

Adverse experiences of  
Unaccompanied Asylum Seeking  
Children (UASC) in transit  
and the impact on their mental health needs and emotional  
wellbeing: *United Kingdom perspective*



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# Background

An unaccompanied asylum seeking child is a person under 18, or who, in the absence of documentary evidence establishing age, appears to be under that age, is applying for asylum in his or her own right and has no relative or guardian in the United Kingdom.

*UK Home Office, 2017*



A child or young person seeking asylum without the presence of a legal guardian.

# Background



10%

UASC applications represent 10% of all main applications for asylum in the UK

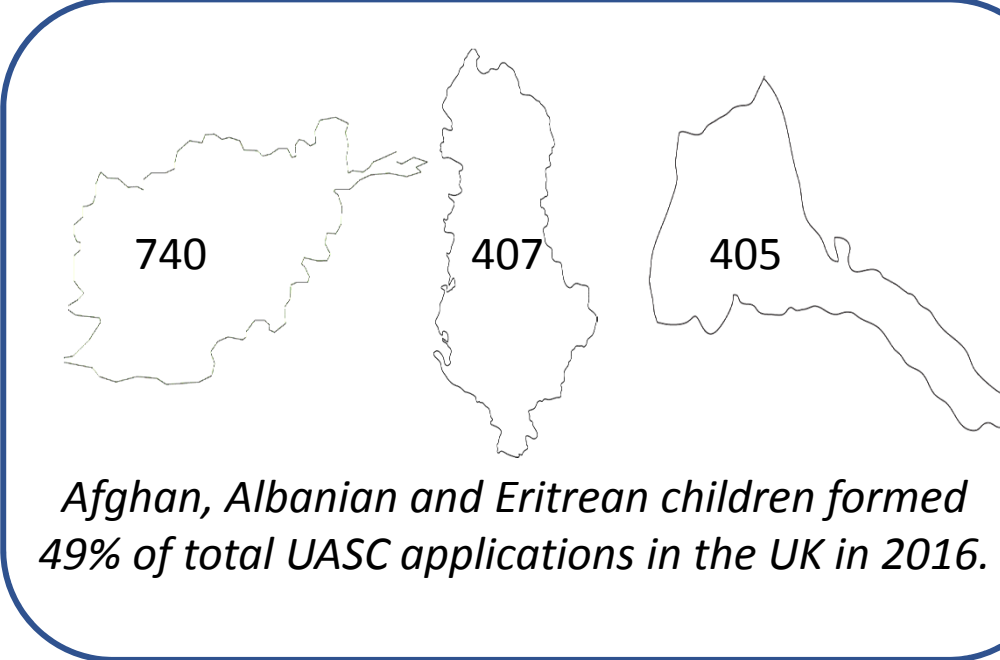


~13,500 -16,600

Unaccompanied and separated children living in the UK.

	2008	2015	2016
<i>Number of UASC applicants per year</i>	4060	3253	3175 (↓2%)

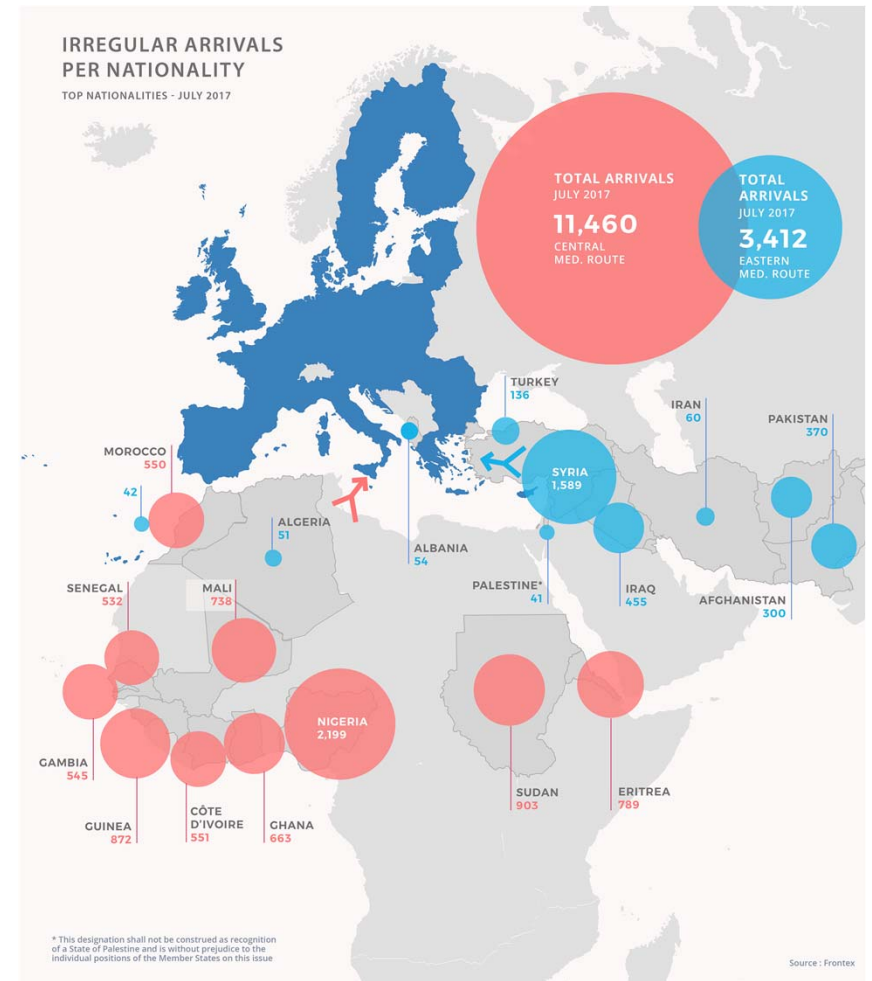
## UASC in the UK: Countries of Origin



Connolly, H., Crellin, R. and Parhar, R. (2017). An update to: Cut off from Justice The impact of excluding separated and migrant children from legal aid. [online] The Children's Society. Available at: [https://www.childrenssociety.org.uk/sites/default/files/cut-off-from-justice\\_the-impact-of-excluding-separated-migrant-children-from-legal-aid.pdf](https://www.childrenssociety.org.uk/sites/default/files/cut-off-from-justice_the-impact-of-excluding-separated-migrant-children-from-legal-aid.pdf) [Accessed 16 Sep. 2017].

# Problems faced by children in transit

- Vulnerable to violence and abuse, including from smugglers and traffickers
- 8/10 unaccompanied teenagers passing through Sahara (Central Mediterranean Route) are subject to trafficking and/or exploitation - 2/10 travelling through Asia and Eastern Europe (Eastern Mediterranean Route).
- Vulnerability increases for those with less formal education, younger children and those travelling alone. Racism is also a factor.



# UK Legal status and responsibilities



Children Act 1989

UASC in the UK should be taken into local authority care under section 20 of the **Children Act 1989**; therefore provision for these children should be the same as for any other “Looked After” child in the UK



Comprehensive initial health assessment recommended for all Looked After Children by time of first review at 28 days, then annually

*Department of Health guidance (2002,2009)*

# Initial Health Assessment

- Holistic assessment conducted in the UK by healthcare practitioners – in our centre performed by paediatricians using a structured proforma
- Child and carer interviewed separately, then together with social worker – in presence of interpreter



# Mental health assessment

other people's feelings
active, cannot stay still for long
of headaches, stomach-aches or sickness
with other children (treats, toys, pencils etc.)
er tantrums or hot tempers
tends to play alone
ient, usually does what adults request
often seems worried
one is hurt, upset or feeling ill
eting or squirming
good friend
th other children or bullies them
down-hearted or tearful
by other children
d, concentration wanders
gy in new situations, easily loses confidence
r children
peats
illied by other children
rs to help others (parents, teachers, other children)
ut before acting
ne, school or elsewhere
with adults than with other children
asily scared
ugh to the end, good attention span

Formulated in conjunction with the Child and Adolescent Mental Health Service (CAMHS)

- Post Traumatic Stress Disorder (PTSD) & mood disorder screening
- Strengths and Difficulties Questionnaire (SDQ)
- Exploration of issues related to culture, religion, coping strategies and sources of support

**ASSESSMENT OF EMOTIONAL AND PSYCHOLOGICAL WELL BEING**  
 SDQ should ideally be completed as may be helpful if Key worker knows the young person

**2. POST TRAUMATIC STRESS DISORDER AND DEPRESSION SCREENING**  
 To the Child ;  
 Can you tell me how all that you have experienced has made you feel?

**(a) Post traumatic stress reactions:** *In particular, can you tell me about the following reactions that many young refugees experience?*

*Do you have distressing memories or 'flashbacks' of past events that upset you?*  
 (Describe)

*Do you get distressing nightmares?*  
 (Describe)

*Do you avoid people or situations that could remind you of what you experienced?*  
 (Describe)

*Do you get symptoms such as racing heart, sweaty palms or feeling dizzy when reminded?*  
 (Describe)

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**(b) Low mood/change in mood**  
*How do you feel most of the time?* Happy / Sad / Other.....  
 (Describe)

*Has what you have experienced affected your temper?* Y / N  
 (Describe)

*Do you have difficulties sleeping?* Y / N  
**Getting to sleep / waking early / restless / sleepwalking / nightmares / other**  
 (Describe)

*Do you have any difficulties eating?* Y / N  
**Poor appetite / overeating / other**  
 (Describe)

*Have you ever thought about / made plans about harming yourself if you feel very hopeless?* Y / N (Describe circumstances)

*How do you think the future will be?* Same / better / worse  
 (Give reasons)

**(c) Worries**  
*What sorts of things do you worry about?*

**(d) Coping and Support**

# Objectives

- Evaluation of screening for mental health needs as part of UASC statutory health assessment
- Profile of factors in transit affecting mental health needs
- Profile of mental health difficulties seen – to guide referral

# Methods

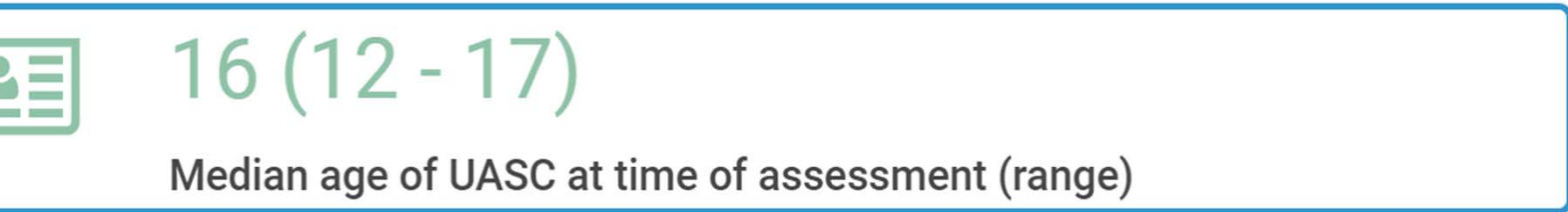
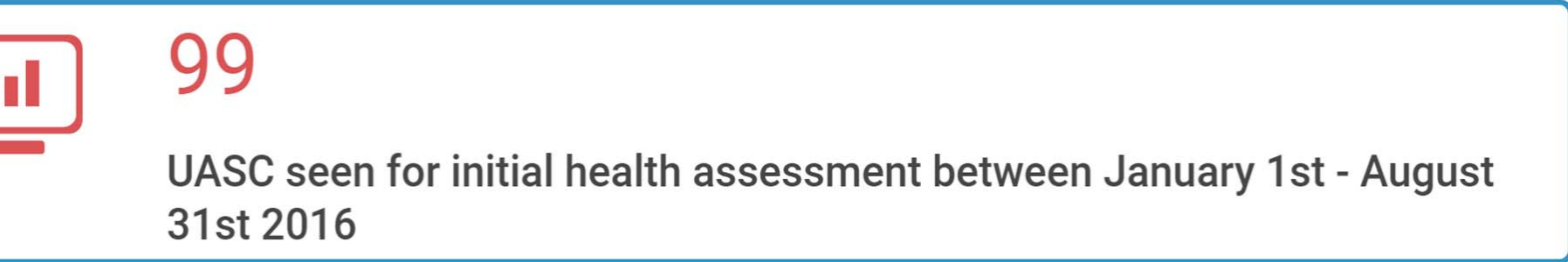
- Retrospective review of records of all UASC referred to a clinic run by a local authority in London between 1<sup>st</sup> January – 31<sup>st</sup> August 2016

# Results

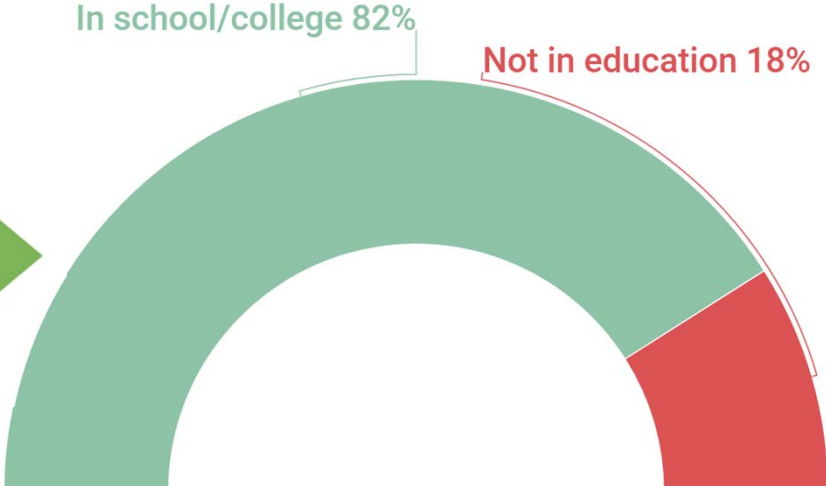
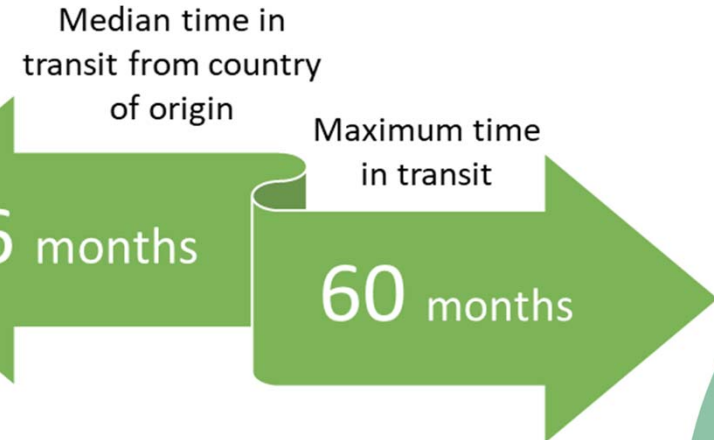
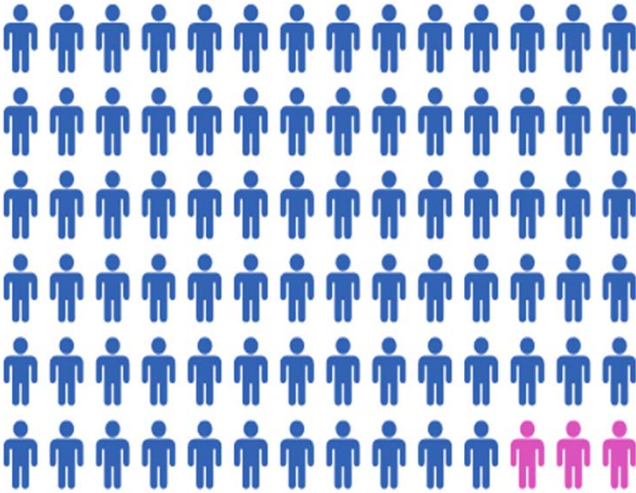


UNICEF, 2017

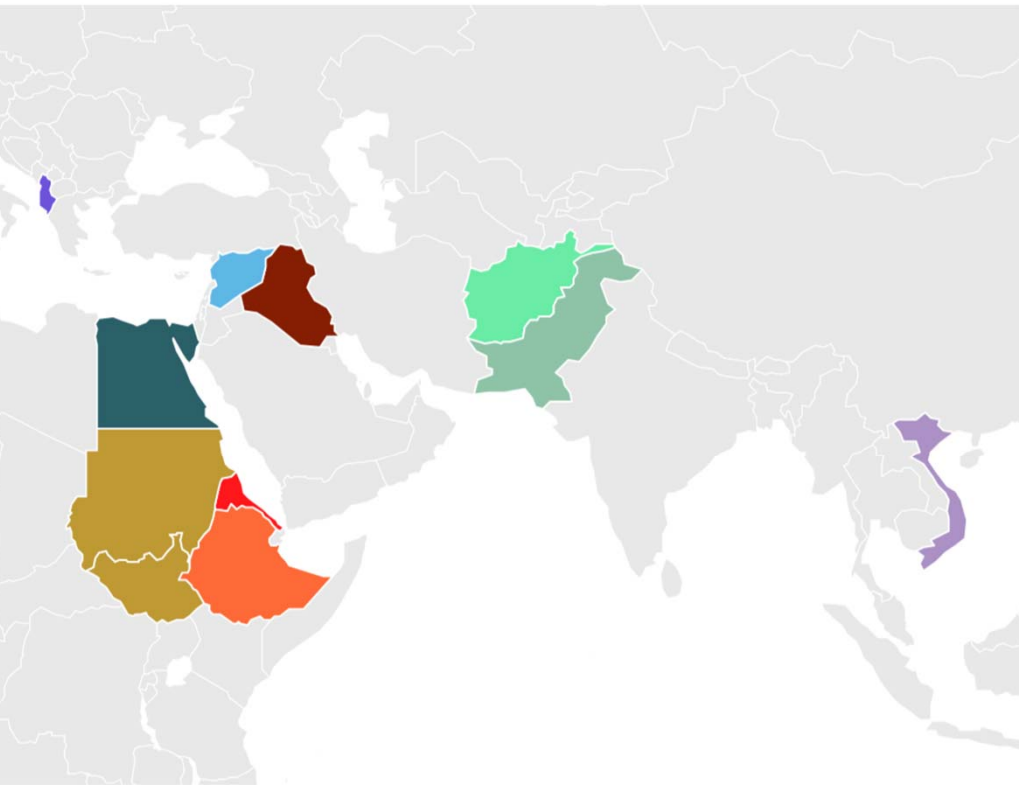
# Results



**96% male**



# Countries of origin



- Afghanistan
- Eritrea
- Sudan
- Syria
- Vietnam
- Albania
- Ethiopia
- Iraq
- Pakistan
- Egypt
- South Sudan



74% of our cohort were Afghani or Eritrean

# Adverse experiences



*51% of children reported trauma experienced en route to the UK*



38% detained

32% beaten

12% tortured

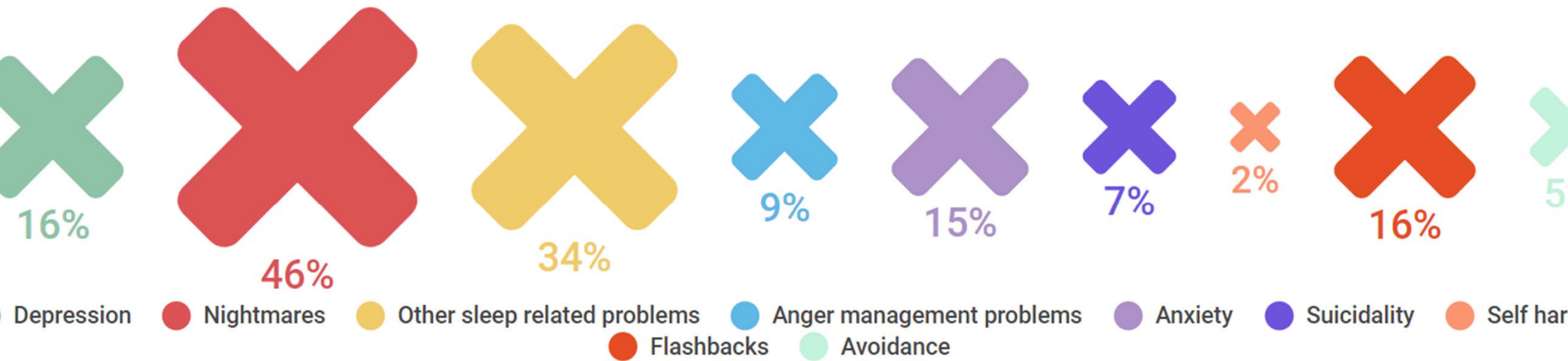
1% sexually assaulted


*46% percent had reported the death of a close family member*


*75% percent report no current contact with any family member*

# Mental health sequelae

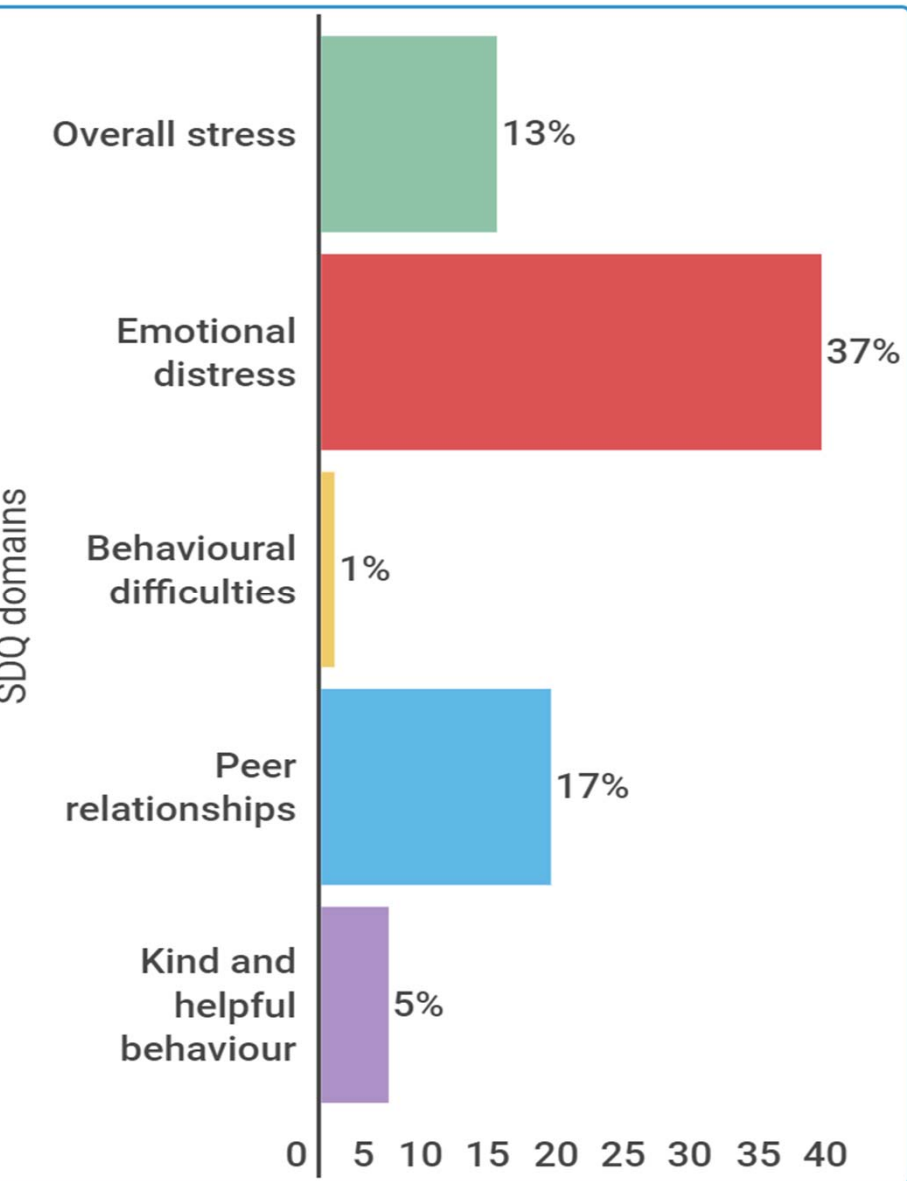
100% were screened for MH needs



 **75%**  
Reported at least one symptom suggestive of PTSD, anxiety or depression

 **43%**  
Accepted a referral to the Child and Adolescent Mental Health Service

**of UASC with Self reported SDQ scores outside of the normal range in each domain**



There was a statistically significant association between adverse experiences reported in transit to the UK, and elevated score for emotional distress on the self reported SDQ ( $p=0.0003$ )

	Normal SDQ score for emotional distress	Elevated SDQ score for emotional distress	Total
No reported adverse experiences in transit	40	8	48
Adverse experiences reported in transit	25	26	51
<b>Total</b>	<b>65</b>	<b>34</b>	<b>99</b>

*Fisher's exact test used to test for association*

# Summary and next steps

- UASC are by definition a vulnerable group due to adverse life experiences and lack of social support
- Many exposed to further trauma while travelling to the UK – this has an impact on their mental health needs; many warrant referral to specialist mental health services



## Next steps:

- Ensure timely health review in line with statutory guidelines
- Advocate for initiation of early support by tier 2-3 Mental health services
- Continue to encourage normalising activities e.g. sports, social, religious and educational activities etc.



Thank you