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Opportunities, constraints and the role of social intervention in residential child care: A Scoping Review Protocol

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ADMINISTRATIVE INFORMATION

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INTRODUCTION

Review question / Objective The scoping review aimed to identify the opportunities as well as the constraints of residential child care and understand the role of social intervention in this context.

Background This research focused on Residential Care (RC), a measure with the objective of protecting children's well-being and rights, and the role of social intervention in this context.

Removing children from their parents should be a last resort measure (article 14, Guidelines for Alternative Care of Children, UN), but it is necessary when the family cannot provide the adequate care for the child or abandons them (article 5).

Given this, the situation implies a condition of vulnerability. First, in order to be removed from their family, children have to be suffering from some kind of neglect or abuse. Then, by being away from the family and placed in a residential

care facility, children are without a family environment which is highly valued for their development (article 3).

Therefore, Residential Care presents an opportunity for the safeguarding of children but also presents some limitations, particularly in its inability to replicate a familial setting (Chartier & Blavier, 2023; ONU, 2009).

Research highlights both positive and negative outcomes for youth in residential care compared to those in the general population. In a way, adolescents in RC deal with more problems regarding anxiety and depression, rule-breaking and aggressive behavior (Campos et al., 2019; Chartier & Blavier, 2023; Wade et al., 2019). On the positive side, these adolescents demonstrate higher levels of engagement in sports and hobbies, activities that institutions actively promote as protective factors (Campos et al., 2019; Schofield et al., 2017). Further, Carvalho et al. (2020) found that children in RC feel less confident with themselves, have lower levels of satisfaction with school and life and experience less optimism

regarding the future when compared with children in foster care.

These findings show the need to explore the limitations of residential care with children, in order to better understand its impact on their well-being, while also enabling a better social intervention in this context. It is also important to understand the opportunities given by RC, considering its objective of protection, valuing the good practices and contributions in order to maintain and promote them.

Rationale Child's protection and children's rights have been discussed over the years in an international context, leading to various declarations and conventions.

The United Nations Organization (UN) released the Convention on the Rights of the Child (1989) stating numerous rights which include the right to protection against violence, abuse and neglect (article 19) and exploitation (article 36). It also states their right to life (article 6), freedom of speech (article 13), education (article 28) and health (article 24), placing responsibility on each member state's government to protect these rights (Article 2).

Some principles are defined regarding intervention with children and their families. According to article 3, all actions concerning children should have their best interests as the focus of the intervention. Children have the right to not be separated from their parents against their will, unless authorities determine that parental abuse or neglect has occurred (Article 9).

These rights and principles recognize that situations may arise where a child's family is unable to provide adequate care, forcing the State to act and provide alternative care. This can be informal, placing the child within its other family relatives or friends (kinship care), or formal care, defined as care provided in a family (foster care) or residential environment (residential care).

Given that family is the fundamental group of society and the natural environment of growth and protection of children, as stated by the UN (2009), it is clear that children without parental care are in a situation of vulnerability. Kinship and foster care can provide this family setting, being the preference within the alternative care options in children under the age of 3, according to experts (paragraph 21). Nonetheless, residential care remains the most common alternative in countries such as Portugal and Greece (UNICEF, 2021).

To address this, the UN General Assembly adopted the Guidelines for the Alternative Care of Children in 2009, reinforcing protections for children in alternative care, establishing orientations for policy and practice in this context.

For residential care specifically, these guidelines recommend small, child-centered environments (paragraph 123), giving the opportunity for children to bond with a specific carer (paragraph 126). Its purpose is to provide temporary care and contribute to family reintegration of the child or other family setting, if the previous is not possible (paragraph 123).

When children or young people are placed in alternative care, it's the institutions responsibility to provide appropriate care and ensure their psychosocial needs are met, including health and education (article 104). Therefore, it is necessary to articulate and collaborate with multiple services and organizations, which also allows to collect information regarding the child and their well-being, which must be confidential (article 110). Different professional areas are required to maintain this social intervention. Even if they are not specified in international legislation regarding residential child care, they understandably pass through social work, psychology and others to meet the standards stipulated. It is their responsibility to help the child have access to legal representation, advising and informing them of their rights (article 104). Also, it is expected they work with the families in order to facilitate children's contact with their relatives, whenever it is in the best interests of the child (article 104).

Given the prevalence of residential care and the heightened vulnerability of children outside a family environment, it seems relevant to explore both the opportunities and constraints of this child protection measure. Understanding these aspects can provide insights into the experiences of the children, families, and professionals involved. This enables a better social intervention, based on knowledge, which leads to a better implementation of children's rights, the ultimate objective of child protection.

METHODS

Strategy of data synthesis Databases were searched, namely: SCOPUS, Web of SCIENCE and Academic Search Complete, considering keywords commonly applied and specific terminology used in literature focused on the subject. Databases were selected regarding their scope of topics, providing a collection of quality scientific studies in social areas, validated by peers.

In order to answer the questions posed by the review question, the terms children AND youth AND "child protection" AND "residential care" OR "residential child care" OR "children in residential care" AND opportunities OR potentialities OR potential OR advantages OR strengths AND NOT "foster care" AND NOT "informal care" AND NOT

"therapeutic care" were used in regards to the opportunities of RC. Concerning constraints, we searched the terms children AND youth AND "child protection" AND "residential care" OR "residential child care" OR "children in residential care" AND constraints OR challenges OR limits OR barriers AND NOT "foster care" AND NOT "informal care" AND NOT "therapeutic care". Finally, to address the role of social intervention in RC, the search included children AND youth AND "child protection" AND "residential care" OR "residential child care" OR "children in residential care" AND "social work" OR "social intervention" OR "social workers" AND NOT "foster care" AND NOT "informal care" AND NOT "therapeutic care".

Data were synthesized through a thematic analysis process including coding, themes description and elaboration of analytical themes for discussion of results. These results were illustrated through tables detailing:

- a) Author, year, country
- b) Objective
- c) Geographical context
- d) Sample (age and sex)
- e) Design/methodology
- d) Instruments/indicators
- f) Results: opportunities
- g) Results: constraints
- h) Results: social intervention

Results were also described in a narrative way by category to indicate the sources of evidence.

Eligibility criteria Criteria to include studies were based on the Population, Context and Concept (PCC) acronym, namely: i) Population: children and young people; social intervention professionals; ii) Context: residential child care; iii) Concepts: opportunities, constraints and the role social intervention.

Studies that deviate from these criteria were not eligible, namely those focusing on the context of therapeutic residential care, informal alternative care and foster care. Also, only studies with an empirical component were included, meaning that studies from grey literature, letters to the editor and published abstracts were excluded. Regarding the methodology, this scoping review included qualitative and quantitative research as well as mixed methods studies. In what concerns the publication period, the search was limited to studies published in the past five years (2019-2024), aiming to collect studies based on its current status, given that residential child care has been subject to changes in several countries, with a whole set of guidelines emerging in recent years at an international level that reconfigure its contours. Accordingly, the selection of studies was

limited to the countries of the European Union and the United Kingdom, taking into account the convergence of principles and guidelines in terms of public policies that occurs within the EU member states, of which the United Kingdom was a part until recently (2020).

Source of evidence screening and selection

The review followed the PRISMA guidelines (2020) (Page et al., 2021). Studies were exported by reference software Mendeley (version 2.129.0), which supported, also, the identification of duplicate documents to be deleted. Studies titles and abstracts were screened to verify inclusion/exclusion criteria and for full-text review. The reasons for excluding full-text studies that do not meet the inclusion criteria were enumerated. The review was carried out independently by the researcher and two reviewers (supervisors) to clarify doubts.

In the Academic Search Complete database, 112 studies were found, 43 of which were duplicates. In the Web of Science database, 102 studies were identified, 28 of which were duplicates. In Scopus, 337 studies were found, including 176 duplicates. In total, of the 551 studies retrieved through the search, 247 were removed due to duplicates, resulting in 304 studies being collected for the evaluation phase. During this phase, the titles and abstracts of the studies were read to determine which met the inclusion criteria. It was found that 266 of these did not meet the defined criteria. The screening phase included 38 studies for a full-text reading. One of these was not accessible, so only 37 articles were read. With this full reading, 15 articles ended up being excluded, for various reasons, thus including 22 studies in this scoping review.

Data management Data from the selected studies (using the scoping review flowchart (PRISMA-ScR) were presented through tables with study details (author(s); year; objective; participants; methodology; instruments; and results related to the concepts established in the PCC), figures and narrative descriptions.

Language restriction The language of publication studies was limited to Portuguese and English.

Country(ies) involved Portugal.

Keywords Children; Young people; Child protection; Residential child care; Opportunities; Constrains; Social intervention professionals.

Dissemination plans This scoping review was a component of a monograph within the scope of a

master's degree. It is intended to publish the results of this scoping in a peer-reviewed journal article and to present them at relevant academic conferences.

Contributions of each author

Author 1 - Marta Jardim.

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Author 2 - Vanessa Nunes - The author provided supervision as Master's tutor and helped in the creation/review of this protocol. The author assisted in the process of screening, selection, and data extraction, as well as in the development and review of the manuscript.

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Author 3 - Helena Amaro da Luz - The author provided supervision as Master's tutor and helped in the creation/review of this protocol. The author assisted in the process of screening, selection, and data extraction, as well as in the development and review of the manuscript.

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