



REGISTRATION AND BEST INTERESTS ASSESSMENT FORM



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REGISTRATION AND BEST INTERESTS ASSESSMENT FORM¹

Registration and the assessment of a child's best interests should be conducted by experienced and qualified social workers and case management specialists only. Interviews should be conducted in a secure, child friendly space, where confidentiality is ensured and where the child can be put at ease. Access to drawing materials and age-appropriate playthings should be given. The caseworker should use age-appropriate language and work with a qualified interpreter as required.

Each BIA will be reviewed at the end of the process by a case manager who will ensure that all safeguarding aspects² have been taken into account during the course of the interview, and that the recommendations made are consistent with the findings. The BIA should culminate in a plan of action to include the response to immediate needs and steps to be taken for medium to long-term needs.

This form is mainly to be used for unaccompanied and separated children. There may also be some cases when a Best Interests Procedure might be needed for an accompanied child: if an abusive relationship is identified or if family separation might occur in case of forced returns carried out by States. A best interest procedure is not required in the case of decisions made by parents or legal guardians rather than decisions by the State - e.g. if parents decide voluntarily to return as a family - as ordinarily parents or legal guardians have the primary responsibility for the upbringing and development of the child (Art. 18 CRC). Considering a child's best interest as a member of a family unit is about recognizing a child's individual needs (on his/her own) while balancing and recognizing the child as a member of a family - complimenting (not overriding) the role of parents as caretakers for the child, unless there is evidence that this would not be in a child's best interest.

BELOW ARE A FEW CONSIDERATIONS WHEN COMPLETING THIS FORM:

- Attention should be paid to the child's attention span, and regular breaks encouraged.
- Interpreters should also receive basic training on child protection case management and on child sensitive interviewing skills, - as well as interpreting,³ confidentiality and data protection, and child safeguarding (including signing a CoC).
- This form is intended to be completed progressively, over a period of time, and should not be attempted in one session.
- The principles of need-to-know is at the core of all child protection work, i.e. understanding a child may have suffered abuse is sufficient for you to refer them to the health or MHPSS services or to the appropriate colleague or service, without having to ask details on what the abuse was. Referrals should be made with the assent and wish of the child unless it is assessed that you can take the decision, but this first needs to be explained clearly to the child.
- The essential components to be addressed in the first interview with a child are presented in the first part of the form and relate to basic details and the identification of urgent needs.
- It is important to ensure that the child's words are noted down, rather than attempting to interpret them. Where it is completed with observations of the interviewers, explanations of the interpreter, or additional information coming from other persons who know the child, these sources must be explicitly mentioned.
- This form can be adapted as needed for a specific context but mandatory questions indicated by an asterisk must be retained.
- Before starting the interview it is essential to ensure the consent of the appropriate authority has been given to proceed and is indicated below.

¹ This form is based on the UNHCR BIA Form with additional elements from the IOM Rapid Screening Form.

² Save the Children. Policy on Child Safeguarding 2020.

³ For example, to ensure that the interpretation is literal, it is important to clearly distinguish between what the child has actually said (word by word) and the interpreter's comments from the child's words (eg "the child says X word per word, but what I think the child is saying is Y"). This process is equally important when the interpreter is explaining what the caseworker is saying in a language that is clear to the child.

CONSENT (to be completed for all children under the age of 18)

Please select the relevant scenario and proceed according to the corresponding instructions indicating who is the authority in each case.

The guardian or appropriate authority has denied the request to interview the child, with or without their observation and/or participation.

The guardian or appropriate authority is present, has given consent for the interview to take place, and the guardian or appropriate authority will observe and/or participate in the interview.

The guardian or appropriate authority is not present but has given consent for the interview to take place without their observation and/or participation.

The guardian or appropriate authority is not present and cannot be contacted.

RECORD OF INTERVIEWS CONDUCTED

Date	Location	Name of interviewer	Name of interpreter (if used)

SECTION 1: overview and identification of immediate needs

The information in this section should be gathered, to the extent possible, during the first interview with the child, to ensure basic biodata is collected and key needs identified for immediate action. If necessary, this can be done over several short sessions during the day, or over several days, but immediate needs such as providing care and shelter, as well as responding to urgent medical or mental health concerns, should be identified and acted upon on the first day.

QUESTIONS DO NOT NEED TO BE ASKED IN THE ORDER GIVEN ON THE FORM.
WITH A CHILD IT IS HELPFUL TO START WITH QUESTIONS
THAT WILL BE EASY TO ANSWER, SUCH AS:

“ Do you have any brothers or sisters?
Are they older or younger than you? What are their names? ”

“ Were you going to school before you left home?
What grade were you in? Did you like school? ”

(The latter question might provide some insights into why the child left home,
which can be picked up later in the interview).

“ Do you remember when you left home – how long ago was it?
And when did you get here (to current location). ”

“ Have you been in touch with your family since you left home? ”

This question can lead into asking about phone numbers and will give some insights
for later parts of the interview.

“ How are you feeling? Have you been sick at all since leaving home? Are you sleeping/
eating normally? Do you have any particular health problems? ”

Furthermore, the child should be given the opportunity to stop the interview at any time; or to not answer questions that he/she is not at ease with. The child should continuously be asked if they understand the scope of the questions and the purpose of the discussion.

LOCATION

CASE NUMBER

LINKED CASES? No Yes

BID HAS BEEN INITIATED? No Yes

PRIORITY OF THE CASE

High – Intervention should be done immediately Reason
 Medium – Intervention should be done within 72 hours
 Low - Intervention should be done within 1 week

BASIC INFORMATION ON THE CHILD

Where necessary, you can click the check box to indicate that the information provided is an estimate.

FULL NAME

ALIAS

AGE

GENDER

DATE OF BIRTH

PLACE OF BIRTH

DATE OF ARRIVAL IN
CURRENT LOCATION

DATE OF DEPARTURE
FROM HOME

NATIONALITY

ETHNICITY

LANGUAGE(S) SPOKEN

LEVEL OF EDUCATION ACHIEVED

RELIGION

DOCUMENTATION
HELD BY CHILD
(Note details of passport,
ID Card, birth certificate etc.)

FAMILY

Where necessary, you can click the check box to indicate that the information provided is an estimate.

FULL NAME OF FATHER/Guardian

FULL NAME OF MOTHER/Guardian

FULL NAME OF OTHER RELATIVE
or caretaker responsible for care
prior to child's departure from home

BROTHER/SISTERS NAME

AGE

GENDER

CURRENT LOCATION

BROTHER/SISTERS NAME

AGE

GENDER

CURRENT LOCATION

BROTHER/SISTERS NAME

AGE

GENDER

CURRENT LOCATION

CHILD'S ADDRESS

TELEPHONE AND/OR
SOCIAL MEDIA CONTACT
for the family/community.
Please give the number
and the name of the owner
of the phone.

You can use this field for any kind
of clarification or information
you think relevant

PROTECTION NEEDS AND CARE ASSESSMENT

SHELTER AND ACCOMODATION
INCLUDING CARE ARRANGEMENTS

WATER, SANITATION AND HYGIENE

FOOD AND NUTRITION

PERSONAL SAFETY AND SECURITY

HEALTH AND ACCESS TO MEDICAL CARE

PROTECTION AND
PSYCHOSOCIAL WELL-BEING

EDUCATION AND TRAINING

FAMILY TRACING,
ASSESSMENTS AND REUNIFICATION

HISTORY OF THE CHILD'S MIGRATION EXPERIENCE

CHILD'S RELATIONSHIPS

HISTORY BEFORE THE CHILD SEPARATED FROM THE FAMILY (applicable only in case of separation)

OTHER

RECOMMENDED ACTIONS TO BE TAKEN

These recommendations are made by the case worker on the basis of the initial interview with the child, so that immediate action is taken to ensure that the child is safe and secure and is provided with age and gender appropriate temporary care and shelter. The case manager should review the recommendations, so referral is made to the appropriate services to ensure the immediate needs of the child are addressed without delay.

RECOMMENDED ACTION	DETAIL OF THE ACTION/AGENCY RESPONSIBLE	ACTION TAKEN DATE
ACCOMMODATION		
TEMPORARY CARE		
FOOD AND NUTRITION		
WATER, SANITATION AND HYGIENE		
PERSONAL SAFETY AND SECURITY		
HEALTH AND ACCESS TO MEDICAL CARE		
PROTECTION AND PSYCHOSOCIAL WELL-BEING		
EDUCATION AND TRAINING		
FAMILY TRACING AND ASSESSMENT		
NEED FOR BID		
OTHER		

SECTION 2: follow-up to initial assessment

Please provide a brief summary/update for each relevant section depending on referrals made.

CHILD'S HEALTH ASSESSMENT

(to be conducted by medical personnel including follow up on issues raised during initial interview under Section 1)

CHILD'S MENTAL HEALTH ASSESSMENT

and need for psychosocial support, including reference to any indication of abuse of drugs or other substances
(to be conducted by qualified personnel and in follow up to issues raised during initial interview under Section 1)

CHILD'S LEGAL ASSESSMENT (to be conducted by legal advisor based on information gathered by the caseworker and verified with the child as required).

CHILD'S PROTECTION RISKS

TEMPORARY CARE⁶ _____

Has the child been given clothing or other personal items including personal hygiene items?

Yes
No

Has the child been allocated a bed, bedding and a personal locker with padlock within the place of temporary care?

Yes
No

Name of counsellor/social worker assigned to the child

Name of legal representative if they have one

DETAILS OF TEMPORARY CARE _____

Is the child currently living in any of the following? (please tick the correct answer)

A temporary care centre

With family members

Other (please specify)

With a foster family

With friends

Name of temporary caretaker

Phone / contact details

Address

⁶ The child's placement in temporary care should be conducted within the first 12 hours of identification.

SECTION 3: current situation and recommendations

This section is to be completed at a later stage, once child is in a safe accommodation and most immediate needs have been addressed.

CURRENT SITUATION

This section should include feedback from the child and from the caregiver (when possible) in order to provide a balanced view of the child's condition. The child and caregiver should be interviewed separately.

FEEDBACK FROM THE CHILD

FEEDBACK FROM THE CAREGIVER

Please describe the current situation of the child including their level of communication

STATUS AND RECOMMENDATIONS

NAME OF THE
CASE WORKER

DATE

SIGNATURE OF THE
CASE WORKER

NAME OF THE
CASE MANAGER

CASE MANAGER'S COMMENTS ON THE REPORT INCLUDING CONFIRMATION THAT THE CASE WORKER
HAS NO CONFLICT OF INTEREST IN THIS CASE

DATE

SIGNATURE OF THE
CASE MANAGER



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