SAFETY AND DIGNITY FOR REFUGEE AND MIGRANT CHILDREN:
Recommendations for alternatives to detention and appropriate care arrangements in Europe
Safety and dignity for refugee and migrant children: Recommendations for alternatives to detention and appropriate care arrangements in Europe

Child immigration detention takes place in at least 27 countries in the region despite the high-level commitments to end detention of children in Europe, the current standards of international law, the unequivocal evidence of its devastating impact on children’s health and well-being, and the significant financial and administrative costs involved.

The detention of children is also occurring despite the number of non-custodial alternative practices already in place in the region, which provide viable, cost-effective and protection-sensitive options, and which are beneficial both for the hosting States and for the children and families concerned.

Detaining children has a profound and negative impact on child health and well-being and can have a long-lasting negative impact on children’s cognitive development. Placement in detention is known to exacerbate psychological distress, in particular for children who have faced violence before, during or after their journeys to Europe.

This advocacy brief was jointly produced by IOM, UNHCR and UNICEF based on a desk review of practices in 38 European States in relation to the detention of asylum-seeking, refugee and migrant children, either upon or after arrival, for reasons relating to immigration or asylum. For the purposes of the review, “detention” was used to refer to complete restriction of movement.

This advocacy brief seeks to reiterate the continued concerns of IOM, UNHCR and UNICEF in relation to the use of child immigration detention, and to put forward and urge for practical alternatives and appropriate care arrangements for children based on existing promising practices in the region.
1. THE IMPACT OF CHILD DETENTION

Children held in detention are at risk of suffering depression and anxiety and frequently exhibit symptoms consistent with post-traumatic stress disorder, such as insomnia, nightmares and bedwetting. Reports have also found excess rates of suicide and self-harm among children in detention.²

Persons in detention, including children, are also at particular risk of COVID-19 infection due to the confined space, existing preconditions and contagion risks.³ When detained, children can also be vulnerable to neglect and abuse, including sexual violence, especially if staffing levels or care have been affected by the pandemic or containment measures.

These types of harm may occur even if the detention is relatively short-term, if children are detained with their families, and if it is taking place in so-called “child-friendly” detention facilities.⁴

2. THE QUESTION OF EFFECTIVENESS

In practice, however, alternatives to detention which use case management based on the best interests of the child to support engagement in asylum and immigration processes often achieve higher rates of case resolution, while at the same time ensuring children’s well-being.⁵

Detention has also been put forward by certain States as a measure for the child’s own protection. However, in light of its documented devastating impact on children, detention is never in a child’s best interests and should not be presented as a measure of protection.

Unaccompanied asylum-seeking and migrant children should be accorded the same protection, support and care as national children without parental care, and should not be deprived of their liberty simply because they are unaccompanied. States that are implementing community-based and non-custodial alternatives to detention for children and families have found these to be more cost-effective and to result in lower rates of absconding and higher rates of compliance with procedures.⁶

In fact, alternatives to detention have been shown to achieve up to 95 per cent compliance rates and up to 69 per cent voluntary and independent return rates for refused cases.⁷ Research has also pointed to the integration benefits of placing migrant and asylum-seeking children in foster care, including to learn the local language and have access to individual support and guidance.⁸

Investing in appropriate care arrangements is therefore a more effective means of ensuring the protection and safety of children, keeping them off the streets while allowing them to develop more harmoniously, and at the same time ensuring a more effective approach to migration.

Over the last two decades, child immigration detention has increasingly been used as a strategy for combatting irregular migration.⁵

Unaccompanied boys from Afghanistan and Syria in Section A of the Moria reception centre. © UNHCR/Gordon Welters

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3. HUMAN RIGHTS DIMENSION

Children should not be detained for immigration-related purposes, irrespective of their legal or migratory status or that of their parents.10

Detention is never in a child’s best interest, as clearly articulated by the Committee on the Rights of the Child, the European Court of Human Rights, as well as other human rights courts and authorities.11 Article 37 (b) of the Convention of the Rights of the Child states that no child shall be deprived of his or her liberty unlawfully or arbitrarily.

The provisions on detention of children as a “measure of last resort” in this Article may apply to children in conflict with the law, but are not applicable to immigration proceedings and therefore cannot be used to justify immigration detention of children.12

Moreover, the child’s best interest not to be detained also extends to their family, as the Convention of the Rights of the Child protects the child’s right to family and states that children should never be separated from their parents or guardians unless it is considered in the child’s best interests to do so.13

Through the Global Compact on Refugees and the Global Compact for Safe, Orderly and Regular Migration, States also reiterated their commitment to provide and develop “non-custodial and community-based alternatives to detention”, in particular for children, with the ultimate aim to “end the practice of child detention in the context of international migration”.14

The continued use of child detention in the European region is at odds with the commitments made internationally and regionally to end this practice.15 Over the last two decades, the European Union (EU) has demonstrated a strong commitment and called upon Member States and accession countries to strengthen the protection of children in migration within national child protection systems.

The EU’s policies call on its Member States to “stop the expansion of institutional care settings for children without parental care; promote quality, community-based care and foster care within family settings” and to promote alternative care, family support and integrated child protection systems.

The 2017 Communication from the Commission to the European Parliament and the Council on the protection of children in migration included in its key actions the need to ensure a range of alternative care options, including family-based care.16

The EU Reception Conditions Directive also requires the placement of unaccompanied children with adult relatives, a foster family or in an accommodation centre suitable or with special provisions for children.17

In addition, the recent EU Child Rights Strategy and Child Guarantee reiterated the commitment “to make available and increase the use of viable and effective non-custodial measures, in line with EU acquis, and ensure that detention is used only as a last resort and for the shortest appropriate time”.18
The lack of disaggregated and harmonized data makes it challenging to fully understand national child detention practices in Europe. For example, while Eurostat publishes data specific to children in migration within the EU, there is currently no obligation on national authorities to report data on child detention.

This lack of data makes it difficult to monitor progress in policy implementation related to ending the detention of children. It also makes it less likely that child detention, including the length and conditions of detention, is being effectively monitored at national level in all States.19

In response to this information gap, IOM, UNHCR and UNICEF conducted a joint desk review of practices related to child immigration detention across the European region in 2021. The review indicated that among the 38 countries reviewed:

- The detention of children in families is permitted by the national legal framework in 27 countries, while the detention of unaccompanied children is permitted by the national legal framework in 19 countries.
- Among these countries, the majority (26 countries) implement pre-removal detention of children. In 18 countries, children are detained upon entry, in eight countries while asylum procedures are ongoing, in five countries while age assessment procedures are ongoing, and in 16 countries while awaiting other procedures.
- Within the countries where child immigration detention is permitted by the national legal framework, only two countries were reported not to be detaining children in practice.
- Almost all of the countries detain children in immigration detention facilities rather than in criminal detention facilities.
- In nine countries, immigration detention of children was not permitted by the national legal framework.

The UN Guidelines for the Alternative Care of Children encourage the use of family-based care, with residential care limited to settings where this would be specifically appropriate, necessary and constructive for the individual child concerned and in his, her, their best interests.21

While the needs of the individual child, as well as the availability of resources and support, may require the use of residential care facilities in some contexts, the Guidelines highlight that large facilities (institutions) should be avoided and call for implementation of a de-institutionalization strategy which aims for their progressive elimination.

Due to the documented negative impacts of institutionalization on children, institutions should be replaced with quality care, including family and community-based care and, where relevant, resources should be allocated to family and community-based care services with adequate training and support for caregivers and robust screening and oversight mechanisms.

In addition to appropriate care arrangements, a range of international and regional standards and guidance point to minimum safeguards, critical to ensure the protection and best interests of children.22 These include:
In Cyprus, semi-independent housing structures for unaccompanied children over 16 years old are being managed and implemented by IOM in partnership with the Ministry of Labour, Welfare and Social Insurance of the Republic of Cyprus. This programme aims to ease the difficult transition to adulthood for unaccompanied migrant children through semi-independent living and by ensuring protection and access to social services at local and national level.

In France, a number of departmental councils provide support for independent living arrangements for older children, including unaccompanied migrant, asylum-seeking and refugee children, in collaboration with non-governmental organizations (NGOs), such as France Terre D’Asile and Apprentis d’Auteuil. Children are accommodated together in small groups and provided with medical care, psychosocial support, legal support, education and vocational training. Staff are trained in social work and how to respond to the specific needs of refugee and migrant children. The aim of these services is to assist young people towards autonomy, including with assistance after turning 18 years old.

In Greece, SIL apartments hosting a maximum of four children each are provided for children over the age of 16 (93 per cent of children arriving in Greece are over 14 years old). The SIL concept was initiated and piloted by UNHCR and UNICEF in 2018, scaled up in collaboration with the Ministry of Labour, IOM and NGOs, and institutionalized in 2019-2020 through Ministerial decisions. Currently, there are more than 500 SIL placements which can host 23 per cent of the unaccompanied children in Greece.

Alternatives to detention are already in place for children and families in various European countries. While concerns about children absconding from asylum and other immigration procedures remain, these practices have clearly demonstrated how appropriate care and linked services and support can be implemented towards better protection for asylum-seeking, refugee and migrant children. A few of these positive practices are highlighted below, selected based on their reported protective and beneficial outcomes for the children concerned, as well as the positive feedback from staff, partners and other stakeholders in the respective countries.

**a) SUPPORTED INDEPENDENT LIVING**

Supported independent living (SIL) is where young persons are supported in their own home, a group home, hostel, or other form of accommodation, to become independent. SIL can host 4-6 children in long-term accommodation until adulthood and is usually used for older children, acknowledging their capacities to also care for themselves to an extent. Social workers and support services are available, but not with 24-hour supervision – with the aim of preparing older children for independent adulthood.23

In Bizaia, Catalunya and other regions of Spain, SIL apartments host migrant, asylum-seeking, refugee and Spanish children between the ages of 16 and 18. Four to six adolescents live semi-autonomously in each apartment under supervision of a director and a social educator. In addition to accommodation, the programme provides education, social inclusion measures, job counselling and employment services, in coordination with community services and civil society associations.

**b) FOSTER AND FAMILY-BASED CARE**

Foster and family-based care is when asylum-seeking, refugee and migrant children are placed in a domestic environment of a family other than the children’s own, which has been selected, qualified, approved and supervised for providing such care.

In Greece in 2015, with the support of UNHCR, the NGO METAdrasi piloted a foster care programme specifically for unaccompanied refugee and migrant children, in collaboration with relevant government entities and the public prosecutor office. A Memorandum of Cooperation was signed between UNHCR and the Ministry of Labour, implemented through METAdrasi, which aligns this project with the national foster care system. The collaboration includes capacity-building of staff involved in the foster care of refugee and migrant children, training and support for foster parents, and awareness-raising among refugee communities on the possibility of becoming foster parents.
In Italy, there are several programmes for foster and family-based care for younger children (while children between the ages of 16 and 18 can be hosted in SIL or small group homes with a care operator). For example, the Terreferme project matches unaccompanied migrant, asylum-seeking and refugee children in Sicily with foster parents and ensures continuous support to the family and the child throughout the placement. MetaCometa Onlus, an association of some 50 families, also provides foster care for unaccompanied migrant and refugee children upon their arrival in Sicily, working with psychologists, social workers and cultural mediators. In Rome, the Movement of Foster and Supportive Families (MFaeS) provides individually tailored solutions for migrant and Italian children, with more than 50 foster parents and supportive families trained to care for children.

In the Netherlands, some 40 per cent of unaccompanied migrant, asylum-seeking and refugee children are in family-based care (1,548 children in 2018). Nidos, the organization responsible for guardianship, places in foster care children under the age of 15, as well as those over the age of 15 who have specific needs (while other children older than 15 are accommodated in small living units of four children each, with a carer present 8 hours a week).

A comprehensive matching process is undertaken to identify the family that can best meet the child’s needs. Social workers are responsible for the recruitment of foster families, matching, and monitoring and supporting the foster placement. Nidos also has temporary foster carers who live close to the asylum application centre and are available to provide temporary care for children while they await longer-term foster placement.

Finally, in Belgium, Germany and Greece, the U-CARE project contributes to the development and improvement of alternative non-institutionalized care systems for unaccompanied migrant children. This project, funded by the EU and coordinated by IOM, aims in particular at mobilizing, recruiting and training foster families, with a specific focus on those with a migration background, as well as training professionals working within national child protection systems. The project also puts considerable emphasis on (trans) national exchange of good practices and awareness-raising among the general public on the importance of family-based care and residential care alternatives.

C) SUPERVISION AND CASE MANAGEMENT AS ALTERNATIVES TO DETENTION

Child protection case management is a way of organizing and carrying out work to address an individual child’s (and family’s) needs in an appropriate, systematic and timely manner, through direct support and referrals.

In Germany, unaccompanied asylum-seeking and migrant children are provided the same services as other children without parental care, supported by the Child and Youth Welfare Offices. The Federal Government reports annually on the situation of “unaccompanied foreign minors” in Germany in line with its legal obligations to monitor implementation of the 2015 Act to Improve the Accommodation, Care and Support of Foreign Children and Adolescents.24

National statistics on unaccompanied children in the Child and Youth Welfare System have been produced since 2018.26

In Iceland, the Barnahus model accommodates unaccompanied children in an arrival centre immediately following their arrival, as a period of rest during which they access services and receive information to understand the processes through which they are required to go. The model promotes a child-friendly and multidisciplinary approach by offering a range of services to children in one place, including psychological, health and social services. To avoid re-victimization and multiple interviews, children are interviewed collaboratively, engaging both asylum authorities, child protection services and the guardian of the child, and encouraging child participation in the process. The initial best interests’ assessment informs subsequent services and care provided to the child and are intended to lead to safe and long-term solutions for the child. The benefits of the Barnahus model have been widely acknowledged, and subsequently been adopted by several other countries.26

In Ireland, unaccompanied children are referred to the Child and Family Agency (CFA, also known as Tusla) Social Work Team for Separated Children Seeking Asylum and a child protection needs assessment is conducted by a social worker. The outcome of this assessment informs the child’s individualized, statutory care plan, and a social worker, assigned to the child immediately following the intake assessment, is responsible for management and implementation of the plan.27

Children over the age of 12 are placed in one of the three residential intake units and accommodated there for a few weeks while determining the most appropriate placement (which could be a foster placement or supported lodging). There are strong links between the Social Work Team and local teams to ensure a smooth transition from intake units to local placements. Children Residential Centres are supported by social workers on a 24-hour basis, as well as a range of health services, including general practitioners, therapists, and psychologists.

In Serbia, a successful guardianship model has been in place since 2017 through cooperation between civil society and government services. Each guardian has around 20 children in their care and the guardians have specialized knowledge about unaccompanied children and are continuously present and available to them.

Guardians initiate and conduct best interests assessments and coordinate best interests determinations for the asylum interview, facilitate access to services (such as health and psychosocial support), and provide children with reliable information about the asylum process and country, seeking to make them feel welcome and to reconsider any plans for onward movement.
6. RECOMMENDATIONS

European States should continue to expand on alternatives to detention for children and families, and pursue appropriate care arrangements for unaccompanied children in line with the best interests of the child. The following measures are important steps towards this end:

Enhancing data collection and monitoring:

1. National statistics agencies should enhance data collection on child immigration detention and alternative care, and make this data publicly available, systematically disaggregated by age, sex, country of origin, citizenship and disability status, to facilitate monitoring.

Expanding alternatives to detention and appropriate care arrangements:

1. States should further enhance efforts to realize the commitments made to end immigration detention of asylum-seeking, refugee and migrant children, including by introducing national legislation prohibiting the detention of children for immigration reasons and its implementation in practice.

2. States should adopt and further expand on community-based and non-custodial alternatives to detention for children while their asylum application or immigration status is being processed, and pursue appropriate care arrangements for unaccompanied children, drawing from the range of cost-effective and child-friendly practices already in place in other European countries.

3. Within the EU, the European Commission should encourage the prioritization of alternatives to detention for children and families, as well as appropriate reception conditions and care arrangements for unaccompanied children within their national programming, including with support of the Asylum, Migration and Integration Fund (AMIF)\(^28\) and in the implementation of the European Child Guarantee.\(^29\)

Investing in reception conditions and national child protection systems:

1. States should address shortages and lack of capacity in child protection and social services and ensure timely and qualified guardians and foster care for all unaccompanied children. A strong, well-resourced and trained network of guardians and foster carers can respond to the needs of national and non-national children alike, preventing unnecessary placement of children in institutions and providing a vital resource to prevent child immigration detention.

2. States should enhance reception conditions, in particular for families and children, and ensure timely identification, and referral of children to national child protection authorities and services, including health services, mental health and psychosocial support, as well as family tracing and reunification. Adequate reception conditions and access to basic services needs to be provided to families and children, including during potential COVID-19 quarantine or isolation, or during any other emergency.

International cooperation and support:

1. International organizations and NGOs should offer further support and technical guidance to States on the implementation of alternatives to detention for children and families, guardianship and appropriate care arrangements, such as foster and community-based care, and supported independent living.

2 Ibid.


8 International Detention Coalition (IDC), There Are Alternatives, available at: https://idcoalition.org/publication/there-are-altern- atives.html.


13 UN General Assembly, Convention on the Rights of the Child, 20 November 1989, United Nations, Treaty Series, vol. 1577, p. 3, Article 3(1) and (7), available at: www.refworld.org/docid/3a68b3b80.html; and UN Committee on the Rights of the Child, General Comment No. 14 on the right of the 2018 to have his or her best interests taken as a primary consideration (Article 3, paragraph 1), para. 59.


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27 Ibid.

