors and the ways they operate within a system, with a collection of strategies

organised around a common purpose and function (Wulczyn et al., 2010).

The Arab Spring protests illustrated how governments in the Maghreb face the challenge of governing an increasingly globalised population. Cultural mores, postcolonial histories, political factions, and geopolitical priorities compete and overlap within the different government institutions, causing the systems they govern to fracture, including child protection systems (Barraud, 2010; Hinnebusch, 2015; Naguib, 2021). While there are various typologies of child protection systems, when a system is fractured, incomplete, or lacking a cohesive legislative framework, the objectives may be unclear, and priorities of stakeholders may conflict and compete with one another (Connolly & Katz, 2019). For example, one stakeholder may have a purpose to “save children” while another to “keep families intact” and yet another to “keep communities safe” (Wulczyn et al., 2010). The purpose is critical to any child protection system and shapes its components, system structures, how they function, roles they undertake, and their capacities. Fig. 1 illustrates how the components of a child protection system may be structured relative to different actors and contexts and how they are understood and shaped by their own normative framework and purpose (Wulczyn et al., 2010). The aim of this scoping review is to provide an estimate of the prevalence of children in institutions in the countries of the Maghreb and to compare and contrast the components of the child protection systems in the region.

2. Methods

We conducted a scoping review to identify the components of the child protection systems in the countries of the Maghreb (Munn et al., 2018). We followed the methodological stages outlined by Arksey and O'Malley (2005) to conduct the review: identifying the research question; identifying relevant documents; selecting documents; charting the information; and summarising and reporting the results.

2.1. Search strategy

We focused on the Maghreb with the aim of avoiding the ways in which countries in the wider Arabic-speaking and Islamic worlds are commonly essentialised regardless of their cultural, social, and historical differences under the banners of Arab, Middle-Eastern and North African (MENA), Muslim, or North African (Perrin, 2014). The search process was conducted by an academic librarian and a researcher experienced in the global research on deinstitutionalisation (MER). Boolean search strings were finalised as: (1) ‘Child Protection’ AND ‘Algeria’ OR ‘Libya’ OR ‘Maghreb’ OR ‘Mauritania’ OR ‘Mena’ OR ‘Morocco’ OR ‘Tunisia’ (2) ‘Foster Care’ AND ‘Algeria’ OR ‘Libya’ OR ‘Maghreb’ OR ‘Mauritania’ OR ‘Mena’ OR ‘Morocco’ OR ‘Tunisia’. We searched the following databases: Academic Search Premiere; Africa Wide Information; Policy file Index; Google; and Google Scholar. Because laws, policies and reports from government and non-governmental agencies may not be indexed, “hand searching” of websites from International Non-Governmental Organisations (INGOs) was undertaken.

2.2. Document selection

We identified 954 documents, 113 were excluded due to being duplicates or irrelevant. MER downloaded and screened 841 titles, excluding 607 documents for not focusing on child welfare or not being full text. CH, FB and MER independently read the remaining 234

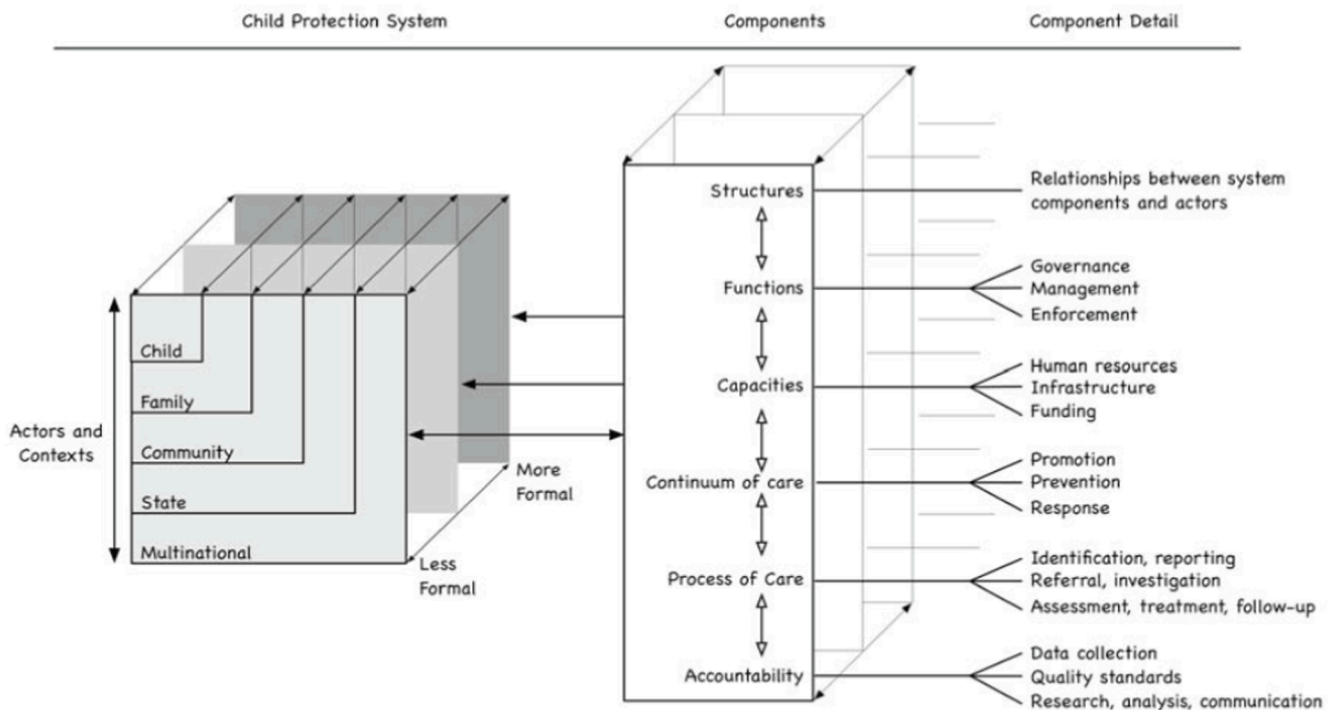


Fig. 1. Child protection system components.

documents in full and 209 were excluded for not being in the Maghreb or tangential to the issue. We identified an additional 19 documents through the hand searching strategy described above. CH, FB and MER then reviewed and agreed to the 44 documents to include in the final list of papers for data extraction. Fig. 2 illustrates the process of inclusion and exclusion of citations adopted at each stage of the screening process through a PRISMA flow diagram (Moher et al., 2009).

Our inclusion and exclusion criteria are based on the Participants, Concept, Context (PCC) framework (Table 1) (Peters et al., 2015). The inclusion criteria included French and English documents of any kind written on child protection, children out of home, children being cared for, or child institutionalisation in the countries of the Maghreb. Documents included book chapters, dissertations, peer review articles, and policy papers. We searched for articles in 2021, published from between the years 2010 to 2020. French documents were screened and read by AS and CH and translated into American English using Deep L and back checked by MER (Macketanz et al., 2021).

2.3. Documents included

We included a total of 44 documents in the review. We used the systems framework, consisting of the seven components of child protection systems, to extract and chart information (Wulczyn et al., 2010). We also sought to estimate the number and prevalence of children in institutions in each country. The seven components we used for charting were:

- (1) Purpose or normative framework: who the system aims to protect – children, family, community, the state.
- (2) Structures: what shapes the (in)formal relationships and boundaries between and within actors of different sectors.
- (3) Functions: how the child protection system enacts its objectives.
- (4) Capacities: abilities of child protection actors and systems to fulfil their objectives.
- (5) Continuum of care: systems and processes in place to support families and prevent abandonment and institutionalisation.

- (6) Process of care: identification, reporting and referral, investigation, assessment, intervention, and follow-up of child maltreatment.
- (7) Accountability: how and to whom the child protection measures are monitored and reported.

We used two tables to chart documents in relation to system components. The first was used for government documents and any non-research article and the second was used for research articles [Supplementary File 1]. CH, FB and MER re-read documents to cross-check abstracting. FB and MER organised information into a single table which was reviewed by HS. This process of synthesising quantitative and qualitative research, along with policy, planning, and reports, helps inform and understand a comparative analysis of complex interventions and systems (Noyes et al., 2019).

3. Findings

3.1. Summary of studies included

A total of 44 documents were included in the review (Supplementary File 3). The largest number of documents were INGO reports (n = 23), followed by journal articles (n = 15), book chapters (n = 3), theses (n = 2), and official records (n = 1). Many of the included documents were across multiple countries and used multiple methods. The largest number of documents were related to Morocco (n = 16), followed by Tunisia (n = 14), Algeria (n = 10) and Mauritania (n = 10), and Libya (n = 9). The largest number of documents employed desk or literature reviews (n = 20). There were also documents which were a theoretical or conceptual analysis that did not employ empirical research methods (n = 14), employed qualitative methods (n = 12), were a retrospective data analysis (n = 4), employed surveys (n = 4), or were a published government strategy that did not employ empirical methods (n = 1).

3.2. Prevalence of children living in institutions in the Maghreb

Due to inadequate or non-existent information systems and a mix of

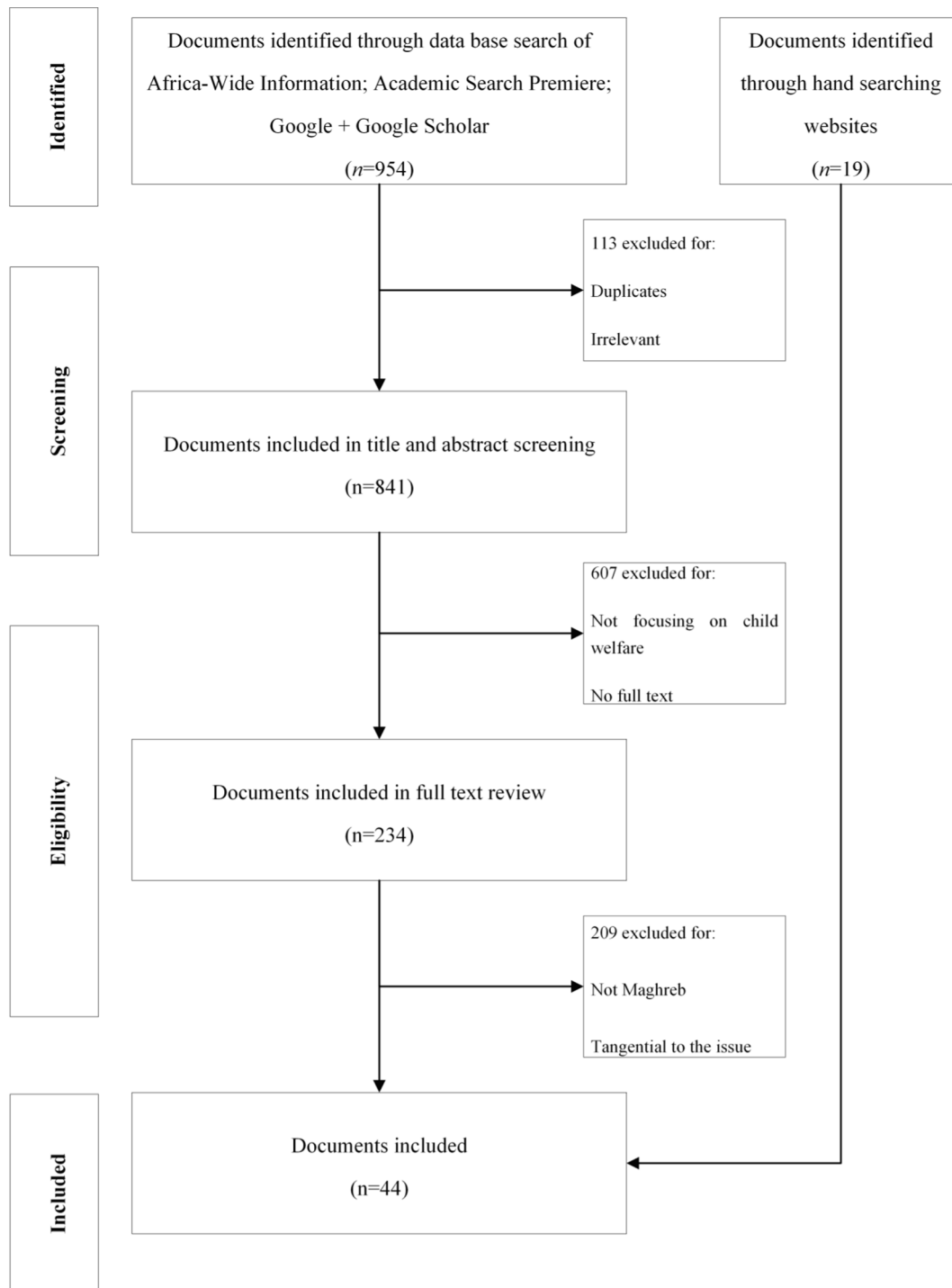


Fig. 2. Scoping review selection process.

Table 1
Inclusion and exclusion criteria.

	Inclusion criteria	Exclusion criteria
Participants	Not applicable	Not applicable
Concept	Documents reporting on child protection, children out of home, children being cared for, or child institutionalisation	Documents with no mention of child protection, children out of home, children being cared for, or child institutionalisation
Context	Countries in the Maghreb; Algeria, Libya, Mauritania, Morocco, Tunisia Documents written in English or French Dates: January 2010 – December 2020	Not on countries in the Maghreb Documents not written in English or French

Table 2
Estimated number of children in institutions in the Maghreb in 2021.

Country	Total Population ⁱ	Total Population < 18	Current Number in Institutions	% of pop < 18 in Institutions
Algeria	43,100,000	14,972,940	550,000	3.67%
Libya	6,800,000	2,241,280	80–145,000 ^{iv}	<0.01–6.47%
Mauritania	4,500,000/1,372,000 ⁱⁱ	2,053,350/632,217/333,865 ⁱⁱⁱ	45,850	13.73% ^v
Morocco	36,500,000	11,617,950	471,006	4.05%
Tunisia	11,700,000	3,319,290	140,000	4.22%

ⁱ All population figures retrieved from [United Nations \(2021\)](#), excluding Nouakchott (Mauritania) which were retrieved from [Cityfacts \(2023\)](#).

ⁱⁱ Total in Mauritania/Total in Nouakchott.

ⁱⁱⁱ Total Children in Mauritania/Total Children in Nouakchott/Total Male Children in Nouakchott.

^{iv} Numbers only available for children being held in detention as unaccompanied minors.

^v Percentage of male children in Nouakchott.

state-run and non-state-run institutions, it is difficult to estimate the number of children currently in institutions in the Maghreb, as it is in many LMICs ([Petrowski et al., 2017](#)). [Table 2](#) provides our estimates for the prevalence of children in institutions in the countries of the Maghreb, based on data reported in the documents included in the review.

3.2.1. Algeria

In Algeria, children are placed in non-state run institutions which do not publish reliable records and in the 35 state-run children's homes, 22 of which only receive children aged 0–6 years-old ([Save the Children Sweden, 2011a](#)). In 2015, reports estimated 5000 children were abandoned at birth each year in Algeria ([Boussenna & Tiliouine, 2015](#)). [SOS Children's Villages \(2021a\)](#) manages seven child institutions in Algeria and estimates that there are currently 550,000 children in Algeria who have lost one or both of their parents, and the majority of which enter the many state and non-state institutions.

3.2.2. Libya

In Libya, UNICEF along with local Civil Society Organisations (CSOs) operate community centres for vulnerable and displaced children, providing them with protection and non-formal education ([UNICEF, 2020b](#)). Libya was estimated to have fewer than 80 children in institutions in 2020 ([Desmond et al., 2020](#)). By contrast, [UNICEF \(2020a\)](#) reported that at least 15,000 children were being held in detention centres for their protection due to being declared unaccompanied minors during the civil war, while other estimates report 2,000 to 145,000 unaccompanied minors are kept in 23 detention centres across the country, often against their will and without any security guarantees ([El Ghamari & Gabriela Bartoszewicz, 2020](#)).

3.2.3. Mauritania

In Mauritania, due to the lack of resources and challenges faced by children to access schools in rural areas, many male children are sent to Islamic boarding schools, *talibs*, in larger cities for the duration of their childhood ([Ballet et al., 2012](#)). *Talibs* align with the definition of an institution highlighted above; children are housed together without adequate supervision from a primary caregiver away from the general population and their families ([Ezell et al., 2011](#)). Additionally, children in *talibs* are required to beg to obtain the money that is used to pay for their lodgings and food, and corporal punishment is the norm ([Ballet et al., 2012](#)). In the capital, Nouakchott, there are 917 *talibs*, each with up to 50 male children, leading to an estimated 45,850 children in total – 13.73% of male children living in Nouakchott ([Ballet et al., 2012](#); [Cityfacts, 2023](#)).

3.2.4. Morocco

In the 12 years between 1999 and 2010, [UNICEF \(2014\)](#) reported that the numbers of children in institutional settings in Morocco increased by 175%. By 2017, [UNICEF \(2019c\)](#) reported that there were 117,646 children in the state-run institutions, Établissement de Protection Sociale (EPS). However, this figure did not include the children in

the estimated same number of institutions managed by the Ministry of Youth and Sport as Child Protection Centres (CPCs) and by Civil Society Organisations (CSOs), which would bring the total figure to an estimated 235,292 children in institutional settings in 2017. In this time there have been no significant changes to the child protection system in Morocco which would influence the rates of child institutionalisation. Therefore, we predict that the rate has remained constant and applying the same 15% rate per year estimated by UNICEF results in an estimated 471,006 children living in institutions by 2021 – 4.05% of the total population of children under the age of 18.

3.2.5. Tunisia

SOS Villages reported in 2019 that there were 130,000 children currently growing up without their parents in Tunisia ([SOS Children's Villages, 2021b](#)). Earliest reports document 2500 new placements in 2011 and this figure increasing to 3319 new placements in 2019 ([ISS, 2019](#)). In this time there have been no significant changes to the child protection system in Tunisia which would influence the rates of child institutionalisation. Therefore, using the figures from SOS Children's Villages to calculate the constant rate of new placements – 1.76% per year – we estimate that in 2021 there were 3437 new placements in the state-run children's homes and a minimum of 140,000 children in institutional settings in Tunisia – 4.22% of the total population of children under the age of 18.

3.3. Components of the child protection systems in the Maghreb

[Table 3](#) provides a summary of the components of the child protection systems in each country of the Maghreb. We follow the table with a narrative description of each component in each country, describing the similarities and difference across countries in the Maghreb.

3.3.1. Purpose and normative framework

[Republic of Tunisia \(1995\)](#) and [Republique Islamique de Mauritanie \(2005\)](#) have child protection codes which explicitly prioritise the best interests of the child ([United Nations, 2010, 2018](#)). Mauritania's Child Protection Code, however, situates children's rights in the context of their responsibilities to the family and society as informed by *Sharia* which prioritises patrilineal guardianship; this is where the custody and care of children are assigned to the paternal side of the family ([Bargach, 2002](#)). The Algerian Family Code (1984 [2005]) references children's rights, but also the 'sanctity of the family' and the duty of the child to the family ([Save the Children Sweden, 2011a](#); [United Nations, 2012](#)). Morocco has a national child protection strategy ([Royaume du Maroc, 2014](#)). However, the laws related to child protection are found in the penal code and the family code, where they connect children's rights directly to the authority of their parents and maintaining traditional family structures ([Royaume Du Maroc, 1962 \[2011\]](#); [Royaume du Maroc, 2004](#)). Libya's draft constitution declares that the state will adopt all measures that protect children from harm ([Al-Ali, 2020](#)). In the context of civil conflict however, child protection in Libya has adapted

Table 3
Components of child protection systems in the Maghreb.

Component	Algeria	Libya	Mauritania	Morocco	Tunisia
Purpose/ Normative Framework Structures	Family Separation officially between religion and the state, though social and cultural norms shaped by <i>Sharia</i> influence all facets of legislation	Emergency Protection Separation officially between religion and the state, though social and cultural norms shaped by <i>Sharia</i> influence all facets of legislation	Child No separation between religion and state, all legislation firmly embedded in and influenced through <i>Sharia</i>	Family Separation officially between religion and the state, though social and cultural norms shaped by <i>Sharia</i> influence all facets of legislation	Child Separation officially between religion and the state, though social and cultural norms shaped by <i>Sharia</i> influence all facets of legislation
Function	No child protection code results in competing functions and actors	Legislation in place but only emergency interventions occurring	Legislation in place but limited local level intervention	No child protection code results in competing functions and actors	Legislation in place, clear demarcation of functions
Capacities	Limited financial, human, and infrastructural resources	The only resources dedicated to child protection are those from INGOs	Limited financial, human, and infrastructural resources	Limited financial, human, and infrastructural resources	Limited financial, human, and infrastructural resources
Continuum of care	Limited social security, prevention by CSOs and INGOs, <i>kafala</i> legislated, no foster care	Post-civil war: limited social security, prevention by CSOs and INGOs, <i>kafala</i> legislated, no foster care	Limited social security, prevention by CSOs and INGOs, <i>kafala</i> legislated, no foster care	Limited social security, prevention by CSOs and INGOs, <i>kafala</i> legislated, one foster care programme	Limited social security, prevention by CSOs and INGOs, <i>kafala</i> legislated and limited foster care
Process of Care	CSOs investigate, but all actions and reports are by and to the state	No clear reporting mechanisms, INGOs are the only actors	The state is the only body able to investigate, act, and report	CSOs investigate, but all actions and reports are by and to the state	CSOs investigate, but all actions and reports are by and to the state
Accountability	Reports to CRC but no child protection database	No reporting to CRC, UNICEF plans to develop a database	Reports to CRC but no child protection database	Reports to CRC but no child protection database	Reports to CRC, developed a database without reporting

*CRC = United Nations Convention on the Rights of the Child; CSO = Civil Society Organisations; INGOs = International Non-Government Organisations; UNICEF = United Nations International Children's Emergency Fund.

to focus on emergency protection, particularly for marginalised and displaced children, as well as those at risk of physical injury from unspent munitions (Amusan, 2013).

3.3.2. Structures

Islam and religious courts play a significant role in shaping the cultural, social and institutional structures of countries in the Maghreb. All countries in the Maghreb have a Muslim majority population who follow the Sunni Maliki school of jurisprudence. Child protection laws and functions operate alongside *Sharia* – a moral and legal framework for Muslims (Gulam, 2016; Charrad, 2014). Interpretations of *Sharia* reported to have a strong influence on child safeguarding across the Maghreb region are inheritance (sons awarded twice the share of the daughters), premarital sex (a criminal offence in all countries except Tunisia), and patrilineal filiation (a constant across all counties) (Bilo & Machado, 2018; Save the Children Sweden, 2011a, 2011b, 2011c; Serrano-Ruano, 2018). In Mauritania, all law is derived through interpretation of *Sharia* and there is no separation between religion and state (Republique Islamique de Mauritanie, 2005). In Algeria, Libya and Morocco, Islam is the state religion, and the constitution of each country is interpreted in light of *Sharia* (Republique Algerienne Democratique et Populaire, 1989 [1996]; Republique Algerienne Democratique et Populaire, 1984 [2005]; Al-Ali 2020; Royaume Du Maroc, 1962 [2011]; Royaume du Maroc, 2004). In Tunisia, the children's code is not embodied in *Sharia* although it is keeps with the Islamic view of children as precious and rights-worthy (Republic of Tunisia, 1995; Save the Children Sweden, 2011c). The intertwining of *Sharia* with the social and cultural fabric of the Maghreb countries significantly shapes child protection laws and practices in the region.

3.3.3. Functions

In Algeria and Morocco, statutory agencies are fragmented and there is limited collaboration between different sectors, limiting accountability and oversight (UNICEF, 2014; Save the Children Sweden, 2011a, 2011b). Mauritania and Tunisia both have the legislation and structures in place for shared functions between services and sectors, however, a lack of financial, human, and physical resources means that there is limited implementation of the systems described in official government records (Davis et al., 2012; Save the Children Sweden, 2011c). In Libya, warlords hold power in their geographical regions and have varying amounts of power at the regional, local, and familial level (Al-Ali, 2020). Unless INGOs are involved, child protection issues are managed on a case-by-case basis through an informal tribal system (Amusan, 2013).

The existence and location of national child protection codes in the governance structures of the countries of the Maghreb impact the ability of various child protection stakeholders to protect children and be held accountable when they do not. In Algeria and Morocco there are no comprehensive or consolidated Children's Acts, rather legislation relating to children's rights can be found throughout various Codes, Acts and Ordinances (Al-Ali, 2020; Save the Children Sweden, 2011a, 2011b). Mauritania and Tunisia are the only countries in the Maghreb which have legislated an extensive child protection act (United Nations, 2010, 2018; Save the Children Sweden, 2011c). However, in Mauritania, the child penal code both legislates punishments for children as young as 7-years-old and includes protection measures (Republique Islamique De Mauritanie, 2005). Despite the existence of a dedicated child protection legal code in Libya, ongoing political instability and competing governments hinder its implementation (Amusan, 2013).

Understanding the management of child protection systems in the Maghreb provides an insight into how and who organises and implements child protection initiatives at the local, regional, and national levels. In Algeria and Morocco numerous actors in the ministries of health, justice, and social welfare have responsibilities that relate to child protection (Maestral International, 2019; Save the Children Sweden, 2011a, 2011b). For example, in Morocco, The Ministry of Health maintains a unit in hospitals consisting of social workers and emergency

staff; The Ministry of Education maintains a unit at each school and regionally; The Public Ministry maintains a unit led by a Prosecutor; The Ministry of Youth and Sport maintains a social worker to follow up and support children in conflict with the law in each province with a court; Corrections facilities employ a social worker for child offenders; and the government ministry, L'Entraide Nationale maintains eight child protection centres in the country to support children experiencing abuse (Maestral International, 2019). This complex web of responsibilities across ministries in Algeria and Morocco results in competing functions and roles of actors attempting to do child protection in their own way.

Since the breakdown of the government in Libya, UNICEF (2020b) has developed and implemented national programmes to respond to child protection needs. In Mauritania, the National Strategy for Child Protection (NSCP) was developed in 2009 to implement cross-sectoral coordination mechanisms for child protection at the provincial and municipal levels (Davis et al., 2012). There is a Directorate for Health and Social Affairs at the regional level in Mauritania, however municipal councils independently manage child protection issues (Babou, 2010). In Tunisia, having both a designated child protection code and ministry for children, results in there being a clear line of accountability from the Higher Council for Children chaired by the Prime Minister down to the child protection officers doing frontline casework with children and families, though there are regional differences in the implementation of child protection processes due to a lack of resources, especially in rural areas (Save the Children Sweden, 2011c). Across the Maghreb addressing child protection amidst political instability and resource disparities has required adaptable strategies, as evidenced by the varied approaches in the different countries.

3.3.4. Capacities

All countries in the Maghreb are affected by limited resources dedicated to child protection and allied services. In Algeria and Morocco there are limited human, financial, and infrastructure resources affecting the number and expertise of child protection workers in the sector (Save the Children Sweden, 2011a, 2011b; UNICEF, 2019a, 2019b). In Libya, UNICEF (2020b) reports that they have built the capacity of 91 social workers from the Ministry of Social Affairs and 1706 social workers from local CSOs. In the recent mapping of the Mauritanian child protection system, there was found to be a high need for financial resources and qualified human resources as well as institutional experts to support the process of child protection system strengthening (Davis et al., 2012). Tunisia has 23 integrated centres for children and young people in 18 governorates, under the authority of Ministry of Women, Families, Children and Older People (ISS, 2019). These centres employ social workers who work with both children and families and are for children aged 6-18 years of age who are abandoned or are at risk of being abandoned. Though, as in other countries of the Maghreb, the geographical reach of these integrated centres is limited to provincial centres and there is a lack of resources for child protection in rural regions (Braham et al., 2018; Save the Children Sweden, 2011c).

3.3.5. Continuum of care

Social security measures in the form of government financial support for disadvantaged families vary across the Maghreb. In Libya, due to the ongoing civil conflict there are limited social security payments provided by the government (UNICEF, 2020b). In Mauritania, there is basic government sponsored financial aid available, however the chattel slave system results in a slave class reliant on their slaver for basic needs (Snyder, 2012). Algeria, Morocco and Tunisia have unemployment benefits and family allowance for disadvantaged families (Barraud, 2010; Bilo & Machado, 2018; UNICEF, 2019c). There are specific benefits for new births, a widow's assistance allowance, and a family assistance fund for divorced women and their children. However, these benefits do not include single mothers or children born out of wedlock (Barraud, 2010). Across the Maghreb, access to social security is limited for children born out of wedlock (Serrano-Ruano, 2018). Their parents

often struggle to register them for civil registration or obtain a national identification card, which would grant them basic citizenship rights. As a result, children without civil registration face barriers in accessing benefits, education, employment, and healthcare.

In all countries of the Maghreb, except for Tunisia, which legalised adoption in 1958, adoption is illegal. All countries rather share in a *kafala* system, an Islamic form of guardianship for children whose parents have relinquished birthright (Liston, 2015; Yassari, 2015). In Algeria and Morocco, there are strong cultural and legal structures for *kafala* written into law but there is inadequate follow up on cases (Maestral International, 2019; Save the Children Sweden, 2011a, 2011b). Placement in institutions is the mainstay of alternative care, and only one pilot project for foster care exists in Morocco which has eight placements (Maestral International, 2019). In Libya, *kafala* was in place prior to the fall of the Gaddafi government in 2011, though the biggest challenge currently is the lack of a stable government and consequent lack of funds to support social services and alternative care (UNICEF, 2020b). In Mauritania, the general Child Protection Code (2005) provides conditions for applying *kafala*, but there are no implementing structures, management or alternative care system (United Nations, 2018). *Kafala* only occurs within the ruling Arab-Beydan caste and within the slave Haratin caste there is no formal *kafala* system; slave children are treated as chattel who can be given as property to other slavers (Snyder, 2012). In Tunisia, *kafala* and foster care operate side-by-side, however the former is more common due to limited knowledge and awareness of the foster care process (Save the Children Sweden, 2011c).

3.3.6. Process of care

The process of care across the Maghreb is influenced by the purpose and the components of each child protection system. The ability of child protection cases to be identified, referred to appropriate authorities, and investigated is influenced by the normalisation of corporal punishment in schools and within the home, as well as high rates of child street connection across the region (Ballet et al., 2012; Ballet et al., 2013; Braham et al., 2018; GIECPC, 2020; Save the Children Sweden, 2011a, 2011b, 2011c; Serrano-Ruano, 2018; UNICEF, 2019a, 2019b, 2019c).

In Algeria, the national delegate for the protection of children transmits the information regarding a child protection issue to the judicial police, the *wali*, the president of the above assembly, then the judicial police (Save the Children Sweden, 2011a). In Libya with many competing government factions there are no clear reporting mechanisms (Amusan, 2013). Mauritania experiences distinct challenges due to the recent legacy of chattel/hereditary slavery within its social and institutional structures, resulting in high rates of child abandonment, infanticide, child labour, child slavery, sex slavery, child marriage, and the forcible removal of children from their birth families (Babou, 2010; Snyder 2012). Mauritania also has high reported rates of family- and community-sanctioned female genital mutilation (69% women aged 15-49) and force-feeding which may limit the impact of referral and support systems (Cetorelli et al., 2020; Ouldzeidoune et al., 2013). However, anyone can call a national child helpline – the Green Line – operated by a Mauritanian CSO in partnership with the Ministry of Social Action, Children and Families, to report child maltreatment which is then assessed before being referred to the police (UNICEF, 2020c). In Morocco, there is no explicit prohibition of corporal punishment in the home, alternative care settings, day care or schools (GIECPC, 2020). Child protection referrals can only be followed-up by the prosecutor, police, judiciary, local authorities or CSOs given authority by official state actors (Maestral International, 2019; Save the Children Sweden, 2011b). In Tunisia, anyone can report violence against children using the state managed child protection hotline (Save the Children Sweden, 2011c). Trained child protection officers are empowered to assess each case and to create a plan for ongoing support or for removal to an institution where there is an immediate risk of harm to the child (Braham et al., 2018). However, while this system is officially in place, its implementation is not widespread, particularly in rural regions, due to

Table 4

Recommendations of the United Nations Committee on the Rights of the Child (United Nations, 2010, 2012, 2014, 2018).

	Algeria	Libya*	Mauritania	Morocco	Tunisia
Structures	To establish a Child Protection Code and review discriminatory provisions in the Family Code		To legislate reforms to prohibit child marriage, female genital mutilation, and other harmful practices	To establish a Children's Code, reform Family Code, and strengthen enforcement of existing legislation	To align legislation with the CRC and strengthen its implementation
Functions	To establish high-level coordinating mechanisms to ensure implementation of children's rights across ministries		To establish inclusive mechanisms for civil society and children to participation in the policy review process	To enhance training programmes to ensure dissemination of knowledge and best practices among child protection actors	To involve children in policy design, align policy with SDGs and develop national implementation plan
Capacities	To allocate sufficient resources for health and social sectors and provide training on child rights to all allied professionals		To allocate sufficient financial, human, and technical, resources for policy implementation and support CSO activities	To allocate sufficient financial, human, and technical resources to support the effective functioning of local, regional and national child protection systems	To provide training and allocate sufficient resources for child protection actors and allied professionals
Continuum of Care	To conduct awareness-raising "in order to put an end to their [single mothers and their children] social marginalisation, stigmatisation and brutalisation"		To enhance community-based programmes that promote parenting skills and expand alternative care options such as <i>kafala</i> and foster care	To enhance community-based services, including parenting programmes and promote alternative care options as viable alternatives to institutionalisation	To establish clear guidelines and standards for alternative care to ensure the safety, wellbeing, and rights of children
Process of care	To establish an independent child-sensitive monitoring structure to address individual complaints of violations of child rights		To establish systematic procedures for referrals and to monitor the progress of children and families after intervention across all allied sectors	To enhance identification and reporting mechanisms, ensure professionals can recognise and respond to signs of abuse; establish local, regional and national child protection agencies	To establish multidisciplinary teams to conduct thorough investigations and assessments of child maltreatment cases
Accountability	To establish a national and comprehensive data collection system		To enhance data collection measures and strengthen monitoring and complaint mechanisms	To establish a national and comprehensive data collection system	To enhance monitoring and reporting child protection measures and conduct research

* The latest CRC report for Libya was from 2003 and outside the range of this scoping review.

CRC = United Nations Convention on the Rights of the Child; CSO = Civil Society Organisation; SDGs = Sustainable Development Goals.

limited resources.

3.3.7. Accountability

All countries in the Maghreb have ratified the UN Convention on the Rights of the Child and have made submissions to the United Nations Committee on the Rights of the Child (CRC). Table 4 summarises the most recent recommendations made by the CRC in relation to the system components of each country, excluding the CRC report for Libya from 2003 and outside the range of this scoping review (United Nations, 2003, 2010, 2012, 2014, 2018).

The CRC advised Algeria and Morocco to adopt a comprehensive child protection code and reform their Family Code to eliminate discriminatory provisions. Mauritania and Tunisia were urged to further strengthen the implementation of their existing child protection legislation in accordance with the Convention.

The strengthening of coordinating mechanisms across all allied sectors were recommended for Algeria, Mauritania, and Morocco. The inclusion of CSOs and children in policy design and implementation was also encouraged for all countries in the Maghreb. Likewise, all countries in the Maghreb were encouraged to strengthen training for professionals across all sectors and allocate a greater amount of financial and human resources for child protection actors, ministries and services.

Awareness campaigns to prevent discrimination against single mothers and promote safeguarding were recommended in Algeria. While awareness campaigns promoting kinship and foster care as alternatives to institutionalisation were recommended in Mauritania and Morocco. Community-based programmes to enhance parenting skills were also recommended in Mauritania and Morocco. All countries in the Maghreb were recommended to review laws prohibiting corporal punishment in the home and in education settings. For example, even though Tunisia was applauded for introducing a law prohibiting corporal punishment, the CRC still found corporal punishment was common in both public (e.g. schools) and private settings (e.g. the home). The establishment of referral systems and protocols to process interventions and monitor progress was advised across all Maghreb countries. Moreover, the CRC recommended the establishment and strengthening of national data collection systems to inform evidence-

based policies across all countries in the Maghreb. In Tunisia, a national database was created to monitor and report on child protection issues; however, a comprehensive report on the database findings is yet to be published by the government (Save the Children Sweden, 2011c).

4. Discussion

4.1. Estimating the number of children in institutions

Without reliable data it was difficult to estimate the number of children in institutions in the Maghreb. There are no published government records or reports of the number of children in institutions in Algeria. In Libya, the figures we found did not include the number of children who have been detained due to being exploited in the armed-conflict, refugee children, nor children in the many informal shelters and residential centres created in local communities (Amusan, 2013; El Ghamari & Gabriela Bartoszewicz, 2020). While Mauritania had the highest numbers of children estimated to be in institutions, these figures were only for children in *talibs* in the capital city of Nouakchott. Additionally, there were no reliable records on the number of *talibs* and children within them in other regions of Mauritania and the figures that were available did not include female children who are not sent to *talibs* (Ballet et al., 2011). Additionally, the estimated 500,000 children (24% of the population under the age of 18) born into heredity slavery in Mauritania do not qualify as children living in an institution (Snyder, 2012). Morocco recently published dual reports documenting the numbers of children in EPS and *Dar Talibs* (Royaume Du Maroc, 2022). However, the reports disregard the number of children in Child Protection Centres (CPCs) and those managed by CSOs, which along with *Dar Talibs*, the government does not recognise as institutions. Additionally, child abandonment remains a concern in Morocco, with the Moroccan courts identifying an average of six children abandoned at birth each day in 2021 (~1 in 300) (Royaume Du Maroc, 2021; United Nations, 2021). While Tunisia has the highest proportion of children estimated in institutions nationally in the Maghreb (4.22%), it also was found to have the highest number of state run institutions and most robust safeguarding structures and practices in the region, which is

hypothesised lead to a higher rate of identification and institutionalisation.

4.2. Comparing and contrasting countries within the Maghreb

The Maghreb has a set of historical and contemporary circumstances – including a legacy of colonialism, unstable governments, authoritarian dictatorships, and poverty – that a system perspective can consider, and which help to explain why the number of children in institutions remains high. Tunisia is the only country to legalise adoption, complementing *kafala* for abandoned children with a foster care process. Tunisia has also implemented a children's code and personal status codes which help to reduce abandonment and poverty. Tunisia also had an active women's movement prior to the Arab Spring, allowing single women to keep their children and for all children to have financial support and a patronymic name (Voorhoeve 2018). Tunisia is an example of how Islamic legal traditions are malleable if child rights are prioritised and embedded in legal codes and laws (Achour, 2019). Tunisian law defends the same conception of family as Algeria, Libya, Mauritania, and Morocco, but the legalisation of adoption and foster care, family support measures and allowing children to take their father's name, reflects the primacy of children over the cultural ideal of family.

Mauritania's progress in strengthening its child protection system has taken a community-driven 'bottom-up' approach, consisting of INGOs working with local CSOs and government representatives (Davis et al., 2012). This approach has had varying levels of success and provides a blueprint for other countries in the region of a way to achieve much with little resources, especially for Libya as it comes out of the civil war. The most significant step forward for Mauritania has been the mapping of its child protection system which allowed CSOs and INGOs to use the evidence to advocate to and provide the government with information about the needs of the child protection system at the local, regional, and national levels (Davis et al., 2012).

Libya, however, is at the other extreme, although reliable data are lacking, child protection appears to be in crisis. Protection from starvation, bombings, accidents, trafficking, and other life-threatening events is being provided by INGOs through crisis initiatives (Amusan, 2013). If Libya rebuilds its civil society using the guidance of UNICEF (2020b), it could follow the path of Mauritania with a community-driven child protection system. However, the vacuum of effective governance and the remaining tensions from the civil war may continue to send the country down a different path.

Algeria and Morocco were the countries estimated to have the largest number of children in institutions. Both countries lack an all-encompassing child protection code, resulting in competing stakeholders from different sectors (education, health, justice, social services) attempting to do child protection in their own way. The legislation of a child a protection code, coupled with an increase in spending to boost preventative family support programmes and better equip child protection services, are potentially viable ways to divert and move children from institutions (Goldman et al., 2020).

One way of reducing the volume of children in care may be to consider how *kafala* and a western model of foster care could be implemented alongside each other as Tunisia has attempted (Achour, 2019; Save the Children Sweden, 2011c). *Kafala* is legislated in Algeria and Morocco in response to high rates of abandoned children but there is not specific legislation for foster care (Guenon, 2019; Hoffman, 2019). Additionally, while Mauritania has legislated an extensive children's code, this code does not include provisions for foster care (Republique Islamique de Mauritanie, 2005). Therefore, while *kafala* does not have the oversight of foster care, it does have cultural understanding and acceptance and is legitimised by *Sharia* (Yassari, 2015). Allowing *kafala* and foster care to be complementary would allow for family reunification where possible and provide parents unable to care for their children an alternative to placing their children in institutions.

All countries in the Maghreb require a coordinated approach targeting multiple sectors, agencies and actors to reduce child institutionalisation. Interventions need to include the development of awareness raising programmes on child safeguarding and the negative impact of child institutionalisation on children's development and wellbeing (Goldman et al., 2020). This needs to occur alongside a strengthening of the capacity of social workers to provide targeted support to vulnerable families, screen *kafala* families and recruit, train and support foster families (El-Hoss, 2023). The workforce is currently primarily residential and employed by CSOs. Therefore, there will also need to be a re-configuration or retraining of the workforce, involving a shift from charity to state-funded care. Having the CSOs as allies in this process is essential, along with other allied systems who overlap with child welfare (e.g. education, medical, judiciary etc.).

Countries across the Maghreb need to strengthen information systems through accurate data collection of the numbers of children who are at risk of institutionalisation, taken into institutions or enter alternative care, such as *kafala*. National child protection databases are recommended for both High-Income Countries (HICs) and LMICs to inform research on how to support families and to monitor and evaluate child protection cases (Boothby & Stark, 2011; Bhatia et al., 2020; Jud et al., 2013). The collection of disaggregated data on child protection cases in the countries of the Maghreb will inform research about how to achieve better education and social messaging to the population about the negative impacts of institutional care for children, whether this will help to reduce stigma, and ways to increase recruitment for foster and *kafala* parents (Eurochild & UNICEF, 2021). A comprehensive evidence base will be the first step in evaluating locally developed interventions aimed at reducing child maltreatment and institutionalisation across the region.

4.3. Limitations

This scoping review had several limitations. It focused solely on documents in English and French, potentially missing valuable information in Arabic, especially from government sources that could have offered more comprehensive insights into national strategies, current legislation, and ministry evaluations. The accuracy of estimates regarding children living in institutions in the Maghreb was also influenced by inconsistent reporting, differing definitions of institutions, and a lack of access to classified state documents. Furthermore, due to the limited research in the field of child protection in these countries, the review primarily relied on documents published by INGOs and CSOs. These documents may reflect the specific perspectives and positions of these organisations and often lack the methodological rigor of academic articles. Consequently, many of the articles in the review did not employ empirical research methods, potentially impacting the depth and quality of the evidence, as empirical research typically provides more robust and reliable data. Lastly, the scope and applicability of the review may have been limited by many documents being from the early 2010s and a significant variability of available documents across countries.

5. Conclusions

Using a systems approach in reviewing the child protection literature across the Maghreb we have highlighted several potential areas for intervention development. State investment in the welfare of children and constitutional recognition of the rights of women and children are key to enabling cultural change. Exploring avenues to integrate culturally acceptable practices like *kafala* and Western models like foster care, alongside state investment into information systems and comprehensive data collection, offers a promising approach to reduce child institutionalisation and enhance child protection across the Maghreb. Research is urgently needed across the region to develop system-wide evidence-based interventions and to understand what works and how.

6. Author statement

CH, FB and MER conducted the data search and drafted the original manuscript. CH, FB and MER screened and charted documents for the review. All authors commented on drafts and final copy.

Funding

This research was supported by the Global Challenges Research Fund (GCRF) in conjunction with the United Kingdom Research and Innovation (UKRI).

Declaration of Competing Interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

Data availability

No data was used for the research described in the article.

Acknowledgements

We would like to acknowledge the support provided to research and write this paper by Association Mauritanienne pour la Santé de la Mère et de l'Enfant, Fondation Amane pour Protection de l'Enfance, Moroccan Children's Trust and Voix de l'Enfant Mahdia.

Appendix A. Supplementary data

Supplementary data to this article can be found online at <https://doi.org/10.1016/j.childyouth.2023.107382>.

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