

**Believe in
children**



Barnardo's



Social Work with Unaccompanied Young People During the Covid-19 Pandemic.

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Key Definitions

Migrant: Someone who moves from one place to another, especially to find work or better living conditions.

Asylum Seeker: When people flee their own country & seek *sanctuary* in another country, they apply for asylum - The right to be recognised as a refugee & receive legal protection & material assistance.

Refugee: A refugee is someone who has been forced to flee his or her country because of *persecution, war or violence*. A refugee has a well-founded fear of persecution for reasons of *race, religion, nationality, political opinion or membership in a particular social group*. Most likely, they cannot return home or are afraid to do so.

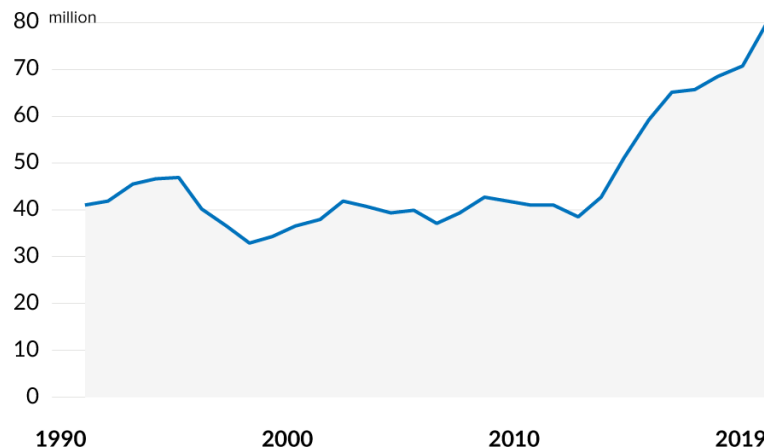
Internally Displaced: People who are seeking safety in other parts of their country.

Returnee: People who have returned home after being displaced.

Unaccompanied Asylum Seeking Child: "a person under 18 years of age or who, in the absence of documentary evidence establishing age, appears to be under that age" who "is applying for asylum in their own right; and is separated from both parents and not being cared for by an adult who by law or custom has responsibility to do so".

79.5 MILLION

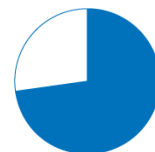
forcibly displaced people worldwide at the end of 2019



1%
of the world's
population is
displaced



80%
of the world's
displaced
people are
in countries or territories affected by
acute food insecurity and malnutrition



73%
Hosted in
neighbouring
countries *



68%
Came from just
5 countries *

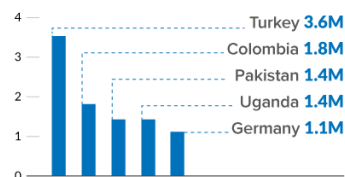


40%
of the world's
displaced people
are children



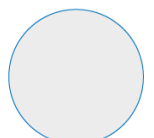
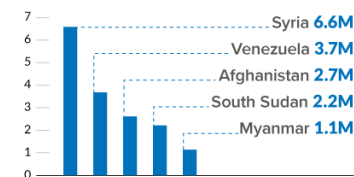
85%
Hosted in
developing
countries *

TOP HOSTING COUNTRIES



* Data includes UNHCR refugees and Venezuelans displaced abroad

TOP SOURCE COUNTRIES



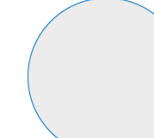
4.2M
Stateless people



2M
Asylum applications
(in 2019)



107,800
Resettled to 26 countries
(in 2019)



5.6M
Returnees
(in 2019)

Claiming Asylum in the UK

- Over the last 12 months, there were 2,868 applications for asylum in the UK from unaccompanied children, **20%** fewer than the previous year - **9% of total asylum applications**.
- Of the children who arrived in the UK alone, **46%** were granted asylum in the year to June 2020. Asylum cases can take years to be resolved.
- COVID-19 has had a direct impact on the asylum process for UASC. Substantive interviews have been halted and the process is taking significantly longer. This has a direct impact on the emotional wellbeing of young people.
- **Eritrea** was the top country of origin for applications from unaccompanied children from September '19 to June '20.
- **Government resettlement schemes have been halted** during the Covid-19 pandemic (The Syrian Vulnerable Persons Relocation Scheme/ The EU Settlement Scheme).

Policy Context

- UK Border control policies that restrict safe & legal routes, along with the UK asylum system, are continuing to directly contribute to a **humanitarian crisis** in Northern France & to an increased reliance on dangerous & irregular journeys to reach the UK.
 - This has come at a huge financial, moral & *human cost*.
- The number of victims of **trafficking & modern slavery** is expected to rise under the UK government's new 'Points-Based Immigration System'.
- **Violence, detentions & deportations** are currently being used to dissuade people from seeking refuge in the UK. Deportations have continued throughout the pandemic despite health risks.
- As per the **definition of our profession**, social work should represent a powerful voice in advocating for a more humane approach to asylum claims & protection responsibilities, as well in challenging the oppressive & discriminatory UK government's 'Hostile Environment'.



Photo credit: Rowan Farrel

The situation in refugee camps has worsened greatly since the **Covid-19** outbreak. There is limited access to clean water, dignified shelter or appropriate sanitation. The conditions are particularly dangerous & deadly in winter.

Unaccompanied Young People and Mental Health

- Refugee & asylum-seeking children are at a **higher risk** of developing mental health difficulties than native children in resettlement countries – especially PTSD, depression & anxiety.
- Psychological difficulties in asylum-seeking & refugee young people are **three times** the national average.
- Overall, refugee children & adolescents adjust well compared to normative ranges, but **younger children** have greater peer difficulties & older **girls** in particular can have increased emotional problems.
- The **pandemic** has affected Unaccompanied Young People by increasing their anxiety, hindering their ability to access mental health support, significantly slowing the asylum process, lessening direct support from services, reducing access to education & by affecting their ability to socialise, take part in sports, attend groups, etc.
 - This is all having a **detrimental** effect on their mental health.

Mental Health Risk Factors

Pre-migration	Peri-migration (asylum)	Post-migration (resettlement)
Exposure to violence	Disruption of school or work	Stigma & perceived discrimination
Family loss & separation	Unsafe living conditions	Family separation
Rape & sexual violence	Living in refugee camps	Multiple relocations
Unsafe living conditions/ War/ Persecution/ Abuse	Denial of rights during refugee process/ Violence/ Exploitation/ Sexual abuse/ Trafficking	Challenges navigating systems of care and Home Office processes – Risk of detention or deportation.
Family based trauma	Discrimination	Social exclusion
Discrimination	Socio-economic adversity	Language barriers/ Discrimination/ financial hardship

Trauma-Informed Practice

- **Social workers** can play a vital role in recovery for traumatised unaccompanied young people.
- We need to understand how UASC see us as professionals.
- All therapeutic work needs to be taken at the young person's pace and not rushed for a tokenistic agenda which has the potential to do more harm than good.
- A child will need to see someone skilled in trauma-based therapies.
- Unaccompanied Young People have usually experienced multiple **ACEs**:
- There should be no generalisations about Unaccompanied Young People
 - No two children or cultures are the same.
- **Resilience & sensitivity** affect how individuals react to trauma.
- Young people may have a lack of knowledge on mental health needs:
 - **Stigma & fear.**

Education

- Schools & colleges are often a safe and important place for young people, where they will first start **integrating** in a meaningful way;
- Some schools/colleges are used to having asylum-seeking, refugee & migrant young people attend and some schools have very little **diversity**.
- Schools/colleges are in a good position to support children with mental health needs & to facilitate feeling of broader **acceptance**;
- Unaccompanied young people want the same things as every other child in education – To feel **accepted, to make friends & to learn**.
- **Remote learning** in the pandemic is particularly difficult for young people who do not speak English as their first language and often resources provided online can be difficult to navigate.
- College or school **closures** mean that young people can not learn English & therefore can not progress in other forms of education and integration.

Sociological Context

- When the young people move here, they become part of a **minority ethnic community** in our society & so we must account for this in our practice.
- A key feature of anti-discriminatory practice & anti-racism in particular is that of empowerment. We aim for our practice to help service-users to gain as much **control** as possible over their lives & circumstances.
- In social work with minority ethnic communities, we must ensure that assessment & intervention do not hinge on negative **stereotypes**. We need to reflect on the stereotypes that exist for refugees, asylum-seekers & migrants in order to practice in a culturally sensitive & anti-discriminatory way.
- Combating racism involves **challenging** racist comments, actions or attitudes in others & in our social work systems.
- Social work with Immigrant, asylum-seeking & refugee communities is, like all social work, a **political** and sometimes controversial act.
- Northern Ireland has continually increasing levels of hate crime at present.

Developing Culturally Competent Practice

- **Cultural competence** has its roots in social action, social justice & advocacy which all hold relevance for anti-oppressive & anti-discriminatory social work practice.
- It is vital that we take time to learn about & account for each service-user's **specific & unique cultural needs**.
- Be **self-aware** – remember to account for the influence of your personal cultural values and willing to challenge your own ideas.
- Be mindful of what **language** you are using & avoid a blanket approach for all BAME/migrant service-users.
- Do not make **assumptions** because you perceive they come from a similar background to another person.
- Be **flexible** & think outside the box especially when using existing frameworks & tools.

Ethnically Sensitive Social Work

- **Oppression, discrimination & relative powerlessness** are common themes across all minority ethnic groups.
- The discourse around Brexit , racism in our mainstream media, the continued rise of the far right, as well as other factors have fuelled and an increase in **anti-immigrant sentiment** in our society.
 - This must be recognised & challenged by our profession.
- Racism is a complex system of **power & powerlessness**, which can be seen in the differential outcomes for less powerful groups accessing services in health, welfare, education, housing & the legal and criminal justice system.
- Social work has traditionally **neglected** to address the impact of racism on minority ethnic communities.
- When resources continue to become stretched & further political crises unfold, migrants have already been demonised as the convenient scapegoats. **Social work in NI must challenge this in the coming months of the pandemic.**

Working with Interpreters

- Culture: a shared way of seeing, thinking & doing.
 - **Language is a central part of culture.**
- Offering interpreting services is **necessary** in practice with people who do not speak English as a first language.
- Interpreting gives us more time to think, speak slowly & choose words carefully.
- **Nuances** can sometimes be lost in translation.
- Interpreting can help to break up the tension in a room.
- **Time required** for meetings is much longer than without interpreter
- Some professionals are often not used to working with interpreters & some are not willing to use them.
- Anecdotally, we have seen the Covid-19 pandemic being cited as a reason to not use interpreters in some health & social care services.
- UK Government **austerity** project & **hostile environment** agenda can feed in to a professional culture of viewing interpreting as an unreasonable extra cost for a service & extra work for professionals.

Social Work with Migrant Communities: Moving Forward

- Many factors place social work with refugees, asylum-seekers & migrants to the centre of the modern social work practice:
- The number of people who are **displaced** worldwide;
- “The progression of social and human development creates causes for emigration. Eg. **The Climate Crisis**;
- **Social factors within host societies** determine the integration prospects of refugees;
- Social Workers must remain **resistant** to creeping forms of surveillance & control for immigrants, asylum-seekers & refugees;
- Defending the rights of these groups is also about defending the **autonomy of our own profession** & fulfilling our professional duty to deliver services to all who need them.
- Championing the rights of those who are consistently **silenced** and **oppressed** is inherent to the role of social workers.

Thank you for your time!