



Marjan Schippers

CHILDREN ON THE MOVE

**A guide to working with
unaccompanied children in Europe**

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Colophon

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©European Guardianship Network, February 2021

Published by: European Guardianship Network, Maliebaan 99, 3581 CH Utrecht

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Special thanks to the members and partners of the European Guardianship Network (EGN) and Terry Smith (project manager EGN) for their contributions to the content of this guide and to Gerrit Tigelaar and Leyla Khadraoui for their help in editing, translating and proof reading early drafts. And finally, thanks to Liedewij de Ruijter de Wildt for her help in keeping everyone focused on their tasks and to Tin Verstegen for his vision and desire to create this guide.

Graphic design: Gerard van der Krogt, Utrecht

ISBN: 9789464351088

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Funded by the
European Union



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Preface

It is a sobering thought that there are probably more displaced persons and refugees currently than at any other time in history. The United Nations High Commissioner for Refugees (UNHCR) estimates a total figure in the region of eighty million displaced people worldwide and further estimate that approximately forty percent of this figure are children.

These children are likely to have experienced hardship during their journey to Europe. Considerable numbers will have experienced abuse and will also have struggled to continue the route full of risks and dangers, fears and threats. They then arrive in a strange country where systems, language and culture can be overwhelmingly different. They have to navigate a complex, lengthy and often changing system with very stressful procedures in order to regularize their stay in Europe.

Upon arrival in Europe unaccompanied children face a triple jeopardy – as children, who have age related vulnerabilities and may experience rights violations; as migrants who face discrimination, stigma, marginalization and suffer from limited access to services and opportunities; and as they are unaccompanied they lack the impact of a nurturing adult who can guide and support them and both act in, and promote, their best interests.

However, these children are also resilient young people: they succeeded in reaching Europe and are full of hope and belief that they can make it here. Although they often went through a lot of terrible experiences, they are not losers but winners. The best way to help them, still children, on their path to adulthood is by providing them with safety and trust and, by showing an interest and commitment to them, to guide them towards a realistic future perspective. They should be engaged with respect and in a manner which will stimulate their resilience, agency and autonomy in a culture and trauma-sensitive way.

The publication of this guide is thus both relevant and timely. Based on nearly 50 years of direct experience gained by Nidos and experiences of the other members and partners of the European Guardian Network (EGN), it sets out the context and the challenges of working with this group of children. The guide offers insights into why unaccompanied children behave and react to events in different ways compared to children who have not experienced exile. It seeks to offer advice to those who work with unaccompanied children to address these challenges with the aim of equipping professionals to respond more appropriately to their needs, and in doing so it is envisaged

that standards of care and support will improve so that, ultimately, children will have better outcomes. Childhood is a short season and perhaps more so for unaccompanied children. It is hoped that this guide will contribute to making the season a little brighter and longer.

This guide was written by Marjan Schippers to whom I give a very special thank you. Sadly Marjan passed away in August 2021. We know that without her we would not have been able to produce this guide. I am also grateful for the invaluable input from the members and partners of EGN and the project manager of EGN, Terry Smith.

Tanno Klijn
Chairman of the board of EGN

Introduction

The large number of refugees who travelled by foot, in crowded boats or hidden in trucks to Europe in 2015 and 2016, and the portrayal of the miserable conditions in overcrowded refugee camps on the Greek islands since that time, made and still make an impact on the consciousness of many people. Across all sections of society, professionally or otherwise, people have come into contact with refugees for the first time. This has led to questions, discomfort and challenges, as well as feelings of powerlessness and concern.

Among the refugees is a particularly vulnerable group: unaccompanied children. They left their country of origin without their parents. Sometimes they are accompanied by a family member, for example, a grandmother or an adult brother, but they do not have an adult with them who has parental authority. In other words, no one is legally responsible for them during their flight and subsequent stay in Europe. Unaccompanied minor is the legal term for this kind of child refugee, as stated in various European Union (EU) legislative documents. This heterogeneous group of children includes unaccompanied children from war zones, but also children from so-called 'safe countries of origin', such as Albania, and from countries in North Africa, such as Morocco and Algeria. It is highly unlikely that any of them will get residence permits in the EU. Whether they are eligible for reception or a work permit differs from country to country. Furthermore, some unaccompanied children are in Europe involuntarily, as victims of human trafficking.

Regardless of their background and origin, many unaccompanied children find themselves in similar circumstances. They are alone and underage, have left their home country and are seeking protection and shelter. But even though these children have a lot in common, they should always be seen as individuals.

This guide has been written for all those involved in the guidance and support of unaccompanied children. But also for anyone who is simply interested in how children deal with the enormous task of finding their way in an unknown country after going through war, poverty, flight, traumatic experiences, loss, uncertainty and uprooting. The content is based on the knowledge and years of experience of the many participating partners who now form the European Guardianship Network (EGN). Working with these children has given them all valuable insights into who the children are and what they need. The guide is therefore useful for guardians, social workers, mentors, teachers, professionals in the child protection system, and all others who may encounter this vulnerable group of children.

All children should be regarded as unique individuals, so there is no 'one size fits all' approach for this vulnerable and diverse group. The guide aims to offer the reader a better understanding of the children's strengths, needs and emotional baggage. Knowledge of their background, cultural differences, guidance needs, health issues and safety risks is indispensable. By combining the insights from different European countries, with their different perspectives, practical experience, knowledge and literature, this comprehensive guide provides the skills and insights that will help all professionals help the children. To ensure that each child is given the guidance and support, education, accommodation and treatment they need, so that by the age of 18 they are sufficiently resilient and independent to live life as an adult.

Methodology

This guide has been written to provide the basic knowledge and skills required for working with unaccompanied children. It is based on the book *Children, fled and alone* by Marjan Schippers (2017). Marjan was a child-psychologist at Nidos, the Dutch guardianship agency appointed by the government in 2002 to provide guardianship services for unaccompanied asylum seeking and refugee children. Marjan passed away in 2021.

Years of experience of working with this heterogeneous and ever-changing group of children has provided a wealth of information from coaches and mentors, guardians, behavioural scientists, teachers and other professionals. Their input originates from observations, encountering a variety of issues and, most importantly, many conversations with the children themselves. Certain phenomena are empirically supported by experiences, and therefore given as general statements. Examples of this are that children are often hungry and tired and find it difficult to trust others. Many of the stories and examples are given using pseudonyms but are based on cases encountered in the field that show many similarities.

All European countries have different working methods, so EGN members and partners provided valuable feedback and contributions to this guide, including examples and supporting literature. Additionally, European and international policy documents and academic publications have been used to substantiate the theoretical framework.

Reading guide

Chapter 1 describes why children leave their home country without their parents and what they experience during their flight to Europe. In Chapters 2 and 3, the child's main needs in the initial phase of their stay in Europe are considered. Chapter 4 deals with the physical health and, especially, the mental health of unaccompanied children. Chapter 5 examines the behaviour of unaccompanied children in the context of culture, experiences during their flight and the fact that they are cut off from their family.

Resilience and how it can be strengthened is also discussed. The children's future prospects, from return to integration, are discussed in Chapter 6, as well as the needs of young adults in this regard when they reach the age of majority. The final chapter focuses on the pedagogical guidance of unaccompanied children from an intercultural perspective. Guidance perspectives described in the previous chapters are presented in a structured and coherent way, and cultural sensitivity and intercultural communication are addressed too.

1

Children fleeing alone

Who are the children who flee to Europe without their parents? What is the reason for their flight and what precedes the decision to flee? Why do they flee alone and what do they experience during the journey?

1.1 Children fleeing to Europe without their parents

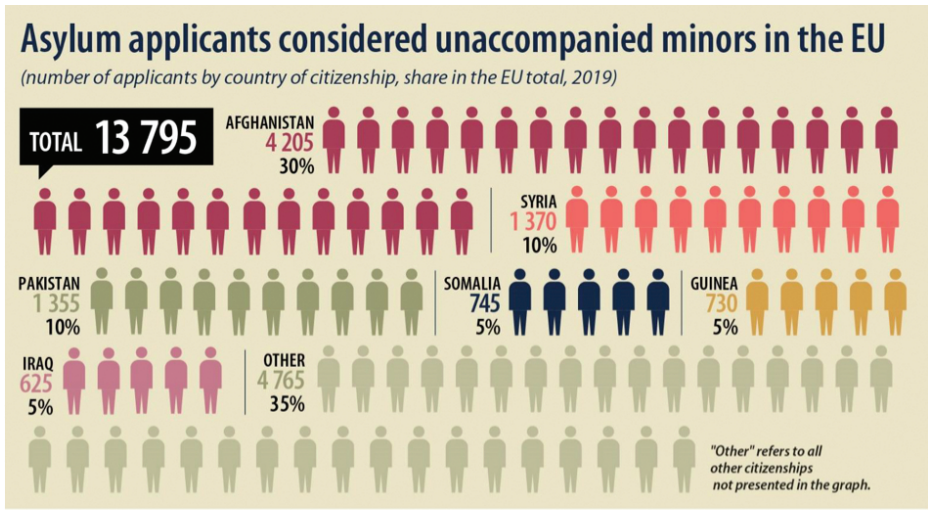
Unaccompanied children are those under the age of 18 who have fled their country of origin and apply for protection or reception in Europe. They fled without a parent who has legal authority over them. That does not always mean that they travel alone. Young children are often entrusted to a family member or acquaintance who is going to flee, or they travel together with an older brother or sister. In other cases, a so-called travel agent is asked to organise the trip, often with a significant payment.

The term 'human smuggler' is sometimes used instead of 'travel agent', as the flight often includes the illegal crossing of borders and therefore travelling illegally through countries. Young children are often brought to a relative in Europe by the travel agent. However, many unaccompanied children arrive in Europe alone, either because they left their country of origin on their own or because they lost their companion or family during the journey. Occasionally, very young children are found on the street. All they have with them is a telephone number of a parent in their country of origin, or of a family member in Europe who cannot be found.

Another group of children are those who did not flee but have been trafficked, lured to Europe or sold by their family to a trafficker. These children are often destined for prostitution, forced labour or other forms of exploitation. Although formal evidence is difficult to obtain, there are also indications that children have been trafficked for organ removal. When there were large numbers of refugee arrivals in 2014-2016, various refugee organisations expressed concerns about many refugee children who had gone missing in Europe. Children who went off the radar during their flight, and who no one ever heard of again. It is feared that these children are being exploited in some way, or that they have died. In

2015, Europol reported that, out of a total of 89,000 children who had arrived in Europe as unaccompanied refugees, 10,000 had gone missing (*Mention the unmentioned*, 2017). In 2018, the European Migration Network reported that more than 30,000 migrant and refugee children are estimated to have gone missing after their arrival in Europe (*Approaches to Unaccompanied Minors Following Status Determination in the EU plus Norway*, 2018).

The number of children fleeing their country of origin increased substantially during the peak of the refugee arrivals in 2014-2016. The UNICEF report *Uprooted - The growing crisis for refugee and migrant children* (2016) says that in 2015 nearly 100,000 unaccompanied children applied for asylum in a total of 78 countries. This is the highest annual number ever recorded. Figures from Eurostat for 2019 provide a clear picture of the group of children travelling alone in Europe. Of the 13,800 unaccompanied children who applied for asylum in Europe in 2020, two-thirds were aged 16 and 17 years old, 22% aged 14 and 15, and 11% younger than 14. Boys represented 85% of the total number. The children originated mostly from Afghanistan (30%), Syria and Pakistan (both 10%) plus Somalia, Guinea or Iraq (5% each).



(Eurostat press release, April 2020).

Increasingly, Europe’s borders are heavily protected, due to the large movement of refugees in recent years. This makes it more and more difficult for refugees to reach Europe. As a result, countries on the borders or edges of Europe that were previously only countries of first entry or transit countries, such as Morocco, Turkey and Serbia, are now becoming countries of destination. Other countries on the edge of Europe, such as Greece and Italy, have too little capacity to receive the refugees. Asylum procedures and the flow into Europe are therefore stagnating.

1.2 Why do children and young people flee their country of origin?

People generally flee war, persecution, poverty and hopelessness. From 2014 to 2020, many people fled the war in and around Syria. Most refugees initially stay in refugee camps in their own region. Only a small number try to come to Europe because of the hopeless situation they are in.

During that time, parents of unaccompanied children from Syria said they sent their children to Western Europe for fear of rape, abduction or recruitment by Islamic State (IS). Many Syrian children also come to Europe hoping that their family will be able to join them later, through family reunification procedures. Many Afghan children say that the family's decision to let them flee is a response to Taliban recruitment activities in their immediate area. Among these unaccompanied children are also victims of sexual slavery and child prostitution, often through the practice of keeping 'dancing boys' (bacha bazi) in Afghanistan.

A large number of the Eritrean unaccompanied children say they have fled the threat of lifelong conscription in their home country, and what they see as no real prospects for a better future. This was not always the family's choice, as the children say they kept their families out of their decision. They made the decision to leave together with others. For decades, children have also been fleeing Iraq. In recent years, mainly because of the fight against IS, but also to get away from conscription, female genital mutilation or honour-related violence.

There are other forms of persecution which make children want to escape. For example, being at risk in their own country because of (alleged or actual) homosexuality. Homosexual acts and relationships are punishable in many countries. In some countries, punishment could mean the death penalty, such as in Uganda and parts of Nigeria and Sudan (De Vries, 2014). People who belong to a minority group – religious or otherwise – such as the Yazidis in Syria, are sometimes forced to flee to escape persecution or extermination. The Yazidi children who arrive in Europe were severely traumatised by the 2014 genocide committed by IS in north-east Iraq. There are also children who escaped from an army or rebel militia in which they were forced to, for example, perform acts of war, and who received help so they could flee to Europe. Other children flee because of family-related and culture-related problems. There may be a threat of honour killing because their own or another family's honour has been violated. Or a child may want to avoid being subjected to female genital mutilation or a forced marriage.

People have been migrating for centuries in search of better opportunities. Today, accounts of poverty and hopelessness, such as in Albania, Pakistan or parts of Africa, are given as reasons to flee or migrate. Many young people from these areas try to reach

Europe in search of opportunities. For example, from 2017 to 2019 the number of children from North Africa increased significantly in Greece, Spain, France, Germany, Belgium and the Netherlands. Many of them grew up in severe poverty. They had to fend for themselves from a very young age, and had been living on the streets for years. For many, this started at the age of 10 or 11, but some children even said they had been living on the streets from the age of 5 or 6. These children in particular are often addicted to drugs, have had little or no education, and have survived through petty crime and sexual exploitation. They have almost no chance of being granted a residence permit, but do still hope for a better future. Other children from these countries fled to Europe when they were a bit older. Their parents often encouraged them to do so, because they did not see any prospects for the child in their country of origin.

Unaccompanied children arriving in Europe from Vietnam have also been the focus of some attention. For years, there have been concerns that these young people are victims of human trafficking. Generally, it is understood that they go to the UK on the assumption that they will find work there. It is difficult to build a lasting relationship with them, and as soon as they get the opportunity, the children go somewhere else. The tragedy with the refrigerated truck container at the end of 2019 in Essex (the UK), in which 39 Vietnamese people died as a result of suffocation, included children who were registered as unaccompanied children. This shows once again how much risk people are prepared to take.

Family reunification is often seen as a way to escape from war and other dangers. In a situation like this, a child is sent first to pave the way for reunification with parents, brothers and sisters. Financial resources are usually insufficient for the whole family to leave at the same time. The journey is also so dangerous, and therefore the chance of survival so slight, that they try to spread the risk by sending just one family member. European countries have been changing their family reunification policies in recent years in response to this. In effect, that means that some children do not go to European countries where family members are already living, because their choice of country is chiefly motivated by the prospect of successful family reunification. Distressing situations have been seen in the Netherlands that illustrate this. For example, a child lives alone in the Netherlands, rather than with their adult sister in another European country, because family reunification for parents, brothers and sisters in the Netherlands is possible, although it takes many years to achieve due to long and difficult procedures. Another example is of families who are scattered across the world because the situation in their country of origin forced them to leave for different destinations at different times. They then try to reunite in Europe because they believe there will be better opportunities for them there.

Once they arrive at the borders of Europe, most refugees – including children – want to travel on to the wealthier north-west European countries. They have heard of more opportunities there for asylum, family reunification, work and accommodation. And that there is better protection, care and education for children. But often the main reason is that they already have family in a particular country. However, travelling within the EU may pose a problem.

The Dublin III Regulation identifies which country is responsible for processing the application for international protection of an asylum seeker. As a rule, this is the first country (EU Member State) where the asylum seeker is registered. Many asylum seekers are therefore confronted with a ‘Dublin’ transfer if they have already been registered in another country upon entering Europe. That country is responsible for the asylum application, so the asylum seeker will be transferred there for examination of the application.

A distinction has been made between two types of groups. One group consists of unaccompanied children who are present in the EU without any family members or relatives in other European Member States. These children may not be transferred to the Member State where they first entered the EU and/or made an application for international protection. This separate approach has applied to unaccompanied children since an EU Court of Justice decision in 2013 (judgment of 6 June 2013, EU:C:2013:367). That decision was based on the best interests of the child being taken into account at all times, and unaccompanied children were identified as a particularly vulnerable group. In contrast to adults, this implies that children may not, as a rule, be transferred to another Member State unless it would be in their best interest. The second group consists of unaccompanied children who do have family members or relatives legally present in another European Member State, and for whom reunification with relatives would be in their best interest. Reunification on this basis is not always successful.

In most cases, it is the family who make the decision to send a child without their parents. They decide who is physically and mentally strong enough to complete the journey. That is often the eldest son. In the eyes of the family, their child is independent and resilient enough for this. So the child generally leaves their family feeling that they are an adult. They believe they are capable of coping with the flight, regardless of their age. This is often preceded by a long period of preparation: the family must raise the money and find a ‘travel company’ or ‘travel agent’.

Evidently, this does not apply to all children who flee. Many flee suddenly without being well prepared if the situation has become too dangerous for them to stay. Eritrean

children often say that they left impulsively, with others who were leaving at that time. Their family does not always agree with the flight. There are also children who are still so young and vulnerable that the decision to hand the child over to a travel agent is more a sign of despair than a measured decision. In a 2016 news broadcast, Syrian parents in a refugee camp near the Turkish border said: “We are going to die here anyway; my child may drown at sea, but there is also a chance that he will make it.”

In addition to all these reasons for fleeing, there may well be another motivation – the hope that the child will make money and a career in Europe that will ultimately benefit the entire family. People in the wealthy West often find it hard to understand a parent’s decision to let their child go, and that can lead to a judgmental attitude towards the parents and a protective attitude towards the child. This is usually not in line with the experience of the refugee child, who is proud of completing the journey and wants to help their family.

Cultural differences between the West and the refugees’ countries of origin play a noticeable role here. Unaccompanied children generally come from a so-called collectivist or ‘we’ culture, also referred to as an extended family culture. European culture is much more individualistic or ‘I’-oriented. There is a big difference between this and a collectivist culture, particularly in north-west Europe. Understanding cultural differences helps create an understanding of the intrinsic motivation and behaviour of refugee children.

1.3 The impact of collectivist culture

In their country of origin, unaccompanied children often live in an extended family context. That means together with parents, brothers and sisters, grandparents, uncles and aunts, and close and more distant cousins. They live together, care for each other and raise the children together in close-knit communities. The cultural values and norms that go with this are also called collectivist. Hofstede, a Professor Emeritus and expert in comparative culture studies who passed away in 2020, clearly explained this in the authoritative book *Cultures and Organizations* (2010): “A child in an extended family sees itself as part of the ‘we’ group, the collective, and unknowingly learns to be part of a group and to ensure that there is harmony in the group.

In individualistic cultures, the interests of the individual transcend those of the group.” Hofstede defined culture as the mental programming a child is provided with during their upbringing and, as they grow older, also by society. Culture, consisting of norms and values, is therefore not static but always subject to change. Evidently, the differences are not always that big or clear, and everyone moves within the scope of the differences.

In an extended family, there is often a large power distance, a hierarchy determined by age, among other things. As a child, you learn to respect the older family members and that also applies when you are an adult yourself. At the top of the family are its oldest members. Talking back, or learning to form your own opinion, is not acceptable when there is a large power distance, nor is it usually encouraged in the family's culture or the child's upbringing. Asking a refugee: "Who makes the decisions in your family?" can help to clarify this. For example, a former Afghan refugee told that in her family, it is her paternal grandmother – who lives in Sweden – who makes the decisions. "If there is anything that is not clear, or where decisions need to be made, my father and his brothers and sisters consult her, and she decides. They call her for everything. Grandma is really the head of the family and everyone listens to her, including my father."

Family honour is of great importance in an extended family culture. Honour is a significant factor in societies where people primarily depend on themselves in their struggle for existence. A group is usually stronger than an individual, and is more likely to acquire some of the scarce resources it needs to survive. For this structure to function properly, each individual must adhere to group rules and norms. Failure to do so may result in exclusion or worse. Honour rules or honour codes are a way to keep others – who are also competing for those scarce resources – at a distance. Individuals do not depend on a group for survival if there are sufficient resources for all. In that case, the importance of group rules decreases and there is more room for individual interpretation. But the importance of honour is not only about scarcity. Traditions and religion also play a significant role in maintaining an honour culture. In Saudi Arabia, for example, many people are wealthy, but honour, honour codes and religion are very important.

In extended family cultures, honour often concerns issues related to upbringing and descent (Janssen, 2006). Relationships that are formed through arranged marriages, and controlling how girls and women relate to men, can determine their individual freedom. That freedom is defined by an elaborate system of strict, often tradition-based, rules that dictate how girls and women, in particular, should behave and what is expected of boys and men to protect family honour. As Rhmaty, a transcultural systemic therapist, aptly depicts in her book *Processing trauma with refugees* (2011): "In an individualistic system its members are often equal and everyone, even young children, co-decide, whereas a collectivist system is more hierarchic. In a collectivist culture you derive your strength and identity as a child and adult from your contribution to the system. Things like personal happiness, independence, self-fulfilment and privacy, which are at the top in an 'I'-focused system, are less relevant. Social responsibility and connectedness are more important for mental well-being than autonomy." Rhmaty also emphasises in her book that everyone possesses elements of 'me' and 'we' systems, and finds a balance between them.

It is clear that unaccompanied children often have a strong need to contribute to the family interest, well-being and honour. It gives them a sense of pride and self-esteem if they succeed in doing this in their own way. Even if that means that they have to flee to Europe on their own. So making family reunification possible, or sending money, can be a huge motivation and make them feel proud. On the other hand, inability to contribute to solving the family's problems places a burden on them. This often leads to great shame and feelings of failure and worthlessness because, according to their own standards, they have fallen short.

The motivation seen in these unaccompanied children, who want to contribute to their family, is therefore quite different from how children grow up in an individualistic or 'I'-oriented culture, as is generally seen in wealthy Western societies. In north-west Europe, for example, the individual development of a child and their talents is very important. A primary goal in bringing up a child is to help them realise their full potential. From an early age, these children are encouraged to think about what they want to be, and to discover and nurture their talents and skills. People want to protect refugee children by diverting them from the goal they have in mind – contributing to the well-being of the family – because they see that the children experience a lot of stress because of this. For the children, however, that can feel like an obstacle to what they want to achieve. Understanding the norms and values of other cultures increases the chance of finding the best possible environment for the child.

Gaining insight into differences in background and culture can help in understanding unaccompanied children. A lack of awareness of these differences can easily result in misunderstanding and wrongful interpretation of mutual intentions. The contrasts are rarely as extreme as people might make them seem. Honour can also play an important role in individualistic cultures, for example. When a child is successful, this reflects on the parents and grandparents as well and brings honour to the family. In the same way, the individual development of a child in an extended family culture is considered significant for the child themselves and they are happy for him or her. Reflecting on the contrasts does contribute to an understanding of differences in norms and values. It helps you to recognise your own norms and values and to be open to the norms and values of others. This is the basis of intercultural communication and cultural sensitivity.

In the following chapters, culturally-sensitive knowledge and skills are discussed in detail, as well as how misunderstandings can be prevented in the guidance of unaccompanied children.

1.4 The flight: what do these children experience?

Usually a long preparation precedes the flight itself. They have to raise the money and find a ‘travel agent’ (human smuggler) who they will pay to organise the journey. The children fleeing to Europe are therefore usually from wealthy families who have a broad support network. The vast majority of refugees stay in their own region.

In general, the more money that can be paid for the trip, the more certain it is that the refugee will actually arrive and the faster that will happen. In a way, the family invests in the flight and often has to make sacrifices for it, such as selling important possessions, for example a house or cattle. If their house has been destroyed or become worthless as a result of a war, as is often the case in Syria, gold and jewellery from the mother’s dowry are sold. The cost of the journey usually has an adverse effect on the standard of living of the family that stays behind. The young person is well aware of this and wants to help their family as quickly as possible. This applies particularly to children who have left relatives behind in a refugee camp. After all, they have first-hand experience of the difficult situation in the camps – the hunger and insecurity. The children feel they are under great pressure to arrive in Europe quickly, and to arrange asylum and family reunification or send money home – and that is noticeable.

For most unaccompanied children, it is a journey that takes a very long time and consists of various stages, often paid for separately. The payment also takes the form of forced labour, prostitution or additional money that the family is forced to pay (Lønning, 2020).

For example, an Eritrean refugee must first get out of their country. When this hurdle has been overcome, the journey continues to a refugee camp in Ethiopia. There, the refugee has to wait until a truck for the next stage has been arranged. That has to be paid for too. The truck ride goes through Sudan and the Sinai desert, where people often fall victim to robbery. Sometimes refugees, including children, are held hostage and tortured until family members pay ransom. There is anecdotal evidence that children have also witnessed a fellow refugee dying as a result of organ removal.

In Libya, the refugees are often left behind in detention centres or locked up in institutions. Boys and girls are frequently raped, and forced to work as ‘compensation’ for the next leg of the journey. Refugees from Eritrea and Somalia usually travel via Libya, though women and girls sometimes choose different routes to those the men take. In Libya, in particular, refugees face serious violence because there has been no functioning government since the death of Gaddafi in 2011. That is why many choose to make the dangerous crossing to Europe. Refugees say that in Libya they were sometimes locked up for months with little food and drink, not knowing when they could continue their travel. Many depart from Libya for Europe: by boat to Italy but also via

Turkey and from there by boat to Greece or travelling through the Balkan countries. Syrians, Pakistanis and Afghans usually flee via Turkey.

The trip across the Mediterranean Sea in a boat is very risky, and journeys over land are dangerous and full of hardships. Death is never far away. The refugees know that very well, but they take the risk. Many children who survive the journey have seen others drown and almost drowned themselves. Unaccompanied children sometimes talk about this during their asylum interviews, or they tell someone they trust about their experiences.

The journey by land is also very unsafe and increasingly hopeless. The Balkan route, for example, has been closed since 2015-2016, with gates and border surveillance. As more and more barriers are erected in Europe, the journey often cannot continue. But refugees remain hopeful and do not give up. From the west coast of France, Belgium and the Netherlands, adults and children try to get to England on small dinghies or in trucks. However many times they are removed, they keep trying. There are refugees who, for months in succession, make attempts to reach Croatia from, for example, Bosnia or Slovenia. Despite the very rough treatment they often experience at the border when they are sent back, many keep trying. And now, there is a new trend: refugees settling in Europe's border countries. Countries such as Turkey, Bosnia and Morocco are transit countries that are fast becoming destination countries. A situation for which these countries are not usually prepared. So they have no organised asylum procedures or asylum reception, and there is a lack of interpreters or language training for newcomers.

Unaccompanied children who eventually reach Europe have had, almost without exception, long and very difficult journeys full of hardships. Hunger, thirst, physical discomfort, injury, cold and extreme experiences of violence are normally part of the burden they carry with them. They have nevertheless learned to survive, and many have gradually developed 'survival behaviour'. This means, for example, that they have learned to steal, lie, fight, flee and get favours. They trust no one, yet do manage to find security with each other and to show solidarity.

Girls are particularly vulnerable during the flight. They are usually not used to travelling without their family's protection, and often fall victim to sexual abuse. They sometimes seek protection from a strong boy or man, by offering themselves as their wife. Girls are sometimes married by the family prior to the trip, for their own safety. These are mostly unregistered, religious marriages, conducted by an imam or priest. Arranged marriages are common in many of the countries where asylum seekers come from.

These marriages are entered into at a young age, and because of the situation there are less opportunities for choosing the right partner. Some young newlyweds, once

in Europe, indicate that their already arranged marriage was simply brought forward because of the journey, and that they want to stay married and be together. But there are also cases of marriages that are not ‘consummated’ and after arrival in Europe they are annulled with the consent of the family. Those ‘marriages’ were primarily a way to make the journey less dangerous, as many boys as well as girls are sexually abused. It is often a long time before a boy will talk about something like this, as they feel so ashamed. Usually they will not talk about it at all.

The general rule in Europe is that a refugee must apply for protection in order to be able to legally reside in the country and to be eligible for reception (a bed, food and shelter). For a child who arrives without parents, custody must also be arranged. How and by whom the custody is assigned greatly differs in the various EU Member States. These topics are addressed in the next chapter.

1.5 Amir’s story about fleeing

Amir¹ is a 15-year-old boy from Afghanistan. His father decided that Amir had to flee because the Taliban were looking for him. He wanted to prevent his son from being recruited, as had happened to other boys from the village, who were then never seen again. It took a while to raise the money to arrange the travel, but eventually Amir started his journey.

Once in Denmark, Amir talked about fleeing, the journey and what happened after he arrived: “I found it exciting but also tough that my father had chosen me to go to Europe. I am the eldest son, so it is normal that I should go and not my younger brother. I had just turned 15 and so I am actually a man. I was very strong as a child. That’s why I always helped my uncle with his trading. We often went very far from home with his horse and cart, so I was used to travelling. My cousin Ali also left when he was 16. He went to his uncle in Sweden. I saw photos on Facebook. It seemed cold there, all white snow. But I also knew that he went to school there. I thought that would be nice, so I wanted that too. Fortunately, my father arranged everything well. He sold cattle, quite a lot, and paid the ‘travel agent’ with that.”

“He arranged that I could travel by truck from Afghanistan to Pakistan. From Pakistan I went to Iran. There, we were locked up in a room with high walls and could not go outside. It wasn’t nice and I was scared because we didn’t know how long we had to stay there. But after about a week we were taken to the mountains in a car, and we crossed the mountains on foot. Fortunately, there was a man who knew the way. He

¹ Amir’s story and name are fictional for privacy reasons. But all experiences are based on what many unaccompanied children have told.

always urged us to hurry. Not everyone could do that. There were also small children. Sometimes I helped them to walk and carried their possessions for them.”

“After a day and a night of walking, we arrived in Turkey, where we had to wait again. There were very many people in a small room. There was almost no food and it smelled terrible. Fortunately, there was water. After some time, another travel agent arranged that we could go to Greece by boat. Apparently, my father had already paid because I was allowed to join. Not everyone could come along, which was awful. Those people were crying and screaming. I was shocked when I saw the boat. It was quite small, and so many people had to get in. I counted more than a hundred people. The boat was really too full. I was so scared. The waves were high, and water came into the boat. All the luggage was thrown overboard, but it still went wrong. The boat got full of water and slowly began to sink. I think it was leaking. I was wearing a life jacket like the others, but some people, including children, drowned anyway. I almost drowned too. I think my life jacket was better than others and I can swim a bit, so I held on longer. I was really lucky because I was rescued just in time by people on a large boat who came to help us. I was so happy when I came on shore. It was really Greece – I was in Europe!”

“I didn’t go to a reception centre in Greece, as I heard it wasn’t good there. With a large group, I passed through the Balkan countries on foot. Sometimes we took a bus or train and then walked again. People paid that for me, but I had to help them carry their children and luggage. That was really tiring, although I didn’t mind doing it. In the end I went by train through Germany to Denmark. I didn’t want to stay in Germany because everyone goes there, so there probably aren’t enough places. So, that’s why I came here. I was told that I had to go to an application centre to request asylum. Fortunately, I was with an Afghan man. He had many children and I helped him with the children. Together we arrived at the application centre. I felt so happy and relieved and proud that I had made it!”

“We were registered and had to wait around a lot. There was a nice man who asked me, with the help of an interpreter, if I wanted to call someone to tell them that I’d arrived safely. I really wanted that very much of course. Luckily, I knew my father’s phone number by heart. I almost cried when I had him on the phone. My father too, I could hear that. I missed my father, mother and brothers very much, I hadn’t seen them for so long. I think I’d been on the road for two or three months. I was so happy when I heard my father but that made me miss them even more. I thought, will I ever see them again? I’d travelled for such a long time, and it was so difficult, and they could never do that. ”

“At the registration centre I had to tell them everything. Luckily there was an interpreter who could explain the things they were asking me. The travel agent had told me what is important to say about the reason for the flight: the Taliban. But they didn’t want to hear that yet. Now it was only about who I am and all that. I also visited a kind of doctor to see if I had not brought an illness with me. They are afraid of that. We all had scabies, including me since Turkey, and many people were coughing. Then I was taken to a building with other boys where I could sleep and eat. Boys like me, but also from other countries. There were also very dark boys with curly hair from Africa, that was strange. I had never seen people like that before, at home or on the way here, but now we live together. There were also a lot of guys from Syria. I got on well with them. We played football together, which was nice, and it helped me to forget about things for a while.”

“The food was strange though. We were given bread all the time, not tasty at all. The people here are very tall, which is also strange. And they are fair, with light eyes, hair, skin. But what I found really annoying in the beginning is that women are not veiled, they are actually quite exposed. I would be ashamed if my mother would see that. I’ve got used to it now. Now I like looking at Danish girls and sometimes they look at me too.”

“I was soon taken by bus to another refugee camp, the asylum seekers centre where I am now. This is where I’ll go through my asylum procedure and they’ll decide whether I can stay and if I can let my family come over. I’m very happy because another Afghan boy, Ahmed, lives in the same house. He is also a Hazara. We do a lot together, like eating and playing football. He feels a bit like family. But I’m also worried. Ahmed said that they are very strict for Afghans, that Eritreans and Syrians are granted asylum status and their families can come here, but Hazara must return to Afghanistan. And now I can only think about that. My father will probably be very angry if I have to go back. He actually said I can never come back, as the Taliban will take revenge because I fled. I don’t know what to do. I can’t sleep and often get angry. My head spins with all these thoughts and I worry so much. I recently fought, it just happened. I had to go to another refugee camp for a few days as a punishment. I hope to see my lawyer soon. That’s what my father said when I was allowed to call him again. ‘Go to your lawyer, go to your lawyer.’ But I have to wait, they say ”

What happens once unaccompanied children are in Europe? Do they stay in the country of arrival or is this merely a transit country? How can they best be supported, what do they need?

Anyone who has finally arrived in Europe after a traumatic flight is, first of all, very relieved that the journey has succeeded so far. But they are also soon overwhelmed by the numerous rules, as they come into contact with various officials and have to deal with long periods of waiting, plus many ambiguities and unfathomable bureaucracy in language they do not understand. People are often instructed on how to ensure that they can travel further into Europe by, for example, avoiding registration. When they arrive, unaccompanied children will have no one to act with legal authority on their behalf. This has to be arranged, as well as appropriate care and accommodation. It is a very stressful period for refugees - and certainly for unaccompanied children.

2.1 Country of arrival, transit or destination?

The countries on the borders of Europe are often entrance or transit countries. Where many refugees are really heading are the more prosperous countries of north-west Europe. Their desire to continue the journey makes their need for guidance even more urgent. Trying to prevent registration in the transit country often means that they are not entitled to receive accommodation and support. Or that they may be detained if they refuse to register, as is the case in some Eastern European countries. So the child's flight and insecurity continues, and there is still no time for them to recover, bid farewell and mourn the separation from their family and their country of origin. Recovery from the often difficult journey is, in effect, delayed.

Children who have just arrived in Europe are often suffering from the effects of poor hygiene, and are tired and hungry. They distrust strangers and often have other people, family, fellow refugees or a 'travel agent' who tell them what to do. If professionals are aware of this, and prioritise their response to it, the guidance they can provide will

be more effective. It will make newly arrived children feel that they are being seen and heard, and that their needs are truly being considered.

2.2 Formalities: registration, asylum procedure and guardianship

The asylum procedure involves a great deal of bureaucracy. In most countries, especially the countries on the borders of Europe, not enough interpreters are available. The procedure is therefore completely unfathomable and confusing for an unaccompanied child. Many of these children grew up in countries where the governments are corrupt and unreliable, so distrust of officials is often the basic attitude (Röder & Mühlau, 2012). Past experience shows that, at first, unaccompanied children do not see the difference between all the officials they are confronted with. They do not understand who is responsible for what and, in principle, do not trust anyone. Trust in fellow human beings has often been damaged by traumatic events during war and their flight.

This is a difficult situation for the child, because without a procedure there is no right to legally reside in the country. So one of the most important needs of unaccompanied children is to gain an understanding of the procedure. This can be done with detailed and often repeated explanations in their own language. The child then begins to understand that the procedures must be followed and cannot be influenced by pressure or bribery. The availability of interpreters and intercultural mediators, plus help from people from their own countries, is vital for this.

Knowing the importance of the asylum procedure is why the child wants to get it completed as quickly as possible. Distrust, and the children's impatience, sometimes stand in the way of the best possible support. In addition, refugees are likely to have been instructed by 'travel agents', fellow refugees or family, or via social media, about what they should and should not say in the asylum application process. Unfortunately, this information is mostly incorrect. So the flight story is not always explained in full, while what actually happened to them is often much more poignant and would give more depth and credibility to the asylum application. A refugee may only tell the real story after the asylum procedure has ended, when they have started to trust their counsellor.

Another complication for many children is the Dublin III Regulation. Although a judgment by the EU Court of Justice from 2013 (EU:C:2013:367) states that the child's interests must be taken into consideration at all times, a possibility of transfer to another country often leads to uncertainty and stress. The length of these proceedings can have an adverse effect on the child.

Stressful situations may arise, for example, when children have relatives in countries on the borders of Europe. In these cases, they might be transferred there if it has been

decided that this would be in their best interest. Reception and protection in those countries are often poorly arranged, and family reunification can take a long time or may not be achieved at all. Additionally, there may not be any real emotional bond between the child and the relative(s). The Dublin III Regulation is applied differently in the various Member States. This could mean that a child would decide not to go to a close relative in one Member State, in order to apply for family reunification in the other Member State. The child's decision may be influenced by their family in the country of origin, in the hope that it would improve their chances of successful and swift family reunification. A situation and decision like this can cause a loyalty conflict and place a great burden on the child and their relatives.

There is also the issue of a lack of parental authority. Every European country has its own system for addressing the issue of authority if parents are missing. There are countries where a professional guardian is appointed by a judge to exercise authority temporarily, and there are countries where guardianship is undertaken by volunteers. In some countries, the guardian also arranges the reception, while in others this is arranged separately. There are countries where an interpreter and lawyer are provided and countries where this is not the case.

2.3 Asylum reception

The reception of unaccompanied children varies greatly within Europe. Many countries have large-scale reception centres. These are often unsafe and chaotic places for children travelling alone. In some countries, reception for unaccompanied children is organised by youth care organisations but the quality of care for these children is mostly lower than what is provided for other children in youth care. Depending on the country and the region, the placement of unaccompanied children is done by different authorities who base their decisions on availability, rather than the individual needs of the child. There are more and more countries where forms of foster care are provided for unaccompanied children. In the Netherlands, the reception of unaccompanied children up to the age of 15 in families with a similar cultural and migration background has worked well. In most countries, regular foster care families working with youth care are used. This also applies to small-scale housing; in some countries, this has been specifically developed for unaccompanied children, in other countries it is part of the youth care system.

The right kind of reception depends on the child's particular situation. Are they at their final destination, with a residence permit and a focus on integration? Or do they see the country as a temporary stop en route and want to continue on to another country? Is there no prospect of a residence permit and should they focus on returning to their home country or continuing to travel illegally? Or are they actually waiting for their parents through family reunification?

The METAdrasi Guardianship Programme in Greece, for example, focuses on tracing unaccompanied children and offering them personalised support. This may involve attempts to reunite them with their family members or, if it concerns a Dublin case, guardians will try to reunite them with their family members in other parts of Europe. Together with the relatives abroad, they determine the best interest of each individual child and report this to the Asylum Service. The International Committee of the Red Cross and Red Crescent provides 'Tracing Services' to try to reunite unaccompanied children with their families. This is a worldwide service called *Restoring Family Links*.

Knowledge and experience in the field of adequate reception are increasingly shared within various EU projects. In 2016, a relevant study conducted by Kalverboer, Professor of Pedagogy at the University of Groningen, looked into the well-being of children, their living conditions and their place in Dutch society, and showed that unaccompanied children are best placed in reception families. Children who were placed in a family are the most positive about their position in Dutch society. Children in small living units often lack affective relationships, care, support and stability in their lives. Children in large-scale reception models such as centres for asylum seekers often say that they feel lonely, sad and excluded by Dutch society. They experience a lack of care and support from adults.

In the shelter, in whatever form it takes, it is important to identify victims of trafficking. Unaccompanied children are at risk of being exploited and abused. A good risk assessment must be part of an adequate reception system and the delivery of effective guardianship and care.

Protected shelter

In some European countries, there are specialist shelters for the protection of victims of trafficking. Residents in these shelters are, first and foremost, protected against potential human traffickers who could have an influence on the children. The child's situation is looked at in detail, and all possibilities are explored, such as reporting to the police, return to the country of origin or applying for asylum. The guidance focuses on allowing the child to feel safe and assisting them in developing awareness of their own capabilities. The longer the boys and girls can escape the influence of the human trafficker, the greater the chance that they are able to focus on their own prospects. This also includes returning to the country of origin (Pater, Spinder & Berk, 2009).

Fear of the trafficker must also be overcome. For example, Nigerian girls are often afraid that their family in Nigeria will be affected by voodoo, a form of black magic. The trafficker uses this as a strategy to ensure the children do not dare break free from

them or report them to the police. Children do sometimes return to the trafficker out of fear or because they are forced to. Taking their phones away from them, and offering them a safe place, may decrease the negative impact. The approach adopted by the reception centre aims to make these trafficked children more self-assured. And with this newly acquired confidence, children are expected to be able to see things from a different perspective and to consider the possibility that their life could also be different.

Support and guidance at the beginning of reception

It is often difficult for unaccompanied children to understand, in the early stages of their stay in Europe, that a guardian is there to support and guide them. They meet so many different officials and the children are usually not familiar with the profession of care worker. In the countries where they come from, help is arranged within the family or community, not by the government or by professionals. Unaccompanied children, when they are questioning the system, sometimes say to their guardian, “You get paid to help me, so I can never trust you, because you do it for the money and not for me.” The distrust disappears over time, as the children come to understand that guardians are offering support because of their concern for them. When a child starts to call their guardian their sister, brother, father or mother, it can be seen as a token of trust. On the other hand, a guardian who wants to decide too much for a child too quickly may come up against resistance. During the flight, the children became accustomed to a certain level of independence and they might feel in some ways grown up and self-reliant. Respecting a child’s independence, and letting them experience autonomy and agency in their own situation, strengthens their resilience.

Children travelling with family other than their parents

Some children arrive in Europe with grandparents, uncles, cousins or adult siblings. European countries deal with this situation in different ways. In some countries, a guardian is appointed for the child because there is no parent present. In other countries, they are considered part of the family they are with, and no guardian is appointed. A child who is married to an adult is also provided with guardianship in some countries but not in others. The complexity of the subject of child marriage can be seen in changes to the law, with child marriage no longer recognised as lawful marriage in Germany (since 2017) and the Netherlands (since 2015).

Reception after the asylum procedure

The child’s prospects determine the next type of accommodation in most countries. If the child is at their final destination and is allowed to stay, reception focuses on integration. If they are still travelling, reception focuses on reunification with their family, and if the child is refused residence, the plan generally focuses on return.

Children who are unlikely to be granted asylum

Some children have little chance of being granted asylum because they come from a so-called safe country. They did not really flee their country of origin because of persecution, but are roaming around Europe looking for better opportunities. They often live in a group. These children are mainly from the Maghreb and Balkan countries that do not belong to the EU. Depending on the asylum system of a country, they may go to a reception centre and have guardians appointed.

These children sometimes exhibit instinctive survival behaviour, earning money from crime, and often using cheap and readily available drugs such as anti-epilepsy medication and drinking alcohol. The groups of children have their own rules, dynamics and hierarchy, and this provides a form of safety. They may display aggressive and threatening behaviour. That leads to problems in large-scale reception centres in various countries. The children often do not feel comfortable in foster families, which they find too oppressive, and they are not well adjusted to family life. In large-scale care they usually behave in accordance with the group codes. In small-scale care with intensive guidance, preferably given by people from their own country, they often manage to form relationships and can accept guidance. Experiences in Greece, Belgium and the Netherlands have shown that if a child is given access to regular psychological support, they gradually develop goals and re-assess their needs. This must be in combination with safe accommodation and the individualised care that a professional can provide.

Some of these children use asylum reception as a safe place that can provide them with basic needs or medical care. But experience has shown that if they feel they can trust the professionals working with them, the children also look at their future options and, for example, ask for help in overcoming addiction, finding work-oriented education or returning to their family. These runaways often need more time than the average asylum seeker to discover that there are people who just want the best for them and can help them create a future for themselves, with a training course, for example. Many children, however, leave at some point, for an unknown destination. Some may even return to the asylum reception centre in the same country after months or even years.

Leaving for an unknown destination

Children sometimes disappear from reception centres – often to continue travelling. They have not yet arrived at their destination or the asylum procedure appears to offer no chance of a residence permit. Sometimes their 18th birthday is approaching, so they risk being repatriated or no longer being entitled to reception. The children either stay in the country illegally or try to continue travelling.

They travel in the same way as before: based on stories from others, with the help of human smugglers or in exploitative situations. Sometimes they travel alone without any help, living in fear and uncertainty. For example, 80 per cent of the 854 unaccompanied children who applied for asylum in Austria between January and October 2019 were not admitted to the asylum procedure. In some cases this happened because they were declared adult after a scientifically dubious age assessment or because they were deemed transferable under the Dublin III Regulation. However, for 471 of them, more than half of those who applied, the procedure was closed and their current whereabouts are unknown (Asylkoordination Österreich, 2020).

Their departure makes them very vulnerable to exploitation, abuse, and life-threatening smuggling situations in trucks or boats in the open sea. As a European partnership of guardianship organisations, the EGN does try to keep an eye on these children to gain more insight into their travel movements and the exploitative situations they are confronted with.

Family reunification

The right to family life is a human right. However, the right to family reunification in asylum procedures in European countries varies greatly. That is related to the fear that many families will travel to join their children in Europe. The family reunification procedure has therefore been made very unattractive in many countries. For children travelling alone, this is often a serious setback. Endlessly long and complicated procedures, supporting documents that are almost impossible to obtain, financing the travel of the family who will come over, the uncertainty that comes with it – this all puts pressure on many children for a long time. If the procedure is ultimately unsuccessful, or the family decides not to come because of new insights, or not everyone can travel, that is very hard for these children to deal with.

The next chapter discusses how unaccompanied children deal with stress from asylum or family reunification procedures, and how they respond to missing their family, traumatic experiences and failed family reunification. It also addresses their need to adapt to a new country with a different culture, and how the children can be supported and helped throughout this process.

2.4 The story of Asley from Syria

Asley² is 10 years old. She fled from Syria a year ago, travelling with a 22-year-old uncle. Upon arrival in Belgium, they were placed together in a large-scale asylum see-

² *Asley's story and name are fictional for privacy reasons. But all experiences are based on what many unaccompanied children have told.*

kers centre. Asley was also entitled to guardianship services, so was assigned a guardian. Her young uncle Ahmed, had a tough time at the centre: he was stressed about his own family as well as the reunification process for Asley's and his own family. He had left his wife with their first child, a one-year-old son, in a refugee camp on the border with Turkey, and he was very worried about them. Asley had applied for family reunification for her parents and younger brother and sister.

Ahmed clearly could not take care of Asley. She was alone a lot and regularly wandered around the centre by herself. The guardian discussed this with Asley and her uncle, and also with her parents in Syria, and about whether it would be better for her to live in a small residential group or with a reception family. Her parents and uncle insisted they stay together. Her uncle considered it his responsibility as he had promised Asley's parents to take good care of her. Ahmed did his very best, but he just could not manage to care for her properly.

As more and more reports came in of concern from other residents at the centre, the guardian decided to intervene. She called Asley's parents and said that, after consulting her colleagues, she had decided to find a reception family for Asley. Asley could stay there until her parents had arrived. When the parents heard that the reception family was also Muslim and spoke Arabic, they agreed. The reception family was a young Moroccan couple with two children of primary school age. Prior to the placement, a telephone call between the Moroccan foster mother and Asley's mother was arranged, in the presence of Asley and her guardian. The mother explained what she thought was important in the child's upbringing: obedience, respect, ensuring honour, living according to Islam and good school performance. The reception mother confirmed that these are also important values in her family.

Asley says: "At first I didn't want to go, I wanted to stay with Ahmed. That was what we agreed when we left, and my mother had always said: 'Don't leave Ahmed, you must always stay with Ahmed until we are there too.' But when they talked to each other on the phone, my father and mother agreed. It seemed very scary to me because I had never met Moroccan people. My guardian brought me there, and when we arrived, I saw a girl my age. Without a headscarf. That was strange to me because they were also religious, weren't they? But she was very nice and so was her mother. And they had such good food, just like my mother often made, which I hadn't eaten for a long time. Then I started to feel happy. And they pray too, so that made me feel calm. And yes, I could just speak Arabic to them. It took some getting used to, because although it is Arabic it's different, but we understood each other well. At home they usually speak French to each other, so I learned that quickly and after a few months I was allowed to go to the same school as Laila, a regular school."

“Laila and I became closer, which was really nice, but then I didn’t want to wear a headscarf anymore, just like Laila and her mother. You can also be a Muslim without a headscarf. They say it’s between you and Allah, nobody else has anything to do with that. So then I took it off too. It was so nice to feel the wind in my hair when I ran! But I was also nervous about it because I knew my parents wouldn’t like it, especially because I am not with them. I asked my foster mother and my guardian not to tell them. Sometimes they call each other to talk about how I’m doing and when they’ll be coming. When they come, I’ll just wear a headscarf again, I said. But my foster mother and my guardian said that’s not a good idea. They said that we had to tell them before they come, and explain to them that it is all much freer here. And that it changes you, but I’m still a good, religious girl. I was so nervous because they’re coming in a few weeks, and there’s much more that they won’t like. For example, doing sports together with boys, and swimming lessons, and dancing with boys at school parties... and actually I don’t want to wear the headscarf anymore.”

“I got more and more nervous, also because I’d have to leave Laila and her mother, and I love it here, just everything. More things are allowed here: children are not beaten for punishment, and we do fun things at the weekend. They are also just happy and cheerful, while my parents are always worried and sad about the war and everyone who is dead and everything we’ve lost, our house, the shop, everything. I really want to see them, I miss them very much, but I’m also so afraid of what it will be like.”

“A few days ago, my foster mother said it can’t go on like this anymore. So she called my mother and explained everything, about how it’s different and freer here, and that I, like Laila, am not wearing a headscarf. My mum said she understands and was glad that I’m so happy here, and I don’t have to worry because she loves me very much and the most important thing is that we are together again. I was happy when she said that, she was very sweet to me, but I’m still very nervous. My foster mother said I can always come and stay over when I live with my parents again. And I may even stay with them longer so that I can still go to the regular school and not have to go to a school for asylum seekers, where you only learn the language. My parents first have to wait in an asylum seekers centre until they get a house somewhere, which can take a long time. My foster mother is now going to ask my guardian if I can stay here a bit longer and visit my parents at weekends ...”

3 Important considerations of reception and guidance

Whether an unaccompanied child has arrived in Europe in a transit country or in their destination country, a number of things are important in all situations. There is stress and uncertainty about the procedures, but also a lack of family, as well as anxiety, fear and confusion about the new country, foreign language, different society and culture. How do these children, who have fled to Europe on their own, deal with this? What do they need, what do they encounter, what are their strengths and how can they be further strengthened? In short: what is the best possible reception and guidance?

3.1 Important basic needs in the initial phase in Europe

After the relief and joy of having managed to reach Europe, and having survived the journey so far, a period of displacement and grief often follows. Children miss their families, worry about them, want to live up to their expectations and hopes. Or they worry about the next part of the flight, perhaps because they are only in the border regions of Europe. The asylum procedure creates a lot of stress and uncertainty, because during this first period it remains to be seen whether the transit, asylum application or family reunification will succeed. Unaccompanied children are sometimes disappointed with the situation in the new country. They thought they were coming to a rich country where there is no shortage of money, but they get very little pocket money, not enough to help the family or pay off debts. They do not like the food; there is not enough of it and it does not taste good. The bureaucracy is all very complicated, and it is not clear why everything takes so long. There are far too many rules regarding money, housing and school. Because of all of this, some unaccompanied children say – quite soon after their arrival – that they want to go home, because the whole situation is so disappointing.

Despite all the stress, uncertainties and disappointment, most unaccompanied children are excited about reaching Europe. They are happy with the support they are given, and see opportunities for the future for both their family and themselves. They show enormous resilience, with regular and positive contact with family often contributing to that.

In this initial phase, very different kinds of behaviour are seen. Some unaccompanied children show restless and agitated behaviour. They quickly become angry and frustrated, argue, wreak havoc and fight. Some children are gloomy and withdrawn, and getting them to do something is not easy. Others withdraw from the guidance they are offered, going their own way or not wanting to go to the shelter that is available to them, such as a foster family or group home. They only want to live in large-scale shelters, because these have fewer rules and give them more autonomy.

If a country's asylum reception is inadequate, there are not only frequent incidents of aggression, fights and alcohol abuse, but also more sadness, despair and suicidal behaviour.

Experiences of situations like these really show the importance of a period of rest and safety after the flight. A period during which the child experiences sufficient safety to recover from the hardships, look for their family, mourn what is lost, and also build friendships with their peers, while beginning to understand what support they can expect from professionals.

Safety

During the initial phase, unaccompanied children need rest and time to find their feet in Europe. They first need to recover from living in often appalling conditions, experiencing hunger, thirst, poor hygiene, physical discomfort and injuries, as well as other traumatic experiences during their journey. They may have been separated from their family along the way, and must first be helped in their search. They have to get used to being without family. Will they ever see their family again?

Many children go through a grieving process after they arrive, so this is a sad period that weighs heavily on them. There is also a lot of uncertainty: whether they will be able to help their family sufficiently, whether it will all work out in Europe, whether they will reach their destination country or whether their asylum procedure will succeed.

This period of rest can be a kind of no-man's-land, in which not too much is asked of the child and the focus is on recovering from the hardships, a possible search for family, as well as explanations and support with procedures (interpreters need to be available). It helps many children to get through the first phase, as does contact with family and others in the same situation. Some children have never known safety (or have not experienced it for a long time) so they are always on their guard. They do not know what it is to live a life with no war, violence, hunger or the threat of danger. They suffer from trauma-related complaints,

A foster mother from an 'initial reception' family in the Netherlands talks passionately how much she enjoys caring for these unaccompanied children when they have just arrived in the country. She has discovered that they need a lot of rest, and that you should not bother them with too many things at first. They sleep a lot. Most of them do not go to school during the first few weeks, because they are not ready for that. Some good food and attention, some chatting, phoning their family – that is what makes them happy. Sometimes they talk about their flight, but not always. She contacts the child's family, involving the family in whatever is happening, such as the asylum procedure. She sees how the children start relaxing and opening up to her if they are not pressurised at all and have contact with their family. She believes that this also helps her to prepare children for the asylum procedure. Together with the family and the guardian, they look into where the child can best live after this initial reception, whether there is family in the Netherlands who they could live with or where they can live nearby.

are easily agitated and restless, or can suddenly explode in anger. It may then take a long time before they relax and feel safe. For example, a 14-year-old boy from Afghanistan once said that he wished he had known earlier that there is no war here in Europe. He had been told, of course, but it did at first not mean anything to him. He knew nothing about life without any threat of war or violence. So it took a while before he could get used to living without any conflict, not having to be alert and on your guard all the time, or having to go out looking for food.

Victims of trafficking have usually been living in unsafe conditions for a long period of time. These children were often lured to Europe with stories of prospects for them there. Sometimes their family even received money for this. Once on the road, it turned out that the actual plan was exploitation, such as prostitution or forced labour. The children are then threatened in such a way that they dare not try and escape. They often see this life as their destiny. Once in Europe, they disappear into for example brothels, cannabis plantations or drug laboratories. In countries with 'protected asylum reception', they are first offered rest and safety. Then, the situation and the options to avoid further exploitation are considered.

Safety is an important factor in reducing trauma-related complaints and stress due to the flight and its associated uncertainty. Meeting primary needs such as clean clothes, food and shelter contributes to a feeling of safety.

Clothes and a shower

In the countries at Europe's edges, refugees who have finally managed to cross the impenetrable borders have often experienced dire conditions for a long time, having gone through many failed attempts to cross the border. The first thing they need, and really appreciate, is a shower and clean, dry clothes. This makes them feel human again, after a period of being hunted and living a life in transit and in fear. They also, of course, need food, because food was often scarce and limited during their journey.

Food

The importance of eating, and having access to sufficient and familiar food, is often underestimated in the asylum shelters. This is partly due to unfamiliarity with the circumstances in which unaccompanied children lived before they came to Europe and, secondly, because of cultural differences related to food.

Most unaccompanied children were hungry during the journey. And many had also experienced hunger caused by war and poverty in the period prior to the flight. Once the children are in Europe, they expect to find a rich, safe country where there is enough food. Eating is a primary need, necessary for survival. Someone living in poverty or war, or someone who is fleeing, has no certainty that there will be food to eat. Unaccompanied children in the asylum shelter are therefore initially focused on food, and often disappointed and frustrated with the meagre offer. Unaccompanied children in residential groups often find it incomprehensible and frustrating that food is limited, that they are not allowed to eat when they want, that the refrigerator is locked and that they are not allowed to choose what they want to eat. They do not understand, because they are in a rich country where there is enough food available. "In Syria, the food is always on the table and you grab what you want when you want," says an angry boy who lives in a residential group. "But I can't eat here. There are a lot of rules I don't understand. I'm often hungry and it makes me very angry."

Foster parents also recognise the stress caused by food. Unaccompanied children hoard in the beginning, hiding food under their bed or in a cupboard in their room. These foster families have discovered that if sufficient food is always available, and hoarding is allowed, the child's fixation on food will automatically decrease. Over time, certainty about the availability of food is internalised and no longer a source of stress, particularly in residential groups that let go of rules about food and ensure that there is enough food that children can always access. The fixation on food generally passes or decreases after a few months.

In many cultures, eating together is a time to share emotions. When there is something to celebrate, a marriage or birth, or if there is sadness or grief, the emotions

that go with that are shared during a meal. Eating together, experiencing the smells and flavours together, is associated with sharing emotions and being with people you love. Food is also the way to share, to be hospitable. Food is always available, guests are offered food and everyone is always welcome. Eating is therefore also the basis of togetherness and a sense of community.

The traditional culture in north-west Europe is very different. Meals are eaten at set times, and the food is put away the rest of the time. Guests are invited to people's homes and extra food is prepared for them. Having unexpected guests at the table is not the norm. When there is something to celebrate, there is a festive meal with lots of delicious food, but eating together is not traditionally a time to mourn together or share sorrow.

If an asylum shelter gives children the opportunity to cook for themselves, and allows them to decide how they will spend their money on food, there are generally less problems during a group's day-to-day activities.

Reception

Some residential groups in reception facilities meet an unaccompanied child's need for shelter, security and continuity by explicitly saying to them: "Welcome, this is where you will live, and where you will stay for as long as necessary." The guidance is flexible and customised, which means that continuity can generally be achieved. If necessary, ambulatory services are used, so that the children can stay in a residential group instead of being transferred. What these residential groups want to offer the child is the knowledge that this is their new home, that they belong here and are welcome here. This enables a child to feel safe and to relax, and to then proceed to the next phase.

Being welcome, being heard and being respected – these are the important elements of guidance and support for unaccompanied children. Human contact based on respect and interest is what unaccompanied children often say that they really need.

Contact

It has been said before: unaccompanied children are usually unfamiliar with the concept of a professional who provides care and support. They are used to being helped by their family or the community, assistance given by people they already know. In general, unaccompanied children like to feel that the contact they have with, for example, staff at the reception centre, a mentor, or guardian, is because the person is interested in them, and concerned about them, and that they are not only doing this as part of their job. The children say that it is important that a guardian or mentor is

there “when they really need them”, like during an appointment with the immigration services or a lawyer, an appointment related to health problems, or a telephone call with their family. Mentors or guardians sometimes have to get used to this. They have mainly learned to respond at moments that are difficult or problematic, not during good times too.

Family

Contact with their family is extremely important for almost all unaccompanied children. These children come from an extended family culture, as was described earlier. So even though their family is geographically far away, they are still very much a part of their life. The child has come to Europe to help them, to contribute to the family’s well-being. They often feel responsible for the family and therefore want to succeed in the asylum procedure and family reunification, or want to earn money to send home. This changes over time, of course, when the reality turns out to be different, as do family expectations and hopes.

There are now many inexpensive ways to have contact with family, using a mobile phone or the internet for example. Unaccompanied children may use social media a lot to keep in touch with their family, with those who were left behind, but also with family members who they lost on the way, or who fled at a different time and followed a different route. These family members may be in bad shape or in dire circumstances. “And,” as a former refugee said, “once you’ve fled, the only place you can meet your family is in the online world.”

Unaccompanied children think about their family a lot, especially in the initial phase. This is noticeable from their continual use of the internet or their phone. Foster parents and other professionals do not always understand this, and it can lead to arguments. For example, two brothers were told that they were being disrespectful, because they were on the phone to their father in Israel who called them during dinner. They had to ask their father to call them later. The boys felt very misunderstood in this situation. They were very concerned about their father; they did not know exactly what was going on, but they did know he was in trouble and needed money.

Sometimes the child’s parents are in such a difficult situation that they cannot be contacted. Or parents may be missing. This is unfortunate and very stressful for the children.

If the parents can be contacted, then the professionals working with the child can give them, with the help of a translator, a realistic picture of the child’s situation and the opportunities they have. Making clear to the family that their expectations were

unrealistic can reduce or remove the pressure on the child. A 16-year-old boy from Syria said how relieved he was when his guardian explained to his father that it was not the boy's fault that the asylum procedure and family reunification was taking so long, but that the rules had been changed and everyone now had to wait a long time. Before that, his father had kept telling the boy that he should try harder or complain to make things go faster. The father thought that his son had done something wrong, especially because his nephew had succeeded in bringing his family over a long time ago, but now he understood. The boy has been more relaxed since then, and is now showing an interest in school and his new environment for the first time. He has clearly passed the initial phase now and feels free to explore the possibilities for staying in Europe.

Understanding bureaucratic procedures

Unaccompanied children have travelled the world without parents, either alone or with other family members or people from their country. Along the way, they have had to make many decisions about the journey on their own: how to travel and who with, where and where not to stay, and which routes to take. In a way, they are self-reliant and independent. When they are faced with the bureaucratic registration and asylum procedures in Europe, they often lose this sense of self-reliance. They know that their future depends on the asylum procedure, but they do not understand it in all its complexity, if only because of the language and the lack of reliable people to translate for them. But what is also often new to them is that they cannot influence the procedures by, for example, exerting pressure or paying money or getting influential people to help them.

This can lead to a lack of agency, feeling you are unable to influence the situation, the asylum procedure or your future (including their family's future). It is therefore extremely important for the well-being of the unaccompanied child that they have a good understanding of the procedures, so they need people at their disposal who can translate and explain and are also reliable in this. Good examples of appropriate provision of information are short vlogs on YouTube made by former refugees in the language of the unaccompanied children. Another good example is a German child-friendly booklet for refugee children on different subjects, with quotes and advice from child refugees (Jugendliche ohne Grenzen, 2017).

In short: feeling safe and welcome, and having sufficient and appropriate food, certainty about your place of residence, human contact based on interest and support, frequent contact with family, and understanding of the procedures you are dealing with are all factors that contribute to a basic sense of security. Feeling secure helps unaccompanied children to unwind and recover from the stress and traumatic events,

and they are then able to explore the opportunities in the society they now find themselves in. A society in which they are confronted with a completely different culture that may sometimes seem inconceivable to them, as well as complicated bureaucracy, and new risks and temptations. The right support and appropriate provision of information can be of great help to them and reduce the risks.

3.2 Getting to know Europe

The first phase of the asylum procedure is often a turbulent time for many of the unaccompanied children. For children who have been granted a residence permit, the next phase marks the start of their life in this European country. For children who have an ongoing asylum procedure, and children who have received a negative decision, the uncertainty will continue and voluntary or enforced return to the country of origin is something that will now have to be looked at seriously. Some unaccompanied children may want to look for opportunities to continue travelling and try again elsewhere.

Unaccompanied children have the right to education in all European countries, regardless of the course of their asylum procedure. However, the right to education is not always properly upheld, due to practical barriers and policies, and this may deny or delay the children's access to education. Prosperous 'destination countries' often have better structures in place than countries on the edges of Europe, but the education that asylum seekers are given is not always equal to that given to children with a residence permit. School is a place where children are together with their peers and where they get to know their new country. But school is also a place where children have to deal with new risks, and sometimes temptations, while they are out of sight of their family.

There may be great differences in cultural habits and standards of living, especially if a refugee's country of origin has long been burdened by war or the lack of a functioning state system. The larger the gap between the culture and standard of living in the country of origin and the European country, the greater the culture shock and the problems that unaccompanied children can experience in connecting with other children at school, finding their way around, and settling into a community in their new country. For example, Eritreans, on average, have more difficulties adjusting to a European country than Syrians do. Unaccompanied children from Syria tend to connect with others in Europe more easily than their Eritrean peers.

The children may be confronted with all kinds of dangers in a country that they are not used to, such as the currents at sea, snowy mountains or very heavy traffic. In addition, cultural differences can be confusing, such as children freely mixing with adults, and men and women being allowed to mix with each other, women not covering up in

public, and no gender-segregated swimming. This is all new – and very confusing – for many unaccompanied children, so the cultural differences may lead to inappropriate behaviour. In the initial phase, children may not know how to deal with girls and boys who are scantily dressed. They have to learn that these girls do not want to be touched, and that their boundaries must be respected. Unaccompanied girls often have to learn to indicate their boundaries. Many of them have never learned to do so, because their families and their community watch them carefully in their country of origin and help maintain those boundaries.

There is also the complexity of the technical and digital world. If you come from the countryside of Afghanistan or Eritrea, finding your way around that can take some getting used to.

In an exploratory study into the health and well-being of Eritrean refugees, Pharos³ (2016) concludes that many of the current generation of Eritrean refugees come from the countryside, where people are unfamiliar with Western society. So the culture shock is, without doubt, considerable. In addition, a large proportion of these refugees have had very little education, so for them understanding the new society is even harder. For example, many unaccompanied children run up debts by not buying tickets for public transport or not paying for online orders. At first, it is difficult for them to understand that all those invisible digital transactions will keep coming back to haunt them.

Things can also be complicated on a small scale, when it comes to social conventions, for example. A former refugee from Somalia says that it took a long time before he was used to the way people greet each other in the Netherlands. “You shake hands back and forth a few times and look each other in the eye. For us, it is disrespectful to look an older person in the eye, so you look down to show your respect. In the beginning, I really found this way of greeting difficult, I felt bad and disrespectful. Now I’m used to it”.

All in all, the skills they need, the new dangers they are confronted with, the confusing cultural differences and a lack of parental guidance make these young people particularly vulnerable to making mistakes and to abuse. Providing time and opportunities in their day-to-day activities to talk about cultural differences, and the confusion and disapproval it causes, can help them a lot. It is also very helpful if children can talk to people from a similar extended family culture. Talking about the culture shock and their amazement will then be much less embarrassing for them.

³ *Pharos is a Dutch centre of expertise that aims to achieve equity in access to healthcare for all people living in the Netherlands, including refugees.*

Education

Education is a key protective factor for the mental health of refugee children. All children, including those who are unaccompanied, have the right to education. Many European countries have some kind of language course for newcomers. Refugee children are generally very motivated to start school. But school itself is often a problem and a point of contention. Children are often confronted with many barriers to accessing education, which may affect their motivation to attend school. Although student motivation can also be very dependent on the individual child, their experiences, educational background and migration goals, some of the practical issues may have a negative effect on their motivation. For example, many unaccompanied children initially find it hard getting to school on time every day, because they may not be used to that or because they have not been to school for a long time. “I have been to school for two days now, do I have to go again?” you then hear them say. Some children are not used to living by the clock – after all, arriving on time is a very ‘Western’ custom. There are also many children who sleep badly due to stress, anxiety and trauma-related complaints, which makes it difficult for them to get up in the morning, and those who have trouble concentrating because they feel stressed. Some unaccompanied children are illiterate, and do not like school because they feel stupid or do not understand anything they are being taught. Most of them do not tell their teachers about their illiteracy because they feel ashamed. This is also the case in participatory or individual education.

A lot of unaccompanied children are used to classroom teaching, by a teacher you respect, who knows everything and transfers that knowledge to their pupils. Many of them may not think that independent learning is good education. If they are ashamed because they have not understood something, they might not ask questions. Additionally, they might feel that they do not get the right education, because the language education is at a low level and not ‘real education’ as they were used to at home. In a qualitative meta-analysis (2017) the Dutch researcher Sleijpen found that education strengthens the resilience of unaccompanied children. Education is seen as the key to a better future. It is a source of distraction and gives young people the feeling that they have control over something, namely their own school performance. At the same time, it is a source of stress because of the desire to meet family expectations.

All these experiences can lead to motivational problems and absenteeism. School soon becomes a source of conflict when mentors and school keep to the rules and give children no time to relax, get used to a school rhythm and learn to be on time. Furthermore, when teachers insufficiently take the cultural background of young refugees into account, this can lead to misunderstandings, misdiagnosis and counterproductive remediation attempts (Graham, Minhas, & Paxton, 2016). Teachers’ expectations of children should also not be too low, as this fails to recognise previous learning.

However, approaches taken by teachers can also have a very positive effect; when they take the cultural heritage of students into account, this can facilitate and enhance learning (Graham et al., 2016).

Teachers can make an important contribution to a basic sense of safety by providing human contact. They have no role in solving problems in the asylum procedure or in mental health problems, but can do a lot for unaccompanied children by offering attention and support. They also have a role in pointing out worrying behaviour or unreliable social contacts. After all, unaccompanied children are very vulnerable without supervision from their parents. These warning signs can be discussed with foster carers, mentors and the guardian.

3.3 Offering protection

It is the fact that they are alone, and the cultural differences, that make unaccompanied children particularly vulnerable. But the desire to help their family, or the hopeless future they believe they will face if they do not receive a residence permit, also make these children so vulnerable to exploitation and abuse.

Sexuality

During their upbringing, girls and boys who grow up in an extended family culture are not taught very much about how to defend themselves against sexual abuse. This is because young people tend to be protected by the supervision of family members and strict rules of conduct. When this protection is no longer there, during the flight and in the asylum shelter, these children are obviously very vulnerable to sexual abuse and exploitation.

Many children experience sexual violence during the flight. The Pharos study on the health and welfare of Eritrean refugees (2016) estimates that a large proportion of the women who travelled through Sudan and Libya were victims of sexual violence. Sexual abuse among men is a taboo subject; an even greater taboo than abuse against women. Pharos does not rule out the possibility that many boys and men have had to deal with this too. Sexual abuse can be very confusing for boys, partly because they grew up with the idea that sex between men (homosexuality) is very bad. So the subject is also very much related to shame. Eritreans say that girls, and possibly boys, sometimes seek protection during their journey, and pay for it in kind. If this is the case, an outsider cannot see whether it is a normal relationship or in exchange for something else.

Sometimes the violence continues after the flight. Children may still need protection in the asylum shelter. A counsellor for unaccompanied children said that he had to get used to the behaviour of some girls. "They are so accustomed to offering themselves

to men for safety, that they do the same with you. They snuggle up to you and look at you seductively.” He thought this was worrying, and that it was important for him to help them to stop behaving like that, as it could easily lead to exploitation.

In most cultures, sex education is not given. Unaccompanied children know little about sexual health, and premarital virginity is usually the norm. Generally, the children do not know how to prevent pregnancy and sexually transmitted infections. The way people behave in Western society also causes confusion. Many unaccompanied children have not learned that you have to take other people’s boundaries into account during social interaction.

They often have to explore their own boundaries, because no one really discussed this with them as they grew up – after all, sex should only take place after marriage. Ignorance can lead to young people being abused, and confusion may make them cross other people’s boundaries themselves. The fact that unacceptable sexual behaviour is punishable is often new to them. This knowledge can also increase their resilience. If children are aware that unacceptable sexual behaviour can be reported, they are more likely to dare to resist, by threatening to report the person, for example.

Relationships and sex education, resilience, varying norms and values, and learning what is and is not punishable in the country they are in – this should all be freely discussed in daily life, at school and at the reception facility. That can prevent unaccompanied children becoming victims of abuse, or being abusive themselves. Someone who is experienced in providing sex education, and has the same cultural background as the child, can make a valuable contribution to this. They can approach the subject from the perspective of the norms and values in the country of origin.

Exploitation

In most European countries, asylum seekers are not permitted to work. Children have even less rights or opportunities to work. This, in combination with the lack of parental supervision, makes unaccompanied children vulnerable to sexual abuse and forced labour. The need to send money to their family, pay off a human smuggler or trafficker, pay for the family’s travel for family reunification, or to survive homelessness, makes them easy victims for exploitation. There are many stories of young people who end up in prostitution or drug trafficking, for example as a drug courier, as a cutter in a cannabis plantation or in the catering industry. A common misunderstanding is that human trafficking is exclusively a cross-border crime. Therefore, many professionals tend to overlook the fact that trafficking can also take place within the borders of a country. Any action that is carried out with the purpose of exploitation of another person, by means of deception, coercion or threat, can be considered trafficking.

There are some good initiatives. For example, residential facilities where part-time jobs are organised for young people in the initial phase. This is a great opportunity to get to know the society they are now living in, and to get an idea of their own role and possibilities within it. At the same time, it teaches them something about how to earn money. This can prevent young people being tricked into earning easy money in illegal exploitative situations out of ignorance or desperation.

New temptations

In addition to the temptation of earning money easily, unaccompanied children also have to deal with temptations that are seen as normal in the free and prosperous West.

Many unaccompanied children in large-scale reception facilities start drinking and smoking, especially in the initial phase. This is new to most of them and can sometimes become excessive. There may be a great temptation to use alcohol or drugs to deal with trauma-related complaints and stress, such as anxiety, agitation and sleeping problems, because it can work as a form of self-medication, making them feel better for a while. But excessive alcohol consumption can cause situations in large-scale reception centres or small-scale residential groups that escalate to such an extent that the police have to be called in. This can be detrimental for a child. If they come into contact with the criminal justice system, they run the risk of losing their residence permit.

It is important that staff within asylum centres and at schools identify risky behaviour at an early stage. Using lists of warning signs can be helpful with this. Unaccompanied children must be properly informed about the health risks of alcohol and drug use, and about addiction and the consequences of unacceptable behaviour.

At some point, children start to navigate between the culture of their family and the new culture. This entails risks, because the behaviour in modern Western society is often not tolerated in their own culture. Children can get into trouble with their family in Europe because of this, as their behaviour is seen as a violation of the family honour. It helps in cases of family reunification if the family is involved in the 'westernisation' of their child, preferably right from the start, so that they can come to understand that this is now becoming 'normal' for the child. That can prevent problems during family reunification or gossip in the community. There are also examples of girls who were so westernised, and settled, after many years of growing up in Europe, that returning to their country of origin was recognised to be a risk. In some countries, this became a ground for protection and a reason to grant a residence permit to the girls and their families.

3.4 Family expectations

A child contributes to the honour and well-being of the extended family if they are successful, and send money or are able to arrange family reunification. An unaccompanied child wants to meet the expectations of their family in this respect. In the countries from which the children flee, there are sometimes realistic – but often unrealistic – ideas about the possibilities of obtaining asylum status, building a successful and prosperous life, or quickly achieving the desired family reunification. Information is distributed via social media, but this information is not always correct. This can put a lot of pressure on the child. Unaccompanied children say that they cannot properly explain to their family why they are not sending home any money – or enough money. That is, after all, why they are in Europe, where ‘the streets are paved with gold’. Often the family also knows other people in the same area as the child who do send money home from Europe, or who did succeed in arranging family reunification within a few months. This puts a great burden on the child, especially if the family thinks it is the child’s fault. They are often told that they just have to do their best.

A common phenomenon entails migrants sending friends and family in the country of origin photos of themselves next to any beautiful car to suggest they are successful. A 30-year-old refugee says his grandmother in Somalia tells everyone how good he is to the family when he sends her money. Her prestige increases because of this. That way he not only contributes to her well-being, but also to the honour of the extended family. The only problem is that the reverse also happens. In that situation, the grandmother calls and tells him that his second cousin has sent a large amount of money to his mother, his grandmother’s relative, and that his grandmother feels ashamed because it has been a while since her grandson sent her some money. He then feels the pressure that he must also send money so that his grandmother will no longer be ashamed of him. His grandmother does not know that he actually has very little money himself.

It can be very helpful if a professional working with the child calls the family and explains that the child has to go through the asylum procedure first, and that they are obliged to go to school and therefore cannot work. Or says that the family reunification application has been filed according to the rules, but it will take some time, or perhaps the family must first send documents to demonstrate the family connection. It can relieve the child of the burden if the family is told that it is due to the rules that everything seems disappointing, and not due to the efforts of their son or daughter, who is really doing their very best. Additionally, the family can be encouraged to take action during this contact. For example, by telling them how they can contribute to ensuring that the asylum procedure or family reunification is successful. One way for them to do this could be to look for evidence that supports their child’s asylum claim, or to raise money and get the documents necessary for family reunification.

The future may involve a temporary or permanent residence permit, succeeding in family reunification or having to wait for it, or thinking about returning to their own country: all subjects that play a major role in the lives of this group of children. Chapter 7 looks in detail at that future, but first the physical and mental health and behaviour of unaccompanied children will be discussed.

3.5 The story of Abdullah: his first experiences in Europe

Abdullah⁴ fled Syria when he was 15 years old. He lived with his father and mother, brother and three sisters in a refugee camp near Turkey. His father was injured in the war. He has shrapnel in his leg and that will not heal. He was therefore unable to flee, so decided that Abdullah should go. Abdullah fled by sea via Turkey to Greece with the help of a 'travel agent'. The boat made it, and almost everyone on the boat arrived safely. Abdullah went from Greece to Germany with a truck. He was taken into care by the youth welfare authorities. Once they had further clarification of the situation, an asylum application was put in. Abdullah was initially placed in a youth care home and later transferred to a residential group in a medium-sized town in the centre of the country. He lives there with 12 other boys from different countries, and there is round-the-clock support and guidance. Abdullah has been assigned a guardian, and has received an interim asylum permit until there is a decision about his asylum claim. According to German law, the request for family reunification can only be dealt with if asylum is granted. The asylum procedure itself takes 6–18 months.

Abdullah tells his story: "I was so happy when I heard that I had an asylum permit and could apply for family reunification. I called my father and he was also very happy. Fortunately, I had some important papers with me, and the application could be made immediately. But my guardian said: 'We first have to wait for the final asylum decision, and then we have months to do the application,' so he wasn't in a rush. That made me angry. And my father kept telling me on the phone that I should hurry up because their money was running out. I kept telling my guardian to fill in the papers, but that didn't help at first. I also argued with other people. I was really agitated."

"Then I was transferred from the care home to a residential group. That was normal, they said. But my family reunification had still not been applied for, and now I had a new guardian. They said this is your permanent one and the other one was a temporary representative. I don't see the difference. They all talk about papers and waiting. The new one said that she wanted to help me but that the German government hardly ever allows family reunification anymore, even if you are given asylum. She also said

⁴ *Abdullah's story and name are fictional for privacy reasons. But all experiences are based on what many unaccompanied children have told.*

that she didn't know exactly how it works because she was new to the job. She said she would find out. I was getting more and more upset and my father kept asking why the application hadn't been done yet."

"We live here with 12 boys from all kinds of countries, from Iraq, Afghanistan and also a few from Syria. I like it very much. One boy has already applied for family reunification. Another one hasn't applied yet, but he also doesn't know whether he wants to. His adult sisters, who are 18 and 19, will not be able to join him here. He's only found that out now, and he doesn't want to cause his family any pain, because not the whole family will be eligible for family reunification and his sisters will have to stay behind without their parents. Then it's better for him to stay here without parents because he's a boy. It's difficult for him, but I understand him. We talk about it a lot, which is nice. And now it has also become unclear whether family reunification is still possible in Germany at all. I think I should have gone to another country."

"I have to go to school here, a kind of baby class where we only learn German, practise words and stuff, really very childish. I was at a lyceum in Syria and the rules are stupid here. You don't get a money card to buy food and other stuff, like when I was first in Germany. They cook vegetarian food for us, or food without pork, but it really doesn't have much taste. We hardly eat it and then we're hungry. We are allowed to grab some food in between the main meals, but not during the night. I don't understand, they are so rich here..."

"What I also find stupid is that we're sent to bed at 10 o'clock because we have to go to school in the morning. It's just really childish and it's actually getting worse in the group. So we get punished by our pocket money being stopped or by a timeout. There is more and more arguing. I think things would be different if they didn't treat us like little kids, with all those ridiculous rules, and would involve us more in things. "

"It is quite annoying here, although we also have a lot of fun with the Syrians, and we sometimes drink alcohol even though we're not allowed to. We do argue a lot with the others or with the staff. I don't tell my father about that, especially not about the drinking, but also not about all my complaints and arguing with the staff. He would be ashamed of me because I am not thankful that Germany is taking care of me. He would think I'm childish, not grown up. After all, I fled to help the family, but that's why I want that money card, so I can send them money. Their money is running out, my father says, and now he's afraid that there won't be enough money to pay for the airline tickets."

"I am glad we're learning to cycle and swim. Of course, I could already do that, but they think we can't cycle well enough and the water is very dangerous they say. It

doesn't look it, but a boy did recently drown in the river here. We also get sex education. For some kids in the group that's very strange, as they don't know anything about it. I think it's good they do it. One boy has even had sex with a girl, and yes, then you should know about infections and condoms, otherwise you can get into trouble and we already have enough problems."

"Four of us have already been fined in the train, including me. We didn't know how it worked with those tickets. We just sat down on the train, as no one stopped us or wanted to see our tickets. We went to see our friends from the home where we were placed in the beginning. On the way back, we were checked by ticket inspectors on the train, and now we have to pay money, quite a lot of money, I don't know how much. But we have to pay, my guardian says. It will be taken from our pocket money, but that isn't very much anyway. It's so annoying, I try not to think about it. Just like I try not to think about that toddler who fell overboard and drowned. At night, it often comes back to me, together with the mother's screaming ... it's really very frightening..."

"Fortunately, someone is coming here tomorrow to explain the asylum procedure and help us with the application for family reunification. I spoke to her on the phone, she speaks Arabic. I trust her because she's also a refugee and is very nice. I think it will be settled soon. That would be so good, then I can call my father again and tell him."

4

The health of unaccompanied children

What about the health of unaccompanied children? Do they have any illnesses or traumas? Are they in need of treatment and where can they receive that treatment? How do you deal with trauma in the asylum reception, foster family or classroom? What are the right things to do and what should not be done?

The stories that refugees tell about their flight and war experiences often deeply touch people who themselves grew up in stable and prosperous societies like those of most of the EU Member States. In this regard, it can be helpful to know something about the human stress response system, psychotrauma and intercultural health perceptions. That helps us to understand an unaccompanied child's situation, the reasons for their behaviour, their needs and how they should be supported.

4.1 Physical and mental health

Upon arrival in Europe, refugees often suffer from physical exhaustion, dehydration, hypothermia and trauma. This often coincides with poor living conditions, an unhealthy lifestyle or chronic illnesses impacting their physical and mental health (European Commission, 2020). During the flight, refugees are at great risk of contracting diseases, such as scabies, tuberculosis, or venereal diseases.

Monitoring for common diseases that can pose a threat to public health, such as tuberculosis and certain sexually transmitted diseases, takes place in many Member States. In various countries, including Denmark, newly arrived asylum seekers are invited to a medical reception meeting with a healthcare professional. The majority of them do accept this invitation, as it offers them the possibility of medical care. Professionals often have a legal duty to promote the health and welfare of children, so that includes unaccompanied children. Health education is also given, with attention paid to the importance of supplemental vitamins due to the lack of sunlight (especially in northern Europe) and the importance of contraception and safe sex to prevent unintended pregnancy and infections. In many Member States, the children are told about the country's

customs with regard to gender, as well as traffic regulations and the dangers of swimming in open water. There are differences between the Member States in the way in which information is shared with children, and the phase during which this occurs. In some countries, it is done upon arrival, whereas in other countries it is part of the 'integration course' for those who receive positive status.

Refugees have often experienced unpleasant and life-threatening situations due to war, violence and persecution. This also applies to unaccompanied children, who were often exposed to unsafe conditions in Turkey or Libya, for example, where they lived in inhumane situations and were exploited. The crossing to Greece, Italy or Spain in overcrowded and unseaworthy inflatable boats is also traumatic for many children, just like their experiences at the borders of south-east Europe, where they are often sent back in a very violent way. Since the formal closure of the Balkan route, this kind of pushback policy has grown alarmingly, and is increasingly being enforced at sea. The Border Violence Monitoring Network concludes that five years on from the 'summer of migration', physical and system-based violence at borders remains incredibly high in the Balkan region and Greece (June 2020).

An Afghan boy spoke of what he had witnessed: "I think I tried to cross the border 20 times. Each time we were beaten back by the police. They took everything, including my phone. Since then, I've lost contact with my parents because their phone number was in my phone. It was terrible, we lived in the forest and often had no food."

Once they manage to cross the border, the situation in Europe is often very stressful for them. Dire conditions in Greece, overcrowded asylum centres, immigration detention in some Eastern European countries, complex asylum procedures, risk of rejection or a Dublin transfer, and the enormous importance of eventually achieving family reunification. It is particularly stressful when migration is forced, having to leave family in often difficult or dangerous circumstances and leaving behind the cultural context that is familiar to them, plus their shared norms and values, customs and religion.

It is striking how these young refugees are often still positive, hopeful and resilient considering their circumstances, but this does not apply to everyone. There are limits to people's ability to deal with traumatic events and long-term stressful situations.

A Syrian boy said: "I know exactly when my health problems started. It was on the boat, halfway between Turkey and Greece, when we ran out of fuel and everyone panicked, including me. I couldn't get out. At one point I didn't know whether I was human or an animal. It was awful. No, I don't know how we were saved, I don't remember anything about it anymore. And after that it was also terrible, always moving

from camp to camp, which is especially not good for children like me who are on their own. It was unhygienic, we slept with a lot of people in small tents, the rats were everywhere. In Greece I was put in an institution for a while because I was very aggressive. They tied me up and gave me injections until I forgot everything.”

Unaccompanied children can also start feeling insecure because of their own responses and behaviour that they have never experienced before, and that are caused by the trauma and stress. In addition, the perception of illness, and the search for a cure, may be different from what they are used to (Oppenheim et al., 2015) and this can increase the stress. How complaints such as nightmares, despair, or sudden aggression and hyper-alertness are experienced, and how they are explained, depends on the culture. Intercultural knowledge of health perceptions is helpful in this regard.

4.2 Health perceptions from an intercultural perspective

Wherever people are confronted with illness, suffering or problems, they look for explanations for the causes and for appropriate treatments. The personal theory of disease and healing illustrates this (Hermans, Raes, & Orlemans, 2017). Similarities and differences in explanations and causes can be found within a society, and between different societies. For example, one person may attribute their illness to an inner disturbance, while another person with the same cultural background attributes the same symptoms to external factors.

Communication problems can emerge when a care provider approaches the illness solely from their own perspective on physical or mental illness and treatment, without exploring the child’s views, especially when their perspectives are very different. This may give the child the feeling that the care provider does not understand them. Or the child may become convinced that the care provider cannot help them after all (Kleinman, 2005). It is therefore important to explore, together with the child – and preferably with their family too – what they consider to be the cause, and to look together for treatment that can ease the symptoms.

In many cultures it is common to seek a physical explanation for all kinds of complaints. When psychological distress is experienced in the form of somatic symptoms this is called somatisation. No distinctions are made between psychological and physical complaints. In such cultures, psychological complaints only exist in the form of being psychologically ill or being ‘crazy’. In many cultures around the world, this is a great taboo and a violation of family honour. If a family member is considered ‘crazy’, the whole family’s honour is tarnished. Posselt et al. (2017), in their research into improving the provision of services to young people from refugee backgrounds, show how people can experience stress if others in their community find out that they are on treatment. There is often a sense of shame in the community about using mental health services.

Once in Europe, when the children visit a doctor to resolve a health concern, they might be confronted with a very different approach than what they are used to. Children might visit a doctor with the expectation of being prescribed strong medication, as they would in some countries (Mangrio & Sjögren Forss, 2017). If a doctor in the Netherlands, for example, then only prescribes paracetamol, without a further examination or referral, as is quite common there, the child might feel that they are not being taken seriously. An unaccompanied child may actually have a different explanation for the complaints they experience but are not yet ready to talk about that. They are generally hesitant to talk about traditional or spiritual explanations of illness, because they are worried that it might be considered strange. They often feel awkward about it. But once they understand it is accepted, they will say that they suffer from, for example, 'the evil eye' or 'being possessed by spirits such as a jinn or the devil'. In traditional medicine, the solution for this is: the spirits or the evil eye must be cast out or pleased.

During the flight, unaccompanied children often use traditional remedies such as exorcism. In the absence of an imam or priest, they pray together and cast out the spirits together. Prayer helps keep spirits at bay in many cultures. A guardian with an Arab-Islamic background was able to recognise that an Eritrean Coptic Orthodox boy saw the evil eye as a cause for his symptoms of anxiety. This made it easier for her to talk to him about it, "because in my culture, we are familiar with the evil eye as well".

What often proves helpful is to indicate that you are familiar with traditional healing and spiritual explanations. Together with children or adults from the same cultural background, you can then look for an approach that matches the child's beliefs. By taking their beliefs into account, the healing can progress step by step. A study by Majumder et al. (2018) on potential barriers in the therapeutic relationship with unaccompanied children in mental health, indicates that the child prefers to have a care provider from the same background. Behaviour and the interpretation of complaints or symptoms in spiritual and traditional terms (such as the evil eye) are often interpreted by Western professionals as signs of dissociation, delusions or psychosis.

Although this could actually be the case, it should not be assumed without further in-depth exploration of the cultural context. Using an intercultural mediator can help you to understand the young person's mental health problems and to look for solutions together. An intercultural mediator is someone from the young person's culture who can help to bridge the cultural gap as well as translate the language. This could be a professional or someone from the young person's network, such as an imam or priest. There were very positive experiences with using intercultural mediators within the culturally sensitive trauma-informed interventions for unaccompanied children that were part of the Resilience project in the Netherlands. The intercultural mediator 'translates' the cultures for the therapist and the young person (Van Es et al., 2019).

One intercultural mediator talked very enthusiastically about how happy some children had been with her visit to their small residential group. There were quite a few issues in the group which their mentors could not resolve, so they had asked for an intercultural mediator. The children were immediately at ease with her. They asked her all kinds of things and showed her their rooms. Very soon they were telling her about how the rules there bothered them, and how concerned they were about the asylum procedure. Eventually they told her about the evil eye which was troubling one of the children, making the boy aggressive at times. They wanted a priest to come, but according to the rules no one from a church was allowed to visit the house. So the mediator discussed the problems the children had – and the problem of the evil eye – with the children and the mentors. They soon came to some agreements about the rules, and a priest was found who could help the boy with the evil eye.

Some of the complaints or symptoms described here are more likely to be referred to in Western-oriented health perceptions as anxiety, depression or trauma-related symptoms. Insight into how the stress system functions, and how post-traumatic symptoms develop, makes it easier to understand the behaviour of traumatised or stressed children, enabling you to find a way to make a better connection with them and their perceptions.

4.3 Mental health problems

We know that mental health is often a taboo subject, and that perception of the connection between health problems and their causes can differ greatly between cultures. The consequences of traumatic events often overwhelm unaccompanied children. They may not be familiar with mental health problems like these, so may not recognise or understand these complaints or symptoms themselves, especially without any parental guidance. This makes them feel very insecure. They may interpret their complaints or symptoms as depersonalisation, witchcraft or a loss of inner strength. Stress is something that unaccompanied children are familiar with, and most of them know the concept as they often experience severe stress.

Stress

Unaccompanied children have to deal with the stress of the asylum procedure, uncertainty about their future prospects, being uprooted from their country of origin, missing their family and concerns about their family's well-being. Many were traumatised before and during the trip. As a result, a large number of unaccompanied children suffer from health problems caused by trauma and chronic stress.

Stress is the emotional and physical response to potentially dangerous or adverse situations. A certain amount of stress is needed to function properly and to estimate whether a

situation is potentially unsafe. However, when a person is exposed to a lot of stress for an extended period, the stress system can become so over-stimulated that making a proper estimation of what is and what is not dangerous becomes impossible. Someone with an overstressed system often no longer has a good sense of danger or unsafe situations.

There can also be a constant sense of danger, causing the person to be in a permanent state of hyperarousal. All the time, the person is hyper-alert, vigilant and agitated and can easily go into fight or flight mode. This coincides with a reduced ability to concentrate and a poorly functioning memory (Struik, 2010). Unaccompanied children might suffer from a hypersensitive stress system, a small window of tolerance, and many triggers. As a result, they quickly go into a state of hyperarousal or hypo-arousal, or the period lasts for a long time (see box). The behaviour that goes with this therefore stems from an instinctual reaction to the experience of actual or perceived danger. To the environment it seems as if the child is becoming aggressive “out of nowhere, for no apparent reason”.

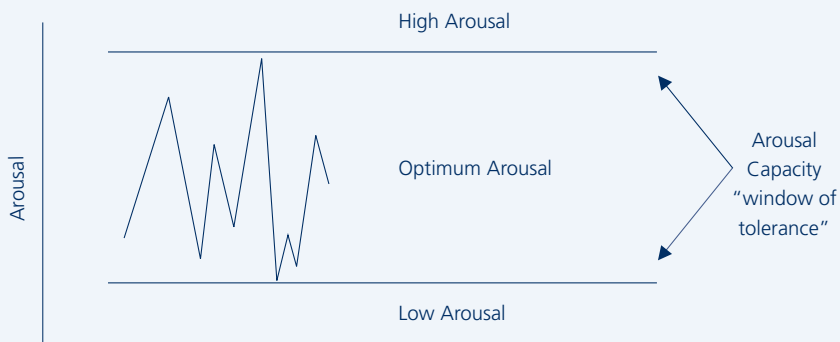
Mental health problems related to chronic stress and trauma can have a great effect on how children function. Their cognitive capacity may decrease due to these problems and the intensity of the emotions complicates adequate emotion regulation. Children can become overwhelmed by emotions and thoughts, and relive their experiences to a point where their capacity to remember and store events decreases (Struik, 2010). This explains why unaccompanied children find it hard to motivate themselves to go to school, especially in the early days.

Stress system

The human stress system is controlled from the primal brain that drives the immediate response: the response to perceived threats. Neurotransmitters such as adrenaline and noradrenaline are released, which increases the heart rate and muscle tension. This is a hyperarousal state of the body aimed at averting immediate danger. A second system, the HPA axis, provides ‘fuel’ to ‘sustain’ this hyperarousal reaction in the longer term by producing the hormone cortisol (Stöfösel & Mooren, 2010; Struik, 2010). The zone of stress that can be tolerated is also called the ‘window of tolerance’ (Ogden & Minton, 2000). When the stress remains in this zone, a child (or adult) can experience the emotions, body sensations, and thoughts associated with a stressful experience without having to activate the defence system and process the experience effectively. This also applies to traumatic experiences. When the level of stress is no longer tolerable, and the stress system perceives too much danger, the defence system is activated. To avert the danger,

the body can put itself in a state of heightened arousal (hyperarousal). In this state, there is an immediate reaction to the imminent danger. The heart rate and muscle tension increase, the child is vigilant and alert, the senses become hypersensitive. Everything is focused on the impending danger. The hormones dopamine and norepinephrine are released. It is a state in which active defence against danger is used, such as fight, flight or active freeze.

If active defence is an obstacle to survival and the danger cannot be averted, the stress system switches to passive defence. The body prepares for very serious injury, some sort of shock, and conserves as much energy as possible. The body enters a state of reduced arousal (hypo-arousal). The brain temporarily loses the ability to estimate danger, and the ability to think and solve problems is turned off. A state of hypo-arousal is accompanied by, among other things, a slow heartbeat and shallow slow breathing, reduced blood flow and a low temperature. A stream of opiates is released, soothing the pain and creating a kind of calmness. Passive survival responses include submission or freeze (paralysis). Dissociation can occur in both states of arousal (Ogden & Minton, 2000; Struik, 2010).



The window of tolerance (Ogden & Minton, 2000)

Psycho-trauma

The literal meaning of trauma is wound. A wound needs to heal, and that may take some time. Most people are able to deal adequately with the consequences of shocking events, but some do develop serious problems. The event in itself does not determine the symptoms experienced. These are partly the result of, for example, previous traumatic experiences, how resilient someone is, the social support they are given and genetic predisposition. Van IJendoorn, Professor Emeritus of family pedagogy at Leiden University, concludes in his book about childrearing across borders (2008) that differential susceptibility predicts that some children are more susceptible to

environmental influences than others, in a positive or negative sense. Various studies conducted by his research group showed that genes related to the dopamine system in particular make children more or less receptive to their environment. Certain combinations of these genes can prevent some children from developing a post-traumatic stress disorder after abuse or neglect, or externalising and outward-focused behavioural problems.

We speak of post-traumatic mental health problems if recovery takes too long. The most common are intrusive re-experiencing, avoidance and increased irritability. Re-experiences can be defined as highly uncontrollable and recurring memories in which elements of the trauma are felt, smelled, seen and heard again. The autonomic nervous system is often activated too. This is what makes the re-experiences so overwhelming and 'real', although the traumatic event took place in the past, in another place, and the actual present is usually safe. Re-experiences continue to make the traumatised person extremely anxious because they are very realistic and usually lack a sense of time and context (Jongedijk, 2014). They can also be triggered. One detail of the negative memory can activate the entire network of memories but also expand the negative network of memories (Struik, 2010). This may lead to a worsening of the post-traumatic symptoms.

A natural response to fear is avoidance. The traumatised person avoids what they fear. A key component of post-traumatic mental health problems is the fear of recalling traumatic events (Jongedijk, 2014). One of the ways that this manifests itself in unaccompanied children is that they avoid answering well-meant questions that professionals ask out of curiosity. But avoidance can also be a part of not wanting or daring to go to bed, for fear of being overwhelmed in their sleep by intrusive dreams of re-experiences or nightmares. So sleeping problems due to nightmares, or a fear of them, are very common among unaccompanied children.

Avoidance behaviour can also be the result of shame or guilt. This is often seen in unaccompanied children who had traumatic experiences as victims or witnesses of sexual violence. Many of these boys and girls do not talk to the professionals who are working with them about their experiences, because they are perceived to be shameful. Nor do they talk about it among themselves, even if other children have similar experiences. The risk of losing their honour is also part of this. If their partner, family or community discover that the boy or girl was raped, there is a risk of rejection. Hyperarousal can lead to increased tension, which can manifest itself in several ways. The child could be hypervigilant, anxious or easily agitated, and have difficulty concentrating or sleeping problems. These symptoms can easily lead to sudden outbursts of irritability, anger and aggression, seemingly without cause. This is often seen in unaccompanied children, especially during the early stages after arrival, a stressful time for them.

Another response to psycho-trauma is dissociation. When dissociation occurs, the muscles weaken, the person is less approachable and a change of consciousness might occur as well (Jongedijk, 2014). Dissociative symptoms are part of the traumatic stress response and vary in severity and duration. Dissociative phenomena occur with any trauma. This mainly concerns amnesia (loss of memory) and a slight degree of de-personalisation. The person feels blocked in the present because feelings of the past overwhelm him or her too much (Stöf sel & Mooren, 2010). Dissociation can occur during a traumatic event, but also during a re-experience (Struik, 2010). A type of self-dissociation is self-harm. Damage to the skin can ease both physical and emotional tension. In this way, fears and repetitive negative thoughts might become less or disappear completely (Jongedijk, 2014).

Most people recover from a shocking event on their own. Several studies show that only 10 per cent of adults who have experienced life-threatening situations go on to develop disorders such as depression, anxiety disorders, addiction or a post-traumatic stress disorder (PTSD) and need professional help.

Other mental health problems

There is a considerable overlap between problems related to post-traumatic stress and depression. So these mental health complaints are often seen together. In refugees, this manifests itself in lethargy, lack of energy, and negative or even suicidal thoughts and actions. If refugees become suicidal, it is frequently related to having no prospects – perhaps because their asylum application has been rejected.

Sometimes, refugees resort to substance abuse: alcohol, soft drugs or other medication. This can help them to avoid traumatic memories or feelings of shame, and to reduce increased irritability, if only for a while. But they obviously run the risk of addiction.

Loss of something or someone, and the mourning that goes with it, is what we all have to face at some point. All over the world, mourning is accompanied by rituals, so-called rites of passage. Rituals are mainly characterised by the support they give to individuals and the community as they go through major changes in life. People can feel disrupted for a long time if rituals or ceremonies are not performed, or not done in the right way.

Most refugees are faced with a great deal of loss. They have lost loved ones, possessions and status, as well as symbolic acts that were familiar to them and a context in which to practise rituals together. Processing loss can be more difficult if there is a lack of meaningful cultural, religious, social or specific group context (Smid, 2020). It can leave people depressed, angry and anxious, which can increase aggressive feelings and behaviour.

Those who grieve may experience feelings of gloominess, psychological absence, intrusive thoughts, feelings of guilt, doubts as to whether they can take control of their life, and even hallucinations, states Dutch psychologist Van Hest in an article about mourning among refugees (2012). He adds that, during treatment, ceremonies can be useful for processing grief.

When guiding a child, a practitioner can ask the child how people deal with loss, death and grief in their culture. For example, a guardian was confronted with the following dilemma. A 12-year-old boy wanted to flee to the Netherlands to reunite with his critically ill mother. But the mother died just before his flight. The guardian, who had already arranged everything in the Netherlands in preparation for his arrival, wanted to discuss with the boy and his family whether it was still desirable for him to come. However, it was out of the question for the family to inform the boy of the sad loss. Everyone was expected to not talk about it. The guardian felt it was almost unethical not to inform the boy, but she complied with the family's wishes. The boy arrived in the Netherlands just in time for his mother's funeral and only then heard about her death. He was not shocked, and was very grateful that he could still be present at the farewell ritual.

Lingering grief can lead to psychopathological symptoms such as those of depression, anxiety, dissociation, compulsion, post-traumatic stress disorder and pathological grief. It may be advisable to organise appropriate intercultural psychological help in cases like these.

4.4 Help with psychological problems

There are several barriers to be overcome before children can receive help with psychological problems. Specialised and culturally appropriate services for refugee children do not always have sufficient capacity or are not available in every region. Yet, unaccompanied children are often treated for mental health problems. For a lot of these children, going to a psychologist or psychiatrist means you are 'crazy', a hefty taboo in many cultures. Not all of the children who do go to see someone go back a second time. Because what good does only 'talking' do?

Majumder et al. (2018) say that talk therapy, based on Western ideas about mental health, may not work in other cultures because of stigma and a taboo on talking about your private life. In addition, according to Jarlby et al. (2018), there is a risk of re-traumatisation being caused by traditional talk therapy, due to the conversations about negative experiences from the past. And the way most unaccompanied children cope is by focusing on the future instead of the past. Most of them have learned to deal with unpleasant experiences by not thinking about them, not talking about them. Having to

go back to those bad memories during therapy can be very frightening and feel unsafe, or even make them suspicious of the therapist. It is therefore also important that the counsellor or practitioner is reliable. That they 'say what they do and do what they say'.

This is another issue when it comes to treatment: distrust. Many young refugees have little trust in the healthcare system and fear authorities (Colucci et al., 2015). Young refugees believe that they are protecting themselves by not trusting a stranger (Majumder et al., 2018). It is a form of coping that has proved to be useful for a refugee. For any therapeutic intervention to be successful, there needs to be at least a basic foundation of mutual understanding between the treatment provider and the child. This does not mean that the child should completely trust the health professional, but they should feel safe enough to eventually open up to him or her. It is therefore imperative that expectations and possibilities are made clear and explicit at the start of the therapy. This means that it should not only be explained to the child, but it should also be verified that the child understands. A child must know what and what not to expect. Involving an intercultural mediator, or someone in the child's network, may facilitate this understanding.

Besides the taboo on being 'crazy' and the distrust, there are other reasons why young refugees may not want to receive treatment. Research by De Anstiss and Ziaian (2010) states the following possibilities: mental health is not their top priority at the time; they have little knowledge of mental health; they do not trust the healthcare system; the stigma that is associated with psychosocial problems and seeking help; social and cultural factors that influence how problems are understood and when and where help is sought; and the importance of safeguarding the privacy of the family. Majumder et al., (2018) and Vermette et al. (2015) also indicate that language is a perceived barrier for both young people and practitioners.

A qualitative study by Valibhoy et al., (2017) on the experiences of young refugees with mental health services in Australia found that treatments appear to be most helpful when they focus on topics that the young people themselves find relevant. In addition, the sensitivity of the practitioner with regard to the cultural background and the associated stressors has a major influence on the course of the treatment (Valibhoy et al. 2017). For successful treatment, it is therefore crucial to connect to how the young person experiences and views the problem and the solutions.

Anyone counselling an unaccompanied child should be very cautious when it comes to talking about traumatic events. This is because there is a risk of re-traumatisation after talking about them, and that could make the symptoms worse. Support and commitment are important if the child does want to tell their story. A listening ear

is therefore good, but beware of digging too deep. Allow the child to be in control, so that they can decide for themselves what they want to tell you. It can be helpful to come to an agreement about this. That makes it safe for the child to share something with you now, but not talk about something that was much worse, not yet anyway.

The asylum procedure presents the professionals working with the child with a dilemma when it comes to the child's stories. It is often in the best interest of a child to give the real reasons for their flight. But this can be very difficult for them. Practitioners have regularly witnessed children disconnecting or freezing completely during an interview (dissociation or hypo-arousal), which makes the problems worse. But by talking about their grounds for asylum, most children hope to get the procedure finished as soon as possible. They are often very strong and resilient in this situation.

In Austria, the focus in the stabilisation phase is on supporting inner resources and coping strategies rather than on processing past events. This is especially true for the whole duration of the asylum procedure, that is marked by an uncertain future and makeshift living conditions. The view here is that dealing with traumatic experiences in this situation, without a safe environment, is a no-go in psychotherapy for refugees. A feeling of internal safety can only be achieved after external safety has been established. This is also related to the frequency in which refugee children are moved in the initial phase, which does not allow them to have continuity in their therapy. A decision on whether or not to start trauma-related interventions in the initial phase after arrival should always be based on the individual situation and should be assessed by a mental health professional.

Most people recover on their own and with the help of their environment. This means that the post-traumatic stress reactions that are often highly present in the first days to weeks after a shocking experience will naturally diminish. Rapid pathologising should be avoided at this stage, so that natural recovery is given a chance. Social support, keeping the child well-informed about the situation, and psycho-education are helpful in that regard (Oppenheim et al., 2015; Jongedijk 2014).

Psycho-education is a low-threshold therapeutic intervention that is considered to be suitable and helpful for young refugees. Among other things, it focuses on normalisation. In psycho-education, people learn that their reaction is a normal reaction to an abnormal situation in the past. Most people have no idea of the cause of their complaints or symptoms and how they relate to past events. It is important to state that they are not 'crazy'. A good comparison is that of a serious injury that can heal, even though the scars will remain. (Jongedijk, 2014).

It is important to activate the unaccompanied child's support network as soon as possible, or to make contact with family – wherever they are in the world. Shame is often an obstacle to telling family about the child's mental health problems and things that have happened. But the support and affection of their family is often helpful to children. Having support from fellow sufferers, and new friendships in the asylum accommodation, also benefits many young people. Psycho-educational groups can make a positive contribution to this.

Treatment of problems related to post-traumatic stress

If people are not able to deal with mental health problems on their own, treatment may be necessary. According to Jongedijk (2014), psychiatrist and clinical director of a mental healthcare provider in the Netherlands, and specialised in trauma treatment for war victims, the guidelines for PTSD treatment are unambiguous. Preference is given to trauma-oriented therapy such as imaginary exposure (IE), cognitive behaviour therapy (CBT) and Eye Movement Desensitisation and Reprocessing (EMDR). These are forms of therapy that can be used to explicitly address traumatic memories. In practice, however, they often appear to evoke tensions and fears in patients with multiple traumas. Many practitioners therefore opt for some form of stabilisation therapy. These are interventions that do not deal with trauma, but with other psychological and psychosocial problems.

In the treatment of refugees, Narrative Exposure Therapy (NET) has proved useful. The goal of NET is to help the person make a chronological narrative of their life, integrating the traumatic events into that life story. This is done using three pillars: lifeline, narration and testimony. It is a widely used treatment for refugees that has proved to be effective.

Stress and trauma-related mental health problems have a significant effect on behaviour and that will be discussed in the next chapter.

A Swedish study has found that unaccompanied children are more often prescribed psychotropic medication than accompanied and native children (Axelsson et al., 2020). This tendency has also been seen in Denmark, where children sometimes come to an appointment with a psychologist expecting to get a prescription for psychotropic medication. Psychologists therefore always begin the sessions by explaining that medication is not a likely outcome, in order to give the child the chance to reconsider.

4.5 The story of Rahel and her sleepless nights

Rahel⁵ is 16 years old and from Eritrea. She has been in the Netherlands for several months after a flight that took more than a year. She spent ten weeks in asylum accommodation and now lives in a small residential group with seven other Eritrean girls.

Rahel tells her story: “In the beginning, I was very happy that I’d arrived in Europe, as I had heard great stories about it. People said you get a house and money and your family can come too. But now it all turns out to be different. Everything takes a long time and your family cannot really come. It will never work out because it requires so many papers. I have to make money because my mother has to pay a fine because I fled. That’s how it goes there, and my mother can’t afford it of course. I also have to give money to the church.

Now my mentor has found a job for me, doing the dishes in a restaurant every evening. We are all Eritrean girls here. On the one hand that’s nice because we understand each other well. For example, we always sleep in one room as we are so used to that. Here, they think you should sleep alone, but then we don’t sleep at all. Actually, we are all scared at night and it’s nice to be together. But we always speak Tigrinya to each other, and that doesn’t help us learn the language here. “

“Some Syrian, Iraqi and Eritrean boys live nearby in another small group. We meet them a lot. We go to church together and often pray together, with the Eritrean boys that is, not with the Syrians and Iraqis as they’re all Muslims. I knew some of the girls and boys already. One was kind of my husband, he protected me from other men during the flight. And now he still wants me to be ‘his’ but I don’t want that anymore. It is not right if you are not married. If my family knew ... they would gossip about me and I wouldn’t be able to get married because I’m no longer a virgin. During our journey, when we were in Sudan, we were all given a contraceptive injection so we couldn’t get pregnant, but now they say here that it only works for three months. And also that you can get diseases if a man does ‘that’ to you. Here, they think that you can also say “no” if a boy or a man wants it. And that he can go to jail for it. That is very different from what I know. It happened to all of us on the journey, very often, that was just part of the deal. We also knew in advance that very bad things would happen, that is just part of the journey. We all went through it, including the boys. Either it happened to you or you had to watch. I just don’t think about it. We never talk to each other about it, but at night you notice that we sometimes all wake up screaming from scary dreams. We then comfort each other, and that’s nice.”

⁵ *Rahel’s story and name are fictional for privacy reasons. But all experiences are based on what many unaccompanied children have told.*

“Sometimes when someone is possessed by an evil spirit or evil eye, we help each other too. It’s often very intense, when that happens the person screams and her whole body shakes. It’s really awful. We help to drive out the spirit by beating it out and by praying. The boys come to our home secretly and help too. But they don’t approve of that here, they forbid it. They don’t understand that it helps, they think very differently here. Fortunately, someone who’s also from Eritrea, but has been here for some time, explained to them that this is normal for us, and now they’re prepared to call a priest if someone is bothered by the evil eye. That’s good because it helps.”

“Prayer also helps. We do this every day, for hours on end. We started doing that on the way here, and it’s good, it calms me down. When I pray, I don’t think about anything, not about my mother and sisters, who I worry about a lot, and not about the future, which scares me. I actually like sitting alone in my room praying, but I also pray together with the other girls or we cook together if we’re allowed to.”

“I usually don’t go to school, as I can’t get up in the morning because I can’t sleep at night. And school is very difficult for me. I did go to school in Eritrea, that was fun and everything was easy. Here it’s very different, and you mostly have to learn the language, which is pretty boring, and I can’t concentrate properly so I just don’t remember what I learn. For a moment I do, but then I forget it again.

That makes me feel stupid and ashamed. I prefer to be at home in my room, I hardly ever go out. I also find it scary cycling with all those cars, and when you go by bus, all the people look at you. They think we’re strange, I think. We look different compared to the people here. We’re dark and small and our hair is different. And besides: if I don’t leave my room, the boy can’t bother me either. He thinks I’m still his, so he sometimes demands that one thing. If I’m not outside, that can’t happen and I don’t want to tell anyone about this, because then he could go to jail and I don’t want that to happen, of course.”

“Now my guardian thinks I should go to the doctor because I stay in my room and don’t go to school. He says I have to go to school according to the rules here. He says that what happened on the way might still be bothering me and a doctor can help. I did go once, but I had to talk about what I’d been through. I’m really not going to do that, because everything will come back to me again and sleeping will be even more difficult. My mother always said: ‘Don’t think about it, then it will bother you the least.’ Yes, if only my mother were here, I would be much better.

They say that you can ask for family reunification, but that it is very difficult for Eritreans, because we cannot get the correct papers. We simply don’t have any papers, our country is not like that. My guardian applied for family reunification for me, but also

says he's not sure if it will work out. I don't know what to do anymore, I don't like it here. I will never get used to this country with its strange rules and tall people. And it is so cold here, you never see the sun."

"My mother tells me to focus on school, get my degree and learn a profession and that it will pass, that I just have to get used to the new country. Maybe she's right and I'll get used to everything once I live on my own with other girls and we can live our own lives, and then study and go into an interesting profession. I would like to become a nurse. It's good because you help others, and I can also earn money to send to my mother. But first I have to sleep better."

How do unaccompanied children behave? Why is their behaviour sometimes incomprehensible or inappropriate, and what makes them so resilient? What effect do trauma, stress, missing their family, migration and cultural differences have on their behaviour? This chapter examines the impact of the symptoms of trauma and stress, the cultural gap and resilience on behaviour, and how to deal with that.

5.1 Behaviour seen from an intercultural and trauma-informed perspective

The previous chapter described how hyperarousal occurs in many unaccompanied children, especially during their early days in Europe. It manifests itself in agitated behaviour, caused by chronic stress and triggered trauma. This behaviour can also lead to aggression, because in a state of hyperarousal someone responds to danger – or perceived danger – by fighting, fleeing or actively freezing. The fight response can lead to risky and unsafe situations and also to escalations, because of the reactions that it evokes in others.

Cultural differences play an important role in the perception and recognition of aggression. Hofstede et al. (2016), discussed the dimensions of masculinity and femininity with regard to the extent to which traditionally masculine and feminine traits are valued in a society. Traditionally, valued masculine traits include assertiveness, ambition and competitiveness. Valued feminine traits involve modesty, supportiveness and solidarity. Being tough, fighting and aggression are considered to be masculine values. Unaccompanied children generally come from masculine societies. They have learned that fighting and aggression in boys and men is valued, or at least accepted, while in many Western societies this is rejected and feminine traits are valued. Hofstede et al. (2016), labelled these European societies as highly feminine, with Sweden first on the list. Different standards may apply within certain social contexts, such as groups of football supporters who value fighting, aggressive behaviour and being tough, but this type of behaviour is generally rejected in many Western societies.

Unaccompanied children experienced a lot of violence and insecurity during the flight, and often prior to it. This also plays a role in their behaviour. Being able to fight well and be aggressive can serve a purpose, in helping you to survive and protect female family members. So it could be very useful and appropriate behaviour in threatening situations.

During transit, or their early days in reception, unaccompanied children often experience a lot of insecurity. Although many countries try to minimise the number of times children are moved between centres, these transfers do still frequently occur. Due to this, many children's lives lack stability in the first period after their arrival and during the rest of their stay. In many cases, they are actually still 'on the run', in 'flight mode'. They just want to continue travelling and do not yet have confidence in their mentors. The future is also still full of uncertainty – will the transit work out well for them, or the asylum procedure and family reunification? Young people can show aggression towards other refugees and their mentors due to the stress and trauma. This is particularly the case in a reception environment where problems with control can predominate, and where there is little room for human contact and sincere interest, such as in large-scale reception. Aggression is therefore seen less in small-scale reception and families. In Denmark, training reception staff in low arousal methods has proved useful for avoiding conflicts.

Understandably, aggressive behaviour and escalations of violence in reception lead to attempts to control the situations. The usual approach is to take corrective measures. These are punishments such as the withdrawal of privileges and sometimes a timeout or temporary transfer. This approach, correcting undesirable behaviour (and rewarding desirable behaviour) is a method that is widely used today in Western youth care and parenting programmes. Examples are, on the one hand, reward systems with stickers and, on the other, places for timeouts and cooling down from anger, or consistently ignoring undesirable behaviour. The strategy is based on the principles of operant conditioning, part of a learning theory based on behaviourism. The starting point is that all behaviour is learned (conditioned) in interaction with the environment.

Conditioning

Two forms of conditioning can be distinguished: operant and classical conditioning. The basics of *operant conditioning* (also called *instrumental conditioning*) is that it involves voluntary behaviour, which can be modified (conditioned) based on an anticipated reward or punishment. If displaying behaviour A consistently leads to reward and behaviour B consistently leads to punishment, an individual will learn to display behaviour A in order to receive the reward. In this way, the behaviour (response) is used to achieve something (stimulus).

Classical conditioning involves involuntary behaviour, which are often reflexes. Key terms in this are *unconditioned response*, *unconditioned stimulus* and *conditioned stimulus*. An unconditioned stimulus automatically leads to an unconditioned response. For example, salivating when smelling food, or quickly shutting your eyes when something suddenly approaches your face. This unconditioned stimulus can become associated with an initially neutral stimulus. Eventually, the neutral stimulus would invoke the same automatic response as the unconditioned stimulus, and thus would be called a conditioned stimulus. However, if the conditioned stimulus is then presented numerous times without the unconditioned stimulus, the association fades and eventually becomes extinct.

From Pavlov's classical conditioning experiments, we know that he combined a neutral stimulus (sound) with an unconditioned stimulus (food) numerous times. However, it is also possible that an event is so intense or severe, that a single experience is sufficient to establish this association.

Consider the behaviour that occurs after a child was hit by a car. The child has had a fear of cars ever since. When they hear a car arriving, it evokes an association with the accident, resulting in an automatic physical (conditioned) response: fear. To avoid this unpleasant reaction, the child will avoid cars and eventually, for example, not want to go outside anymore. Since this does not allow the association to fade and become extinct, the symptoms may increase instead of decrease. The chain of association continues to expand. This association has been acquired – one stimulus is associated with the other. It is therefore not primarily about the association between the stimulus and the response (Korrelboom & Ten Broeke, 2014). This can make it very difficult for people in the child's environment to understand where the behaviour is coming from.

After all, the fear of being outside cannot be understood if its cause – the accident – is unknown. This acquired association can also be reversed by, for example, exposure. That means restructuring the dysfunctional idea that every car causes a collision and that it is always dangerous outside. In a safe therapeutic environment, the child can reduce this fear by first, step by step, exposing it to 'outside' and then to 'cars' and allowing it to experience the fact that nothing happens. The fear will then subside. Behaviour is normalised again and thoughts become functional, i.e. cars can hit you, but not every car hits you. And you can stay in control by simply watching out.

When the unaccompanied child's behaviour arises from triggers of trauma and stress, a corrective intervention based on punishment and reward will be ineffective. After all, this is not learned behaviour that aims at an effect (functional), but behaviour that is a reflex reaction to perceived danger (instinct). According to the principles of operant learning theory, this behaviour cannot be unlearned, because it is not an operant behaviour. It is not aiming to evoke a particular stimulus (rewarding effect), but simply a reflex, classically conditioned behaviour in response to an unconditioned or conditioned stimulus. In these stress situations, the stimulus is often a trigger linked to the trauma, or a reaction to perceived danger. A response aimed at the trigger itself, the stimulus in classical conditioning, is then effective. This can be done, for example, by restructuring cognitions or changing dysfunctional thoughts about the perceived danger.

A well-known example of this in the case of refugees is the civil defence sirens that are regularly tested in many European countries in case war should break out or in case of other emergencies. The sirens sound at a fixed time, everywhere in the country. Residents are used to that and know it is a test. Refugees are informed about this, yet they often panic and their reflex is to seek safety. A refugee who fled a war has learned that a siren warns about bombing. An imminent bombardment evokes fear (danger) and a reaction (flight or active freezing). In this case, the learned association is the siren. This is very functional if you are in a war zone, because it provides the opportunity to find a safe haven in time. Once in Europe, the siren is not a bomb warning, but just a siren test. The fear response evoked by the siren is therefore not helpful. The learned association has now become dysfunctional. The solution is to change cognitions about the link between the siren and the threat of war. Evidently, this fear cannot be unlearned by means of punishment and reward, because in this case fleeing out of fear is not operant but classically conditioned behaviour, a reflex to perceived danger.

An example of how to explain dysfunctional thoughts to a refugee

“You are used to fighting to solve problems. That was really necessary during the war and the flight, and it is a natural response to danger. It probably helped you a lot, and that is why you made it, which is great. But it is not necessary now, because you are safe. Fighting as a first response is no longer useful. Besides, it is not nice for yourself, because I never see you really relaxing or making friends. In situations that make you think of war, you can learn to change your automatic behaviour by realising that you are now safe, and by recognising the triggers that cause that automatic thought of danger. But you can get help too.”

It should also be taken into account that unaccompanied children often do not understand the kind of punishments given in Western society, such as privileges being revoked, a timeout or having to apologise. Different principles of parenting and influencing behaviour apply in the cultures that most unaccompanied children come from. In those societies, undesirable behaviour is punished, and the more the behaviour affects family honour, the more severe the punishment. Behaviour that does not affect family honour can also go unpunished. Desired behaviour is ignored, because that is what is expected. So a young person knows that they are behaving well if they are not punished. This is different from what is customary in Western upbringing, where desired behaviour is stimulated according to the principles of operant conditioning.

Past experience shows that recognising the cause of the 'inappropriate' behaviour of an unaccompanied child can be helpful. Does it concern behaviour that arises from trauma triggers and/or a high stress level, perhaps hyperarousal, or is it mainly learned survival behaviour due to insecurity or to get something done? In other words, where is the behaviour coming from?

If the inappropriate behaviour arises from hyperarousal or trauma triggers, there is little point in imposing a punishment. The behaviour stems from a reflex, after all. Understanding and acknowledging the intensity of the emotions provides a good opportunity for connecting with the child. From there, the child can look for ways to see these kinds of violent outbursts coming, for example by recognising rising tension and triggers. The child can then learn in a cognitive way to anticipate the escalation by getting out of the situation in time. Relaxation exercises can also reduce the increasing tension. It can be helpful to find out together with the child what used to help them relax, or what their family did when stressed. In this way the child gets a grip on their situation, a feeling of control. Treatment for the trauma symptoms is also important, of course, if they do not decrease or even get worse over time.

Survival behaviour has usually been learned, in order to achieve something. Working together with the child and, if possible, their family, you can look for corrective measures that are clear to the child and will help to change the undesirable behaviour.

Reflecting on the 'wrong' behaviour to teach someone to behave differently is also common practice in Western culture. A young person needs to understand why the behaviour is wrong and to apologise. This is an interesting and often underestimated difference between a 'guilt' culture and a 'shame' culture.

Finally, professionals should take the time to get to know the child, to invest in the relationship. Knowledge about the effect of trauma and culture is relevant, but, as

is always the case, the right response to problematic behaviour is dependent on the individual child and their needs.

5.2 Cultural aspects of behaviour

Guilt culture versus shame culture

In general, the emphasis in a collectivist culture is on shame and in an individualistic culture it is on guilt. When someone in a collectivist culture has done something wrong, the whole family is ashamed. A wrong action leads to shame and loss of face for yourself and the group. Individualistic cultures are more like guilt cultures. Those who do not obey the rules feel guilty and are guided by their own conscience. A wrong action leads to a feeling of guilt and loss of self-respect (Hofstede et al., 2016).

In a typical shame culture, what other people believe has a much greater impact on behaviour than what the individual believes. The desire to preserve the honour of the family, the extended family or the community, and to avoid shame, is one of the most important foundations of shame culture. Shame is therefore considered to be the right and appropriate emotion. In individualistic Western cultures, shame is seen as the 'bad' and guilt as the 'good' moral emotion (Bedford & Hwang, 2003). These fit the norms and values of the Western European Christian culture, a culture where acknowledging guilt (confessing) and penance is the recognisable norm. You do something wrong, admit your guilt, undergo your punishment and apologise, and then you can move on – that is the essence of a guilt culture. The important values are honesty and acknowledging mistakes.

Unaccompanied children generally come from a so-called collectivist society with an associated culture of honour and shame. Here, it is very important to use denial to show that you are ashamed of what you have done because you have tarnished the family's honour with your behaviour. Confessing would mean admitting your shame and this would taint the family honour. Or, as one boy explained to the judge when asked why he continued to deny that he had stolen, even though it was shown on camera: "If I would admit that I had done it, I wouldn't seem ashamed of myself. I am really ashamed that I stole, so I can't admit it." This shows the unaccompanied child's predicament when asked to apologise for something they have done. Not knowing what to do, they say, "Just punish me, but I don't want to talk about it."

For someone from a shame culture, the initial desire is to restore the relationship and thus remove the shame. A mentor of an unaccompanied child described how she learned to wait before talking to a child about an incident. She would first do an activity with the child, such as playing football together, and only then, or perhaps a day later, talk about what had happened.

Shame culture

During a conversation about undesirable behaviour between an unaccompanied child in an asylum shelter and their mentor, a child from a collectivist culture would first try to restore the relationship with “We always get along well, right?” But a mentor from an individualistic culture would want to discuss the issue first, looking for solutions by means of apologies, agreements or sanctions. A child from a collectivist culture would rather avoid such a confrontation and look for a more indirect way to solve the conflict or problem. For example, by walking away during the confrontation and getting on with chores. This is their attempt to indirectly restore the relationship with the mentor. The mentor would put pressure on the young person to talk about the incident anyway, which makes the child feel even more compelled to talk about the shameful occurrence. It is very difficult for them to reflect on the shameful behaviour before the relationship is restored (Schippers et al., 2016).

Over time, unaccompanied children undoubtedly get used to the Western way of doing things, and they start to move between cultures. But in the initial phase it can be particularly helpful to try to understand the shame culture, and to continue to have a good relationship with a child, even if they do something wrong.

Honesty

A norm associated with the difference between guilt and shame cultures is that of honesty versus dishonesty. Honesty is linked to confessing guilt in a guilt culture. The value, or emotion, that comes with it is an appreciation of being honest. Dishonesty, or lying, is met with disapproval and presented as a negative. In a shame culture, lying can be seen to be necessary to protect family honour and prevent family shame. As the boy in the example explained to the juvenile court judge, or as a number of women, who had fled with their families to Europe at a young age, said with a smile: “Of course we lied at home and at school. We had to, otherwise we would not have been able to live freely as girls in this Western free society.” Others say: “We from an extended family culture do not think lying is good either, but being ‘flexible’ with the truth is possible, especially when it comes to family honour.”

When unaccompanied children are not being clear about what is the truth, it may be because they want to protect the family honour, but may also have something to do with the asylum procedure. Asylum seekers hear from family members and ‘travel agents’, and through social media, what they should say in order to have a chance in the asylum procedure. For example, unaccompanied children rarely talk about the

sexual violence that happened to them, not only out of shame but also because of the risk of expulsion by their community if the sexual violence becomes known. They then give other grounds for their asylum application, which do not always do justice to their request.

Power distance and respect

An important difference between collectivist and individualistic cultures is the power distance. The power distance is often larger in a collectivist society than in an individualistic society. This manifests itself, for example, in different degrees of inequality between social classes in society, in inequality between the pupil and the teacher at school, and in the distance between parents and children in a family. In a collectivist culture with a large power distance, children are expected to obey their parents. The children have great respect for their parents and older siblings who, in turn, treat the younger children with a great deal of care and warmth.

In individualistic societies with a small power distance, children in a family context are seen more as equals. Respect is less important and the children are encouraged to stand on their own two feet, to become independent.

These differences in power distance also apply in education. The inequality between parent and child continues in the inequality between teacher and student in cultures with a large power distance. In cultures like these, the teacher is treated with respect and is central to the learning process. In cultures with a small power distance, students and teachers are more likely to treat each other in a way that is based on mutual respect. The student is central to the learning process (Hofstede et al., 2016). In countries where the power distance is much smaller than what the child is accustomed to, this can be confusing for them.

When dealing with unaccompanied children, you often see that they are clearly used to respecting their elders, and have difficulty accepting the authority of young mentors. An older mentor said that she had told children in a residential group that noise in the evenings bothered her, because she needed to get enough sleep at her age. It was no problem at all. The children behaved differently when she was there, and she has had no problems with the group since, unlike her much younger colleagues.

Independence

The power distance dimension has an additional complication. Most unaccompanied children have learned to respect their elders, parents, teachers and employers, and people who are in charge. Fleeing on their own meant that they were suddenly adults,

at least in the eyes of their family and, therefore, in their own opinion too. Having also managed to complete the journey, they now expect to be treated with respect, the respect that an older person – an adult – receives. However, they are often confronted with a multitude of rules and restrictions in asylum accommodation that, in their view, are inappropriate to their independence and maturity. It makes them rebellious. One boy described living in a small residential group as “a prison of rules.”

According to an Irish study by Ní Raghallaigh & Gilligan (2010), self-reliance is a coping strategy among unaccompanied children. This also explains why these children do not simply want to give up their acquired independence once they are safe, even if the independence is not completely in balance with the tasks that an unaccompanied child is often facing at that time.

Some residential groups have had good experience with making rules together with the children. The groups become harmonious and few incidents occur. In another example of good practice, a school allowed young people to visit a gym during school hours. This was the only affordable moment for them, due to a discount the gym was offering during those hours. From that moment on, the young people were motivated to go to school and to the gym every day.

The need for independence and influence (agency) is understandable. Children can have an influence on some parts of their lives when they are listened to and their solutions are taken seriously. This is in line with their new-found independence, but also with the need to have some control over their own situation. It may also have a curative purpose. Powerlessness is a major factor in traumatising experiences. Many therapeutic treatments therefore focus on empowerment. In other words, regaining control, direction and power over parts of your life.

There are also unaccompanied children who do not display this independent behaviour at all, but actually show signs of apathy. Children who cannot get themselves to do anything, so spend their days doing nothing. They seem to be unmoved and unable to influence their own lives. Perhaps it is all still too much for them, and they simply need more time to recover with rest and a sense of security. Showing the children how they can take control of their lives in small, achievable steps can help break the deadlock.

The following is a good example of this. A 16-year-old boy could not be reached by his mentors. He was quiet, withdrawn, did not go to school and they could not make a connection with him. All he did was visit friends sometimes. One day a mentor saw that he had sheet music in his room. Asking him about it, she discovered that he liked making music and often played guitar in Syria, even in bands. He said that some Syri-

ans from one of those bands had asked him to go with them to Sweden for a few performances, but he did not know how to arrange it all – a passport and the travelling. The mentor suggested discussing this with the guardian, to see if something could be worked out. The guardian was happy with this positive stepping stone and was able to arrange a passport, as the boy already had his residence permit. The boy himself then arranged with the band that his trip would be paid for. He went to Sweden, and has been cheerful ever since he came back, going to school and playing music.

The child's need for independence, influence and control over their own situation also presents mentors with dilemmas. Unaccompanied children often behave very independently but are not always able to find their own way in the complex Western society without encountering too many problems. The topic of guidance aimed at achieving independence is addressed in chapter seven.

5.3 How do unaccompanied children cope?

In psychology, coping is described as the way in which someone deals with problems and stress. Refugees – unaccompanied children in particular – develop and gradually improve their ways of coping during, for example, war and flight: a coping strategy. When giving these children guidance, it is important to recognise their highly developed coping strategies and to deploy them as a strength, a source of resilience.

An unaccompanied child's coping strategy is sometimes referred to by mentors as 'survival behaviour'. The strategy might consist of avoiding fears and bad memories, distrust, religious rituals or hoarding food. The following section describes the coping strategies seen in many unaccompanied children.

Distrust

Unaccompanied children arriving in Europe are used to distrusting people, such as their own government, human traffickers, people from their own country and fellow refugees. A refugee from Eritrea put it plainly: "I survived the flight because I was suspicious of everyone." Distrust as a coping strategy is therefore very common among unaccompanied children (Ní Raghallaigh & Gilligan, 2010).

One aspect that contributes to the distrust after they arrive is, as already mentioned, that in most of the countries the children have travelled from there are no professional guardians, mentors or social workers. You get help and support from your family, not from people paid by the government. It takes time, and positive experiences, for unaccompanied children to see that guardians are sincere in their concern and support, even if they are paid for it. Distrust diminishes, and trust then grows over time, especially when they see that a guardian wants to 'do something' for them and is

interested, supportive and respectful. Curiosity, in the form of too many questions, can reinforce distrust, as can writing or typing during a conversation. Important advice for building trust is to make sure that you as a guardian are reliable, keep your promises, and give clear explanations about why you do what you do.

A deep-rooted distrust in the government is seen in asylum and family reunification procedures in particular. Children do not believe that waiting for the bureaucratic procedures can lead to a positive outcome. For example, a Syrian tells you that people “buy” their documents in his country of origin. You can do that whenever you need them, as long as you have money.

Distrust can be expected when a guardian tells an unaccompanied child that they will have to wait for months for a decision or next step. The child may immediately start to distrust the guardian, because he or she apparently has not done what is necessary. The child may then put pressure on them, hoping that they will try harder to arrange the papers. For example, the child may become angry and rebellious, or avoid contact. Guardians often experience this as ‘coercive’ behaviour. Some young people say they stopped going to school, in order to put pressure on their guardian about the family reunification procedure. “They really want us to go to school so badly, so then we just don’t. Maybe that will get them to do their best for our applications.” The guardians did not understand this connection until an intercultural mediator was called in.

It also works the other way around. A guardian said that a young person had suddenly become very positive and open towards him after the family reunification was completed. It is quite possible that the young person believed that the guardian’s efforts had contributed to the family reunification application being accepted.

Silence as a coping strategy

Most unaccompanied children have learned to deal with unpleasant events by not thinking about them, not talking about them and thinking about the future. They learn this from an early age and are often very good at it. Forms of trauma therapy in which they have to think about events from the past can cause them a lot of anxiety. Silence also has a protective function, especially with regard to sexual violence. If sexual violence becomes known, whether it happened to a woman, man, girl or boy, it is a bigger problem than when other forms of violence become known. The violence, shame, and loss of honour can lead to them being cast out by the community. Silence does not have the function of processing the past, but of securing the future by concealing the sexual violence, the rape(s) (Jongedijk, 2014). Refugees – whether they are adults or children – often do not talk about this during the asylum procedure. And that can wrongly lead to rejection of the asylum application.

Religion as a way of coping

Another major coping strategy is religion. As was seen in the story of Rahel, religion can help young refugees to stay strong, and offers them support in coping with traumatic events. But religion also provides a basis for survival. Several studies into unaccompanied children's survival strategies identified religion as part of the strategy. In a qualitative study of the role of religion for unaccompanied children in Ireland, Ní Raghallaigh (2011) found that it gave them meaning, comfort and a sense of control in their new life circumstances. For many unaccompanied children, religion appears to be important for the way they deal with their situation. The arrival of Eritrean children in Europe between 2015 and 2017 made the important role of religion clearly visible. For many of them, religion provided support and comfort. It was a way for them to regulate emotions. In the days after arrival, they could spend hours each day engaged in rituals. They said that it gave them peace of mind and guidance in those often very stressful early days.

Other coping strategies

Ní Raghallaigh & Gilligan (2010) found different strategies or mechanisms for how unaccompanied children deal with their situation. In addition to religion, these included: adapting to the prevailing culture or finding a balance between their own and the new culture; focusing on the positive circumstances; suppressing thoughts about the past; being independent and not relying on others; continuing activities that were done in the country of origin; and distrusting the people around them.

Coping is an important supporting factor in resilience. The concept of resilience and how to promote resilience is discussed in detail in the next chapter.

5.4 Anil's story about his anger

Anil⁶ is 16 and comes from Iraq. He fled together with his 17-year-old cousin and has been in Sweden for six months. He has a residence permit and has been living in a small residential group for a few months. But it is not going well.

Anil explains why things are not going well: "At first it was nice, we were happy that we were finally in Europe. We actually wanted to go to England because we heard that you can easily earn money there, but we ended up here. We thought it was fine, this is a rich country, but also cold, which is strange. I fled with my cousin. We were on the road for a long time. I'm glad he's here too, because everything else is disappointing."

⁶ *Anil's story and name are fictional for privacy reasons. But all experiences are based on what many unaccompanied children have told.*

“We thought all would be great once we’d been given a residence permit. We thought we would get a house and money. But that’s not how it works, they say. You must first show them that you can take care of yourself before you can live independently. But that’s stupid, of course we can. We did everything on our own, even survived Libya. So now we live in a group because we’ve still got to learn how to cook, but that’s not for boys, that’s for girls! They want to cook for us, which is normal, right? And then they said you could only move into your own home if you go to school every day, but after we’d done that for a month, we were still not allowed to leave. Then we stopped going to school, simply because they didn’t keep to the agreement. “

“It makes me angry because they don’t understand that we need money here. For example, I need money for my mother, because my sister is ill, and she cannot afford the medicines. She doesn’t understand that I’m not sending money. And now I thought I could send the money I get for clothes to my mum. But guess what they do? They come to the store with you to check if you really buy clothes with it. And when that one mentor said: ‘You have to buy clothes with the money, because you’ll only get it once and otherwise you’ll have nothing left,’ I got so angry. I just exploded and then I did something really bad, so then they sent me away”.

“And now I’m sitting here and can’t go back until I’ve apologised. But of course, I won’t, I can never do that. They think I’m not ashamed but I am. I just don’t know why it happened, it just happened, something exploded in my head, I don’t remember it very well either. I do accept my punishment now, that I have to be here. It’s how it goes when something like this happens, but that they took the money I’d already saved for my mother, that is really bad! It makes me so angry again. They say it is being used for the damage I caused and they also say not to worry about my sister, that it is not my responsibility!”

“They don’t understand. It actually is my responsibility, who else can send my mother money? I got very angry again when they said that, something just exploded in my head again and then another bad thing happened. No, I really can’t tell you what happened, I’m so ashamed... I don’t get why they don’t understand that it actually is my responsibility. I have to help her, there is no one else to do it. My father went missing, he fled IS and we haven’t heard from him since. He’s probably dead. My mother said, ‘Just try to flee, there is no future here, only war. Maybe you can help us once you get there. You are now the oldest, the man.’ And now they want to call my mother to tell her that things are different here, and that I cannot send money, and how complicated family reunification is, but I don’t want them to because it will make me feel ashamed because I cannot help her. I just want to send all my money to her but they keep taking it. Talking about it, I’m getting angry again. It’s best not to think about it...”

“I thought it would be good here, you know, but it isn’t. They don’t understand us here. We all have these arguments because they force us to do things we don’t want to do and in the meantime, they don’t arrange family reunification for us and we don’t have money or work. I thought it would be better in Europe, but it’s not. And now I don’t know what to do. How can I ever get used to this, and get rid of that anger, and how I can help my mother...?”

How do these young refugees become so strong, so optimistic and full of hope? They are without their parents and their family, and have had terrible experiences. They come to a very foreign country and yet many of them seem strong and possess the energy to make something of their lives. This chapter examines resilience. What makes unaccompanied children resilient and how can resilience be built and increased?

The concept of resilience can be described as the 'ability of people to feel better quickly after something unpleasant such as shock or injury' (Oxford ALD, 2015), and as the 'ability to become strong, happy or successful again after a difficult situation or event' (Longman DCE, 2014). Another definition of resilience is 'a healthy mental state and normal development in a context that could imply the opposite' (Tol and Vindevogel in Groeninck et al., 2019).

Groeninck and other Belgian researchers mention in their book *Resilience in Motion, strengthening the dynamics of refugee families* that the concept of resilience has developed over the years (Groeninck et al., 2019). Resilience is no longer seen as just a character trait and an individual responsibility, but also as the effect of supportive or threatening relationships. Further insights have led to a 'diversity-sensitive' approach, in which the socio-cultural context, and therefore also time and place, is a factor that influences resilience. What is considered resilient may therefore be slightly different in one context, or culture, compared to another. Resilience is also a process. In other words, the context helps determine whether something is a protective or risk factor, but also what should be regarded as a positive development.

This diversity-sensitive and process-based approach, in which context such as culture, time, place and circumstances at the macro level are part of the view on resilience, is recognisable in Nidos's many years of experience in guiding refugees in the Netherlands. An example of this in practice concerns Eritrean children who protect themselves during their flight by praying a lot. This is a type of resilient action that offers protection

and comfort. If it continues in the early days upon arrival, it is still functional, but if it does not decrease after that it becomes an impediment to the development of the child. For example, if it has an effect on going to school and developing a social network.

Another example at the macro level is asylum systems. Many refugees keep their hopes up about a residence permit, because everyone always knows someone who eventually got a permit. Hope is an important factor in resilience. As long as there is hope, there is still a protective factor. If hope disappears, then resilience often fades.

As the concept of resilience has developed over the years, it has consistently been a topic of debate. Due to a focus on the positive aspects of resilience, there is an incorrect assumption that resilience and vulnerability are opposites, and therefore mutually exclusive. Additionally, a focus on individual aspects of resilience might overlook the wider institutional, structural and social influences on resilience (Pulvirenti & Mason, 2018). This may lead to people being wary of emphasising the resilience of vulnerable groups, as that may be used as an excuse for inaction. It is therefore essential to highlight the fact that resilient refugee children are still in need of support and assistance.

Groeninck et al. consider *resilient actions* as those that demonstrate proactivity in dealing with, and negotiating, the possibilities within existing frameworks (Groeninck et al., 2019) – a view that could also be considered realistic.

This is illustrated by two Afghan brothers who had no options left after their asylum application, and had to return home when the eldest turned 18. They did not consider return to be an option, because there were no long-term prospects or accommodation for them in Afghanistan. The lawyer and guardian tried in vain to prevent deportation. The boys themselves even wrote a letter to the prime minister. When they were subsequently detained in an immigration centre, they said they could now come to terms with the situation, because everything had been tried to avoid deportation. This response is an example of resilience based on actively dealing with the possibilities within existing frameworks.

Research by the American psychologist Bean et al. among 920 unaccompanied children in the Netherlands in 2006 showed that more than half (57.8 per cent) suffered from post-traumatic stress symptoms. And half of that group also suffered from depression or anxiety. The findings also showed that 34 per cent of the children did not have serious mental health problems. Resilience is therefore a striking characteristic that is seen in refugees, particularly in unaccompanied children.

6.1 Resilience-enhancing factors for refugees

Resilience depends on many factors. Several studies have shown risk factors that predict the development of post-traumatic stress responses in unaccompanied children. These factors are little social support, the number of traumatic experiences and physical injury (Geltman et al., 2005; Bean et al., 2007; Hodes et al., 2008). Having contact with family –even if they are far away – has a protective effect on the well-being of unaccompanied children. In addition, having a sense of security and some privacy are important (Fazel et al., 2012). In her qualitative meta-analysis of international studies of resilience among young refugees (2017), Sleijpen found the following sources of resilience: social support from the environment, different acculturation strategies, education, religion, avoidance and hope. These sources help young people to feel safe, maintain their self-esteem, have meaningful relationships and reduce stress.

In the previously mentioned study on the role of religion for unaccompanied children in Ireland (2011), Ni Raghallaigh found that religion gave unaccompanied children meaning, comfort and a sense of control in their new living conditions. For many unaccompanied children, religion appears to be an important factor in the way they deal with their situation. Similarly, Carlson et al., (2012) describe belief in a higher force or religion as an individual protective factor. After traumatic events, support from a social network and having a faith are important. Time and place can have a healing effect, so the longer refugees stay in a Western country, the lower their risk of depression.

But not only the situation after the traumatic events affects resilience. An image of what could happen, torture for example, and thus being mentally prepared for it, also have to be taken into account (Oppenheim et al., 2015). For example, talking about their highly traumatic experiences during the flight, such as hostage-taking, torture and rape, some unaccompanied children said: “We knew in advance that we would experience such bad things, that is part of the game, everyone knows that.” This form of acceptance is probably helpful in making the feeling of powerlessness during these traumatic experiences slightly less overwhelming.

Feelings of helplessness and powerlessness during a traumatising event can have a long-term effect. Stöf sel and Mooren (2010), specialists in the treatment of psycho-trauma caused by war and violence, recognise the following cognitive themes that often play a central role in traumatised people: helplessness, powerlessness, victimisation, inferiority, control and justice/injustice. According to Stöf sel and Mooren, whether the source of violence is humans or, for example, a natural disaster also makes a difference. Serious interpersonal violence has a greater negative effect on the experience of trauma than natural violence, and always leads to some or serious distrust of other people.

Many older unaccompanied children who have fled recent war or conflict did have a secure base in early childhood. This may be another explanation for the resilience of unaccompanied children, as their childhood was mostly healthy and stable, until conditions deteriorated to such an extent that the flight was necessary. The traumatic experiences date from after that. This is different for people who had traumatic experiences in early childhood which had a strong negative impact on their sensitivity to stress, as well as their personality, identity and autonomy. In these cases, it often concerns sexual and other types of abuse in early childhood (Stöfösel & Mooren, 2010).

Insight into the above-mentioned protective factors, and the specific coping strategies of unaccompanied children, is helpful for connecting to the child's own solution and promoting their resilience.

These sources can, however, also cause stress. Education, for example, gives hope for a better future, is a source of distraction and gives young people the feeling that they have control over something, namely their own performance. But it is a source of stress at the same time, Sleijpen (2017) concludes. The desire to succeed, and meet family expectations, often increases the sense of responsibility to such an extent that it can lead to fear of failure.

In an ethnographic study on resilience among young Bosnian refugees and families, the following sources, among others, were identified: use of your native language, family obligations and a sense of belonging or cohesion, religion, building a future and taking pride in traditions (Weine in Mooren & Bala, 2016).

The effect of traumatic experiences on resilience can be significant. A negative mindset as a result of post-traumatic stress affects the processing of information about new and better opportunities (Schoenmaeckers et al., 2019). This may explain why traumatised people who receive income support, for example, may not see this as a positive opportunity, but rather as temporary relief from a generally bad situation. Negative experiences can also make anxiety symptoms worse.

Promoting resilience

Refugee children often develop as they should. However, there are additional vulnerabilities because of their particular circumstances, and some aspects of their development are very complicated for them. For this, the child needs to be resilient. In 1996, Van der Veer stated that certain development tasks can be complicated for young refugees, due to circumstances such as being without their parents, limited financial means and often traumatic experiences. On top of that, they have extra things to deal with during their development, such as avoiding social isolation, coping with post-traumatic symptoms, and building a future in a strange society, which they may perceive as hostile.

According to transcultural psychiatrist Laban et al. (2010), when working in a resilience-oriented way you should focus on the search for sources of resilience. He distinguishes the following major sources of resilience:

- *Biological sources*: body awareness, physical movement, stress management, relaxation and medication
- *Psychological sources*: positive emotions and humour, cognitive flexibility (being able to reflect and recognise dysfunctional thoughts), self-esteem strengthening, acceptance and coping
- *Social resources*: connection with family, social support, meaningful activities
- *Religion*
- *Cultural sources*: cultural aspects (norms, traditions and skills) that are a source of resilience

6.2 Resilience, agency and autonomy

As previously mentioned, resilience can be dependent on several factors. Agency and autonomy are considered to be relevant factors that enable refugee children to enhance their resilience. Being able to act autonomously can give children a sense of confidence and pride in their own abilities.

Agency as part of resilience

Agency refers to a person's ability and strength to act in a changing situation and to maximise opportunities in that environment (Carlson et al., 2012, in Van Reisen et al., 2018). The Van Reisen research group refers to Carlson et al. in its research on trust among unaccompanied children from Eritrea. According to Van Reisen, the unaccompanied child's capacity for agency includes the ability to build their trust in others, including their guardian, mentor, peers and professionals.

Agency in unaccompanied children includes the ability to:

- Act in a changing or unfamiliar context, for example knowing how to respond during an interview at the immigration office
- Manage situations, for example an unaccompanied child's response to their guardian and to different social norms or rules, values, etc.
- Use inherited resources, such as how children draw resources from their family and kinship
- Experience a sense of well-being, acceptance and recognition, for example by making their voice heard and expressing their needs
- Rely on others, for example peers, their guardian, mentor, professionals (Van Reisen et al., 2018)

Fleeing is an example of agency. It is an opportunity to exercise agency and to influence for example, a situation of oppression and exploitation (Hajdukowski-Ahmed in Lanslots, 2012). Selectively providing information about yourself can also be seen as an expression of agency, a way to deal with difficulties, to look ahead and not back, and to maintain a certain degree of control when an unaccompanied child has to find their way in the asylum, care and education system, say Vervliet and Derluyn in *Trajectories of unaccompanied minors* (2013).

Expectations associated with flight and migration play an important role in the resilience of refugees. These expectations are often related to the motive for the flight, such as finding safety, but may also change during the migration. The study by Vervliet and Derluyn into expectations, agency and psychosocial well-being among unaccompanied children (2013) supports the idea that family members generally play a fairly important role in the decision-making process with regard to the migration, and also in the expectations that unaccompanied children develop. But it appears that young people have their own expectations too, separate from the family, which the researchers consider to be a sign of agency.

Agency also comprises the capacity to understand society, says Arendt (in Van Reisen, 2018). In the early days, unaccompanied children are often confused about the society they are now living in, which makes them feel powerless and insecure. The bureaucracy, the different roles of the different services such as the immigration office, guardian, mentor, what can and cannot be influenced – all of it is new and incomprehensible for many children.

It is therefore important to give them as much clarity as possible, to provide a sense of agency. That enables the child to get to grips with the bureaucratic processes, and to understand who they can turn to for what, and what can and cannot be changed. It also seems to create a sense of agency if they can have some influence on their living conditions at the asylum centre. Young people generally like being able to participate in decisions on, for example, agreements about what time the kitchen can be used, or what they will be eating.

Autonomy as part of agency

Autonomy is an important aspect of agency. According to Vervliet (2013), this concept refers to two important constructs: self-determination and self-protection. Self-determination means, among other things, self-reliance. Self-protection means wanting to protect yourself from external control, which manifests itself in obvious or less obvious types of resistance. With regard to agency, a distinction is made between actual 'exercise of agency', the action, and a 'sense of agency', the degree to which you have the feeling that you can exercise agency (Vervliet & Derluyn, 2013).

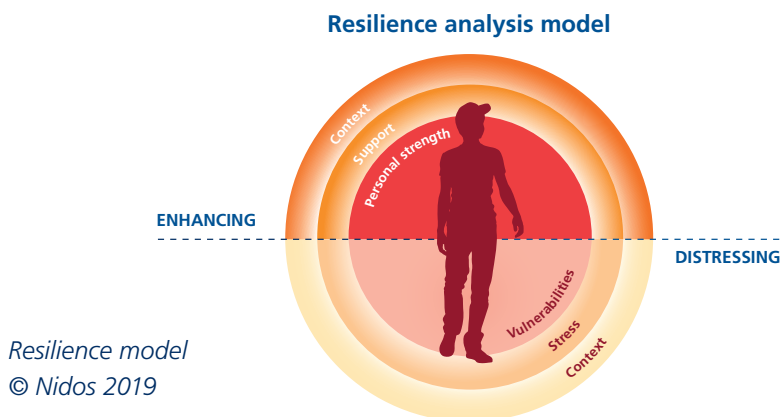
So autonomy is a type of agency when it comes to resistance (self-protection), and an expression of self-determination when it comes to self-reliance.

Migrants need to be self-reliant in their new situation. This applies to adults, but unaccompanied children in particular need to gain autonomy and the skills to be sufficiently self-reliant when they reach the age of majority.

In a collectivist (extended family) culture, however, autonomy in itself is not a goal in a child's upbringing, as is the case in Western individualistic culture. A child from an extended family culture generally grows up within the protection of the extended family of which it continues to be a part. But an unaccompanied child has lost part of this because of their flight, and therefore now has the new, extra task of exploring independence or living alone. Many unaccompanied children indicate that they do not want to live alone at the age of 18. Whether they are able to live alone is also dependent on the system and national/regional possibilities. However, the young people who do live alone often say that they miss others, and feel lonely and uncomfortable. So they themselves do not always consider it self-evident, or necessary, that autonomy and self-reliance should be encouraged.

6.3 A model to analyse resilience

The Nidos resilience model (see diagram) is used in the Netherlands to collect information about the capacity and burden of the unaccompanied child, and to assess whether these are sufficient or in the process of recovery. The model is based on the Dutch SSSV model; support, stress, strength and vulnerability. This model is used in mental health care, for example in the treatment of refugees. Support and stress refer to environmental factors, strength and vulnerability to individual factors. The first are resilience factors, the second are stressors. When the balance between these factors is disturbed, health problems arise (Lamkaddem et al., 2015).



For the Nidos resilience model, the concepts of agency and acting resiliently have been added to ‘personal strength’ and context has been added to ‘support from the environment’.

A summary of resilience sources for refugee children

The list below gives an overall picture of the sources of resilience that can be found either within the child themselves or in the child’s environment. Sources of resilience that are found in the child are their experiences and their individual qualities. For example, being able to experience a sense of safety and privacy, but also finding ways to utilise the available resources to their benefit. This could include focusing on education or participating in physical activities. Sources of resilience in the environment can be seen as environmental conditions for the optimal development and maintenance of resilience. For example, having a supportive and affective environment in which the child is able to form meaningful relationships and is able to thrive and develop safely.

Sources of resilience	
In the child	In the environment
<ul style="list-style-type: none"> - Experiencing agency over the situation - Actively dealing with the possibilities within existing frameworks - Certain level of autonomy or independence - Experiencing privacy - Experiencing safety - Acculturation: being open to the new culture, adapting to a certain extent while retaining their own language and traditions - Make use of education opportunities - Physical activities and stress management - Religion - Employing avoidance and/or silence as a coping strategy - Hope - Ability to stand up for yourself and your family 	<ul style="list-style-type: none"> - Social support - Professional support - Contact with family - Meaningful relationships - Safe environment - Acculturation: an environment that is interested in and respects their cultural background - Receive appropriate education - Possibility for suitable activities - Possibility to practise religion - Respect for avoidance and silence - Hope

6.4 Najja's story about hope, support and opportunities

Najja is 19. He fled Uganda at the age of 15 and went to the Netherlands.

Najja tells his story: "Who would have expected this. Me, sitting here in a real apartment with a kitchen, a living room and three bedrooms for my friends and me. I never thought they would give me that, I'd done such awful things. All these years I was desperate, one rejection after another, my lawyer was also desperate. Nobody wanted to believe they were after me in Uganda. That they are looking for me because I'd fought."

"Yes, I was in a rebel army, the LRA (Lord's Resistance Army) it was called. Terrible things happened, it's unbelievable that they call themselves the Lord's. I was about 12 years old when they kidnapped me. It happened when I was fetching water for my mother. I was taken, I couldn't do anything. Many children were kidnapped and forced to go into the army. We were the helpers, we had to carry stuff and things like that, but we were also forced to kill people and do things worse than that. It was awful! They gave us drugs so that we were less afraid and just did all those things. I still can't talk about what I've seen and done. One day we escaped. The four of us went, and one friend was shot when they came after us. I could hide, fortunately the other two could too. We sat high up in the trees until they'd gone. After days of walking through the bush we arrived at a village. The people were very scared of us, they started to scream and run towards us. We immediately fled further. I lost the others and never saw them again... One day, after I'd been alone in the bush for quite a long time, I was walking along a road and then a car with a white man stopped. He asked me to get in, he said he could see I was in bad shape. He wanted to help me by taking me somewhere. He actually did that. I came to Europe with trucks and a boat. Yes, I had to do sexual acts with men on the way, but I did get food and they helped me travel on."

"When I came here I was really happy at first. I lived with many other children who had also fled alone. We got food and we could go to school. Nobody came from Uganda, but it was nice and I was rid of those men with their sex. Of course I spoke English, which made it easy for me to make contact. But I also learned that it's better not to talk about the army, because the people here become afraid of me, just like at home... They cannot understand if you have fought, killed people, that you are very glad that you never have to do that again. They think you'll keep doing it because you're used to it. They really do not understand. Maybe people just can't understand if they have

⁷ Najja's story and name are fictional for privacy reasons. But all experiences are based on what many unaccompanied children have told.

not experienced it themselves. My happiness soon passed when my asylum application was rejected. The immigration services did not believe my story about the army, and that the people no longer accept you and you are chased out of the villages and have nowhere to go. I had to prove it, but how can you prove it if you weren't in the newspaper or something like that?"

"At that time, I had more and more nightmares. I was afraid to go to sleep because the dreams would come. I used to wake up very scared, often screaming. Those dreams were so real! I was no longer able to go to school because I just wasn't sleeping anymore. My guardian from Nidos then arranged for me to get help, from a psychologist. At first I didn't want to, I'm not crazy! But I did go to meet him, and I liked that psychologist. His name was Bart. Bart said that I did not have to talk about the army if I didn't want to, I could decide for myself what I would and wouldn't tell him. That was important to him. He then started helping me. I didn't tell him anything about the frightening dreams and nightmares, but he asked me to think about them, and then he would make these movements with his arm and then that part, the image, he called it, wasn't so bad after that. It really wasn't! It's called EMDR. The problem was that there were always new images, and they were worse, but I kept going, I trusted him. Bart told me that I should sleep with a clock radio tuned to a Dutch channel, so that when I wake up I immediately know that I am here and not in Africa. That also helped."

"I had to go back to Uganda when I turned 18. I was out of options and the Repatriation and Departure Service discussed with me about how that could be arranged. My dreams were getting worse during that time. Bart then taught me to apply EMDR to the images that bothered me, so that I could help myself if I go back to Uganda. That reassured me, but I was so scared about going back that I couldn't even talk about it... I started to feel worse and worse because I couldn't bear to think about going back. A few days before I turned 18, I tried to kill myself. I had collected pills – sleeping pills and tranquillisers – and took them all. I thought: then it will all be over, no returning and no fears. A friend found me in time. Bart came to visit me in the hospital, and also my guardian from Nidos and my lawyer. They were very concerned and they made a plan. It gave me hope again."

"They all wrote letters, and collected reports and more information about the LRA. I was 18 years and 5 months old when I was given a residence permit after all. I don't know why everyone did their best for me like that, but it does make me feel really good, like I'm appreciated even though I have no family and have done very bad things. No, I haven't had any contact with my family since the kidnapping. I'm afraid they'd hate me for what I've done. But now the Red Cross wants to give it a try, finding my family, so who knows what may come out of it..."

“And now I suddenly have a life. A home, I go to school, I am doing an IT course. I have a job, washing dishes in a restaurant, and I make a living from it. If I have questions about student finance or tax, I can go to my contact at the Council for Refugees, but I also sometimes call my guardian. She is always nice to me and helps me, even if it is no longer part of her job. What I have to get used to is living alone. Even though there are three of us living here, that is very different from Africa, where you live with your family, a lot of people. Friends often come and stay, which is nice. Some of them do not have a residence permit, which means they should be living on the streets. Because of me they too now have hope...”

What will happen when unaccompanied children reach the age of 18? Will they be able to cope independently and participate in the society that is still new to them? But what happens if they do not get a residence permit? Do they have to go back? And if they do not go? What about if they have not yet reached their final country of destination and continue to travel illegally? This chapter examines self-reliance related to adulthood, integration, return and living illegally.

7.1 Self-reliant and adjusting to life on your own

In most European countries, guardianship ends at the age of 18 – the age of majority. For unaccompanied children, this generally means that guardianship, or guidance in any form, stops at that point. It also means that they are now seen and treated as adults, which can have a serious impact on the daily life of the young person. Working towards an unaccompanied child's self-reliance at the age of 18 is therefore one of the major goals of guidance. Specific self-reliance skills need to be developed during that time.

Just like their peers who do not have a refugee background, the young person will often still need support from adults after the age of 18, if there is not a natural support system provided by family. A good social network is therefore of great importance. Unaccompanied children who arrive or apply for asylum just before the age of 18 are especially vulnerable. Support is only available to them for a short time. The same applies to young people who arrive at the age of 18 or 19. They depend on the generally, very limited guidance provided by asylum reception for adults.

As the age of 18 approaches, unaccompanied children with a residence permit are often very concerned about all the bureaucracy they have to deal with to arrange things. They often have to move too, which means a lot of uncertainty. It is important that they have a support network in the area, who they can go to with their questions, in addition to a social network with friends, role models and other supportive people.

Many former unaccompanied children say they would have liked to have been able to have the guardian's guidance after they turned 18.

Young people without a residence permit are often still hoping to get one by starting a new asylum procedure. In some countries you can apply for asylum again, or file a new appeal after one and a half years. These young people often start living illegally while they wait for new opportunities, dependent on the support of friends or ending up in exploitative situations.

In order to be able to continue on their own, it is therefore important that the unaccompanied child learns the language of the host country. That will enable them to experience agency, and to have opportunities to develop a social network. Contact with their family and clear future prospects are also important. The child needs to be able to apply good coping strategies, and to have skills that will enable them to take care of themselves and find their way in the future.

If they do not have a network, or if the prospects for the future are not what the child had hoped for, coming of age can seem very threatening. It may then be important to organise care or support that will guide the child after the age of 18. But care and support systems are different in each country, as are the services that young adult refugees are entitled to. It is therefore important for them to have information about NGOs, and organisations that work with adult refugees, so that they can inquire about what kind of support they can still get. There are some good examples of housing projects for young people after their 18th birthday, where there is also support available for them to fall back on. The transition is then less abrupt and therefore less risky.

It has been mentioned a few times already: independence is an important coping strategy for young refugees. In that sense, promoting self-reliance can also be seen as strengthening coping skills and thus contributing to the resilience of unaccompanied children.

All these aspects are important when guiding unaccompanied children towards independence. In the guidance they are given at asylum centres, older unaccompanied children are taught chiefly practical skills for daily life, so that they can take care of themselves and find their way in the society they will be living in. Even if their future does not lie in the host country, self-reliance skills contribute to the children's resilience. Experiencing agency and autonomy contributes to their self-confidence and this increases their resilience.

Self-reliance skills for unaccompanied children⁸

Personal

Developmental aspects

Examples of skills

Health	<ul style="list-style-type: none">- looking after your own health sensibly- seeking medical assistance in time- dealing with chronic stress or post-traumatic symptoms
Personal care	<ul style="list-style-type: none">- coping with family expectations and concerns
Home	<ul style="list-style-type: none">- taking care of personal hygiene and clothing- keeping your home neat and clean
Income and expenses	<ul style="list-style-type: none">- preparing healthy meals- handling finances properly- budgeting carefully
Social life	<ul style="list-style-type: none">- building a social network- making friends- having intimate relationships
Social environment	<ul style="list-style-type: none">- participating in a social environment
Being an asylum seeker	<ul style="list-style-type: none">- creating realistic future prospects- coping with family expectations- contact with family who were left behind- finding your feet in a strange, sometimes hostile environment- bridging the culture gap
School / Work	<ul style="list-style-type: none">- mastering the language of the host country- finding and retaining education/work- working on realistic career prospects in Europe, the country of origin or elsewhere- looking for appropriate leisure activities
Organisations	<ul style="list-style-type: none">- following the asylum procedure- making use of and interacting with organisations and support services
Travelling	<ul style="list-style-type: none">- using basic infrastructure and transport options

⁸ Based on, among other things, the Nidos methodology *Jong en Onderweg* (Spinder & van Hout, 2008) and the CONNECT tool *Working with the unaccompanied child* (Schippers, 2014).

Identity development

An unaccompanied child's migration process usually takes place during adolescence. This is an important period in which they develop their identity, and it may well be affected by the migration and the absence of family.

A distinction can be made between personal, social and cultural identity. In a collectivist culture, identity is experienced as part of the extended family and not so much as something individual or personal, as is the case in an individualistic society (Hofstede et al., 2016). So where in an individualistic culture the emphasis is more on personal and social identity, in a collectivist culture it is on social and cultural identity.

As their identity develops, a migrant child combines the values and norms of the different cultures and social groups – the one they belong to now and the one they belonged to in the past. This can lead to confusion. Unaccompanied child migrants in particular have lost the key figures in their life, such as family members, friends, peers and parents, and new role models have often not emerged yet. This is another obstacle to developing a positive identity. Many unaccompanied children therefore struggle with complicated questions (Plysier, 2003). They are looking for ways to preserve their own cultural roots and to shape these in a new, Western society. An unaccompanied child may feel that they are 'between cultures', which can lead to misunderstandings, alienation or disidentification, losing the cultural identity of the country of origin, or of the parents, and not being able to connect to the cultural identity of the new society.

The sense of not belonging can also increase their vulnerability to grooming by human traffickers or extremist organisations, which may be active within the borders of the Member State. After all, they offer an alternative identity, a sense of belonging. In the guidance and support of unaccompanied children, it is important to focus on maintaining and developing social networks of both people from their own country and people from the host country: old and new role models and friendships. Just one friendship can make a big difference. Social connection – contact with people in their immediate environment like the neighbours, a job at a supermarket, a local football club – is the starting point for integration and inclusion, for becoming part of a society, for a sense of belonging.

7.2 Family reunification and self-reliance

Guardianship ends after successful family reunification, as there are no longer grounds for guardianship when the parents arrive. Most children are very happy and relieved when their parents finally arrive, often after a very long time. Development problems often solve themselves quickly.

But reunification can sometimes be disappointing. The child has lived without their parents for so long, experienced a lot, and has a certain degree of independence. They are already integrating into the new society and display westernised behaviour, while their parents are only at the start of that. The adults still have to get used to the new country and come to terms with all they have lost.

The children also already know how the system works, so a lot of pressure is put on them to manage everything for their newly arrived family. This can create tensions, especially in the relationship with the father, as he is the one who would normally have this 'managing' role in the family. Another complicating factor is that families usually arrive in the country by plane, so did not experience their child's dangerous journey. This can affect the behaviour of the parents and the child, and lead to friction.

The following is a good example of this. A Syrian girl who was now 16 years old had fled at the age of 12 with the aim of family reunification. She was reunited with her parents and younger brothers and sisters after three years. There were soon tensions, caused by her behaviour. Her parents did not agree with how she behaved with boys. After a while she said sadly, "I crossed that sea, I went through terrible things to make family reunification possible, but now I don't belong anymore."

Westernised behaviour can also pose honour-related risks. The following story illustrates that. A boy who was about 16 years old applied for family reunification. In the meantime, he went his own way in the Netherlands. He 'came out' and found a boyfriend. He did not tell his parents about his homosexuality and his boyfriend. After he had been there for a year and a half, the time finally came for his family to arrive. He would have to live with them, those are the rules. He saw no solution other than to keep quiet about his sexuality and his relationship, because he was convinced that his family would not be able to accept the situation. The boy believed there was a high risk of honour-related violence occurring. After living independently for a year and a half, he had to move in with his family at the asylum centre.

Guiding family reunification by involving parents in their child's development long before reunification occurs, and therefore including them in the child's westernisation and integration, can help parents to prepare for this. It also helps them with their own integration in the new society, and that of their other children, but it is particularly important to avoid alienation and disappointment.

7.3 Integration and inclusion

Unaccompanied children with a residence permit focus on integration. So working on a child's integration during their guidance should be started as soon as possible.

But it is not always easy for a newcomer to establish and maintain social contact with people, particularly children of their age, who were born and raised in the host country. School is normally an important place for meeting people, but during their early days in the country, unaccompanied children generally go to special schools that focus on learning the new language. Since local children do not attend these schools, this is not conducive to learning the language, nor to their integration.

In addition to places of education, work and social activities provide good opportunities for social connection. But in the beginning that requires not only the necessary funds, but also social adjustment. Participating – and conforming to the yet unknown informal rules of, for example, a company or a football club – calls for some adjustment and also guidance. Otherwise it quickly leads to disappointment because it “just isn’t working out”.

One mentor talked about taking some children to a football club and introducing them there. The boys were made welcome, but it was not a success. Although they played football a lot, and really wanted to join a club, the boys had never played in a team on a field with a referee. They played in a very different way, and did not understand all the rules. That made them feel very insecure. They also did not know how to behave socially, in the changing room or in the shower. So they did not go anymore.

There are some good examples of their social environment (for example neighbours) involving unaccompanied children in neighbourhood activities, such as barbecues, drinking coffee together, sports activities, doing odd jobs. The children really appreciate that. And in some countries there are buddy projects which enable young refugees to engage with local families and/or peers.

Experience shows that children with a residence permit, despite the initial relief that they have succeeded, also have to deal with grief and loss. After many hardships and traumatic experiences, the flight has suddenly come to an end. Sometimes this leads to major psychological problems, and the young person experiences a void. After all, it was never really their choice to live in this new country. Their flight was mainly because they wanted to get away from an unsafe situation, aiming at survival but not yet at a future. Building a life in a new foreign country can be very complicated, alienating and lonely, especially if this has to be done without family. If a family reunification application has been rejected, or the family decides not to come or does not have the means – financial or otherwise – to do so.

Like other migrants, refugees have to adapt to their new environment. When people are confronted with a different culture for a long time, they do adapt. The way they view the world is changing, and some norms and values are also changing. In the previously cited study by Sleijpen (2017), the acculturation strategies of young refugees are mentioned

as one of the sources of resilience. These strategies involve connecting with your own cultural background, as well as adapting to a new lifestyle. The young refugees felt that adapting to the new culture without forgetting their own culture was the most desirable.

Why this is important is illustrated by the following example from Austria, where a former unaccompanied child from Afghanistan had gone to visit his family in Iran. He was then 19 years old, and had been in Austria since the age of 15 where he now had a residence permit. In Iran, after the initial joy of the reunion after so many years, his family felt ashamed because of the boy's westernised behaviour. Because of this, they did not take him to gatherings or parties. So he had to stay at home nearly all of the time. Out of boredom, he took a taxi to explore the centre of Teheran. As he got out of the taxi, he gave the taxi driver a tip, as is customary in Vienna. The driver was very confused because there is no tradition of tipping in Iran, especially when the person giving the tip is a young Afghan Hazara boy.

Integration

According to Berry, Professor Emeritus from the Department of Psychology at Queen's University in Kingston, Canada, and an expert in the field of acculturation psychology (1990), this strategy – integration – is generally seen as the most promising acculturation strategy for the social well-being of a migrant. Berry distinguishes different migration strategies for adapting to a different culture: integration, assimilation, segregation and marginalisation. In this context, integration means adapting to the new environment, the dominant culture, while retaining your own culture.

Migration strategies⁹			
Social adaptation to a different culture		Adaptation to a dominant culture	
		Yes	No
Preserving your own culture	Yes	Integration	Segregation
	No	Assimilation	Marginalisation

Assimilation entails adaptation to a dominant culture, without preserving their own culture. In segregation and marginalisation there is no adaptation to the dominant culture.

⁹ Based on Berry's Model of Acculturation (1990)

In today's world, integration is mainly understood as the newcomer adapting, without this being combined with preservation of their own culture. For example, there are mandatory integration programmes for newcomers in which they must learn the new language and know about the most important norms and values. In several European countries there is even some hostility towards the newcomer, the foreigner. An offer of segregation rather than integration. The emphasis in Europe is thus shifting more and more towards assimilation, adaptation to the dominant culture. Preservation of your own culture is not labelled as positive, and segregation and marginalisation are increasingly seen. The newcomers are not included in society and mainly live in their own communities. On the other hand, there is a social trend in the Western world towards the inclusion of newcomers.

Inclusion

Inclusion can be described as a society that includes newcomers and accepts their differences, which will also change as a result of interaction. If there is social inclusion, it is not so much the newcomer who is taking action, who 'must' integrate, but the society, that is including newcomers and making it possible for newcomers to participate.

Inclusion

Inclusion is now a widely used concept for enabling the mentally and physically disabled to participate in society. Including them in society creates interaction that is of added value for both parties. Inclusive education is education in which children with disabilities are in class together with children without disabilities. The interaction between the children is enriching for all. Children with disabilities benefit from this environment in a cognitive and social sense, and children without disabilities learn values such as respect, tolerance, empathy and responsibility. They also become familiar with the principle that no one is excluded. UNICEF states that inclusive systems value the unique contributions students of all backgrounds bring to the classroom and allow diverse groups to grow side by side, to the benefit of all (UNICEF, n.d.).

A society that includes newcomers offers a great chance of positive integration. A good example of this is where young people with residence permits are given the opportunity to live in a housing complex together with students or young adults. Another is large companies making jobs available for young refugees. These young people do not yet speak the language well enough to be employed according to normal procedures, but they are given a chance. Many sports clubs are also open to newcomers. All this may require the necessary guidance if it is to be successful, as already mentioned, but these are positive initiatives in societies aimed at the inclusion of newcomers. Despite such positive

developments for people with permits, there are also many unaccompanied children who do not receive a permit and come under pressure to return to their country of origin.

7.4 Travelling on

Unaccompanied children often apply for asylum in a European country which is not their destination. The European asylum system, including the Dublin Regulation, forces refugees to apply for asylum in the first country of entry, while the destination is further in Europe. However, in countries such as Austria, children may be misinformed about their rights and how the Dublin III Regulation applies to unaccompanied children. Due to this misinformation, they believe that staying in Austria is not an option, and that they would be returned to a country on the border of Europe if they stayed. Partly because of this, the children often leave the country and travel further.

Transit often takes place illegally and is therefore, in fact, a continuation of the flight. As described in the first chapter, this often occurs because they want to travel on to family in another country, or want to be in a country that has better prospects for work. The latter may also be related to human trafficking, when young people are forced to travel. Well-known examples are young Vietnamese who try to enter England under very dangerous conditions on and in trucks. This often goes wrong, as it did at the end of 2019 when 39 dead bodies – including those of unaccompanied children – were found in a refrigerator truck in England.

An unaccompanied child's motivation to continue migrating, even under very dangerous circumstances, often makes guidance difficult. Making them realise that they already are or will end up in an exploitative situation, and that there are other possibilities, can sometimes lead to a change of plan. Contact with their family may help too. This is evident in the following example. In the port of Rotterdam, a 15-year-old Afghan unaccompanied child was removed from a truck by the police for the third time. The boy said he wanted to be reunited with his sister in England, and that his father had told him to keep trying. The boy kept saying that he would stop doing it, but after the third time the guardian no longer believed him. So he arranged a placement in a secure children's home and indicated that he wanted to make contact with the boy's father and sister. The boy said: "You have to leave my sister out of this, these are not women's issues, but you can call my brother in France." In consultation with the brother, and with the father's consent, a process was started to legally reunite the boy with his brother in France.

7.5 Return

In many EU Member States, immigration laws make a distinction between underage and adult refugees. A child without a residence permit is entitled to reception and can only be returned to the country of origin if there is adequate reception there. Once

they have reached the age of majority, they are expected to be able to take care of themselves and adequate reception is no longer a criterion. They lose the right to asylum reception at the age of 18 and are expected to return, or are deported.

Guiding unaccompanied children who have to return is often very difficult. Not only for the young person, but also for the guardian themselves, since many guardians think that forced return is never in the best interest of the soon-to-be adult. Young people, often with the family in the background, continue to hope for opportunities. Giving in to return means giving up all hope of those opportunities.

The International Organization for Migration (IOM) provides a small financial allowance for voluntary return when certain terms and conditions are met. A child can also receive support with reintegration in the form of guidance towards education or setting up a business. This can actually be an incentive for making a positive return plan. In some Member States, the local refugee council fulfils this task.

For the child, returning to the country of origin has the enormous benefit of being reunited with the family members from whom they have been separated for a long time. Experience shows that return is possible when both the child and their family are committed to it. Commitment from the family is almost indispensable in obtaining commitment from the child. After all, if the family agrees to a return, and makes an important contribution to drawing up a return plan, the unaccompanied child will be given the opportunity to return honourably and to be embedded in the extended family again.

In Denmark there have been positive experiences with guardians starting a dialogue with the child's family, and arranging for the guardian to travel back with the child. Experience shows that drawing up a return plan together with the child and the extended family has positive results. This often involves examining the possibilities for building an economically independent future. It includes an assessment of all possibilities in the country of origin, and how the young person can make use of training opportunities in Europe before returning. If the plan allows unaccompanied children to return honourably, something has also been achieved for the family.

An Afghan family, for example, said their son could not return to the region where they lived because the Taliban were still active there. The boy could go elsewhere and stay with relatives. If he would make sure he had a driver's licence and a knowledge of automotive technology, they saw good future opportunities for him, especially with the financial support from the IOM. He could then become a taxi driver with his own used car. And that is how it went. As soon as he had completed his training, he returned.

There are also some encouraging examples of young people from so-called 'safe countries' who have no chance of obtaining a residence permit and who have often been roaming through Europe for years. They usually think they are no longer welcome at home. After all, they were sent away once, for example because their mother had entered into a new relationship and there was no place for them in the new family, or because there was simply not enough food. There is the case of an Algerian boy who was in juvenile detention for a series of petty crimes. He said he had no family, but a social media search led to his mother. She came there and took her son back home. They were both very happy to have found each other again.

Motivating young people and their families to think about returning is often very difficult. This may be partly to do with others having an influence on them. Everyone knows stories of someone who eventually got a permit, and that is how the hope remains. It is understandable. After all, most refugees come from a country where there is a lot of corruption. "As long as you have the right contacts and enough money, you can always get the documents you need." And it is true that some asylum seekers do eventually obtain a permit, if it can be proved, for example, that it really is a desperate situation, or if a new immigration amnesty scheme is set up.

A 2013-14 study of children aged 12 to 18 in Kosovo who returned with their families (Monitoring Returning Minors, 2014) found that 37 per cent of the children had serious socio-emotional problems due to the insufficient quality of the socio-cultural and parenting environment. One of the main factors was that the children did not attend school because they no longer spoke their native language or because school was too far away and there was no money for transport. Where children could not go to school, there was no social connection with peers. These children often showed symptoms of depression. Small interventions aimed at empowerment of the children contributed to their well-being. For example, some children thought that they would like to take a course in the language of the country where they had been staying, such as French or German, so as not to forget the language they had learned and to increase their chances of interesting work. At the language school, they then met other 'returnees'. This contact, in addition to being able to retain the Western European language, turned out to be very supportive for them. They set up a social media group for returnees. This project also demonstrated the importance of monitoring return – for everything might seem to be arranged well in theory, but in practice the result may be disappointing, and organisations such as IOM, local organisations, or guardianship organisations can then intervene.

There have also been positive experiences with the assistance of young people who have already returned to the country. Refugees are convinced that return is dangerous, or very shameful and a violation of family honour. It can also be difficult to get

a realistic idea of the return options and the situation upon return. Often a long time has passed, circumstances have changed or there are opportunities in a different part of the country than where the young person comes from. As mentioned earlier, help given by the child's family can be very valuable in this regard, but that also applies to young adults who have already returned. Bringing young people who now have to return into contact with young people who have already returned gives them a realistic idea of how their life could be after their return. This can help them to overcome the fear and take that step.

But not all young people get this far, and the despair they feel at the idea of having to return can, rightly or wrongly, reach enormous proportions. Young people sometimes become suicidal, saying that they would rather die here than having to return. This can be very difficult for the person guiding the child. They too sometimes experience the powerlessness these young people feel.

If a young person has to return but will not cooperate, and they do not want to wait for the immigration service to forcibly deport them, they become an undocumented migrant and start living illegally in the country. They have to leave the shelter, have no income and depend on their social network or organisations that support undocumented people. Organisations that are committed to supporting refugee children generally view the prospect of an illegal stay upon entering adulthood as highly undesirable.

7.6 Unlawful residence as an undocumented person

Young people who have reached the end of their time in reception, and who have no legal options left, find themselves in a worrying and vulnerable position. They are at great risk of ending up in exploitative situations such as prostitution, drug trafficking or illegal employment.

Life for undocumented migrants differs greatly from country to country within Europe. In the agricultural sector in Italy and Spain, for example, making use of illegal immigrants as seasonal workers is common practice. These people often live in dire conditions and receive very low pay. Many of the workers prefer this to the even more dire situation in the country of origin and, of course, continue to hope for better opportunities. There are also countries where employing undocumented migrants is punishable and heavily fined. Undocumented people have a more difficult life there, and they run a great risk of ending up in illegal labour such as drug and cannabis production or the sex industry.

When guiding a young person it is important to inform them properly about their rights if they are undocumented. Such as the right to healthcare, right to report exploitation, abuse and human trafficking, and the option of returning with the support of the IOM.

7.7 Ayana's story about her life as an unaccompanied child¹⁰

Ayana fled Burundi at the age of 8, together with her 19-year-old aunt. She has been in England ever since. Her aunt couldn't take care of her properly, and she ended up in foster care. Ayana explains:

"I still remember living with my aunt. It was fun, but sometimes stressful, and chaotic too. There was often no food and I was regularly late for school. I was 10 when I went into foster care. There were many children there, including refugees like me. Well, I'm not sure what to say about it. I think that was mainly where I learned to adapt, not to stand out and not to make people angry. I think the foster mother was too old and there were too many children. She was very strict, easily angered and there was no personal attention. I began closing myself off from my surroundings, and said to myself that I would get through it as long as I did my best at school."

"My guardian came by every now and then, and when he asked how things were going, I said, 'Good.' I thought it was supposed to be like that and that I should make the best of it. My aunt said so as well. She said: 'Here you get opportunities to go to school that you would never have had back home, so be grateful.' Well, at home in Burundi it was hard, my mother was slaughtered just like many others. I saw it with my own eyes, it was awful. But ever since I had treatment, I have less nightmares."

"I stayed in that foster family until I was 16. It went really well at school and I wanted to continue. I had set my mind on studying law so that I could help other refugees. I had a friend who had a room in a supported living programme, and I wanted that too. As an unaccompanied child, I had a mentor who was willing to arrange it, she believed in me, even when I said I wanted to study law. While my foster mum and teachers said I shouldn't be silly and just be happy if I can make a living and take care of myself."

"From then on I really did well. I felt liberated and made friends. I had a job in a restaurant and, together with the financial support I got through social services, I had enough money. I was also given support to deal with my finances and to apply for a scholarship. When I turned 18, I had to live an independent life. I moved to my own apartment and now study law and work at the same time. I have friends and sometimes a boyfriend. It is a nice mixed neighbourhood with people from all over the world – Pakistan, Somalia, Ghana, India. I don't feel different here because everyone is different here. For complicated issues I can always turn to someone. I really know a lot of people. Sometimes I still have contact with my mentor from the past. She says

¹⁰ *Ayana's story and name are fictional for privacy reasons. But all experiences are based on what many unaccompanied children have told.*

she is so proud that I am doing so well with my studying and that I am doing well with everything else too. I am actually quite proud of myself. I was able to grasp the opportunities I was given. When I finish my studies I first want to make a trip back to Burundi and then work here as a lawyer.”

References

Amnesty International. *Cultuurrelativisme (putting culture into perspective)* (n.d.). Retrieved April 22, 2017, from <https://www.amnesty.nl/encyclopedie/culturele-rechten-cultuurrelativisme-en-mensenrechten>

Asylkoordination Österreich (n.d.). *Presseaussendungen: asylkoordination fordert Maßnahmen und hofft auf Ankündigung im Regierungsprogramm (Press release: Asylkoordination calls for measures and hopes to be announced in the government program)*. Retrieved, June 25, 2020, from <https://www.asyl.at/de/info/presseaussendungen/hael-federkinderfluechtlingsverschwindetspurlos/?s=845>

Axelsson, L., Baarnhielm, S., Dalman, C., & Hollander, A. (2020). Differences in psychiatric care utilisation among unaccompanied refugee minors, accompanied migrant minors, and Swedish-born minors. *Social Psychiatry and Psychiatric Epidemiology*, *55*, 1449-1456.

Bagozzi, R., Verbeke, W., & Gavino, J. (2003). Culture Moderates the Self-Regulation of Shame and Its Effects on Performance: The Case of Salespersons in the Netherlands and the Philippines. *Journal of Applied Psychology*, *88*.

Bean, T. (2006). *Assessing the psychological distress and mental healthcare needs of unaccompanied refugee minors in the Netherlands*. doctoral thesis, Leiden University.

Bean, T., Derluyn, I., Eurelings-Bontekoe, L., Broekaert, E., & Spinhoven, P. (2007). Comparing psychological distress, traumatic stress reactions, and experiences of unaccompanied refugee minors with experiences of adolescents accompanied by parents. *Journal of Nervous and Mental Disease*, *195*, 288-297.

Bean, T., Eurelings-Bontekoe, E., Mooijaart, A. & Spinhoven, P. (2006). Factors associated with mental health service need and utilization among unaccompanied refugee adolescents. *Administration and Policy in Mental Health*, 33(3), 342-355.

Bedford, O., & Hwang, K. (2003). Guilt and shame in Chinese culture: A cross-cultural framework from the perspective of morality and identity. *Journal for the Theory of Social Behaviour*, 33, 127-144.

Berry, J. (1990). Psychology of acculturation. Understanding individuals moving between cultures. *Applied cross-cultural psychology*, 232-253.

Border Violence Monitoring Network, Balkan Region Report (2020, June). Retrieved July 17, 2020, from <https://www.borderviolence.eu/wp-content/uploads/JUNE-REPORT.pdf>

Carlson, B., Cacciatore, J., & Klimek, B. (2012). A risk and resilience perspective on unaccompanied refugee minors. *Social Work*, 57.3, 259-269.

COA, GZA, & GGD GHOR Nederland. (2017, March). *Gezondheidszorg voor asielzoekers in Nederland (Healthcare for asylum seekers in the Netherlands)*. Retrieved April 10, 2017, from <https://www.ggdghorkennisnet.nl/thema/publieke-gezondheidszorg-asielzoekers-pga/publicaties/publicatie/16699-factsheet-gezondheidszorg-voor-asielzoekers-in-nederland>

COA. (n.d.). *Gezondheidszorg, wonen op een asielzoekerscentrum (Healthcare, living in an asylum seekers centre)*. Retrieved April 3, 2017, from <https://www.coa.nl/nl/asielopvang/wonen-op-een-asielzoekerscentrum/gezondheidszorg>.

Colucci, E., Minas, H., Guerra, C., & Paxton, G. (2015). In or out? Barriers and facilitators to refugee-background young people accessing mental health services. *NCBJ*, 52 (6), 766-90.

Conant, E. (2015, September 19). *The World's Congested Human Migration Routes in 5 Maps*. National Geographic. Retrieved April 15, 2017, from <https://www.nationalgeographic.com/news/2015/09/150919-data-points-refugees-migrants-maps-human-migrations-syria-world/>

Court of Justice of the European Union. C-648/11, *The Queen, on the application of MA and Others. v Secretary of State for the Home Department*, 6 June 2013, ECLI:EU:C:2013:367.

De Anstiss, H. & Ziaian, T. (2010). Mental health help-seeking and refugee adolescents: Qualitative findings from a mixed-methods investigation. *Australian Psychologist* (45), 29-37.

De Vries, J. (2014). Landen waar homoseksualiteit strafbaar is (Countries where homosexuality is punishable). *Volkskrant*. Retrieved March 23, 2017, from <http://www.volkskrant.nl/buitenland/oeganda-is-de-enige-niet-in-deze-77-landen-is-homoseksualiteit-strafbaar~a3604494/>

DSP-groep Amsterdam, Tilburg University. (2016). *Niets is wat het lijkt, Eritrese organisaties en integratie (Nothing is what is seems, Eritrean organisations and integration)*. Retrieved March 10, 2017, from https://www.dsp-groep.nl/wp-content/uploads/16pverit_Niets_is_wat_het_lijkt-DSP_2016.pdf

European Commission (2020). Migrant's Health. Retrieved July 17, 2020, from: https://ec.europa.eu/health/social_determinants/

European Migration Network (2018, July). *Approaches to Unaccompanied Minors Following Status Determination in the EU plus Norway*. Retrieved June 25, 2020, from http://emn.ie/files/p_201808090907072018_emn_synthesis_unaccompanied_minors_09.08.2018.pdf

Eurostat. (2020, April 28). Newsrelease: Asylum applicants considered to be unaccompanied minors. Retrieved September 1, 2020, from <https://ec.europa.eu/eurostat/documents/2995521/10774034/3-28042020-AP-EN.pdf/03c694ba-9a9b-1a50-c9f4-29db665221a8>

Fazel, M., Reed, R. V., Panter-Brick, C., & Stein, A. (2012). Mental health of displaced and refugee children resettled in high-income countries: risk and protective factors. *Lancet*, 379, 266-282.

Geltman, P. L., Grant-Knight, W., Mehta, S. D., Lloyd-Travaglini, C., Lustig, S., Landgraf, J. M., & Wise, P. H. (2005). The "lost boys of Sudan": Functional and behavioral health of unaccompanied refugee minors re-settled in the United States. *Archives of Pediatrics & Adolescent Medicine*, 159(6), 585-591.

Graham, H. R., Minhas, R. S., & Paxton, G. (2016). Learning problems in children of refugee background: A systematic review. *Pediatrics*, 137. DOI: <https://doi.org/10.1542/peds.2015-3994>

Groeninck, M., Meurs, P., Geldof, D., Wiewauters, C., Van Acker, K., De Boe, W., & Emmery, K. (2019). *Veerkracht in beweging. Dynamieken van vluchtelingengezinnen versterken*. Maklu.

Hajdukowski-Ahmed, M. (2008). *A Dialogical Approach to Identity: Implications for refugee women*. In Hajdukowski-Ahmed, M., Khanlou, N. & Moussa, H., Not born a Refugee Woman (p. 28-53). New York – Oxford: Berghahn Books.

Hermans, D., Raes, F., & Orlemans, H. (2017). *Inleiding tot de gedragstherapie*. Houten: Bohn, Stafleu van Loghum.

Hodes, M., Jagdev, D., Chandra, N. & Cunniff, A. (2008). Risk and resilience for psychological distress amongst unaccompanied asylum seeking adolescents. *Journal of Child Psychology and Psychiatry*, 49(7), 723-732.

Hofstede, G., Hofstede, G.J. & Minkov, M. (2010). *Cultures and Organizations; Software of the Mind Intercultural Cooperation and Its Importance for Survival*: 3rd edition. Atheneum publisher.

Hofstede, G., Hofstede, G.J., & Minkov, M. (2016). *Allemaal Andersdenkenden: Omgaan met cultuurverschillen. (Everybody thinks differently: Dealing with cultural differences)*. Business Contact/ Atlas Contact.

Janssen, J. (2006). *Je eer of je leven, een verkenning van eerzaken voor politieambtenaren en andere professionals (Your honour or your life, a review of honour cases for police officers and other professionals)*. Elsevier.

Jarlby, F., Goosen, S., Derluyn, I., Vitus, K., & Jervelund, S.S. (2018). What can we learn from unaccompanied refugee adolescents' perspectives on mental health care in exile? *European Journal of Pediatrics*, 177 (12), 1767-1774.

Jugendliche ohne Grenzen (2017). *Welcome to Germany: A guide for unaccompanied minors*. Bundesfachverband unbegleitete minderjährige Flüchtlinge e.V. https://b-umf.de/src/wp-content/uploads/2017/12/welcometogermany_english.pdf

Jongedijk, R. (2014). *Levensverhalen en psychotrauma, narratieve exposure therapie in theorie en praktijk (Life stories and psychotrauma, narrative exposure therapy in theory and practice)*. Stichting Arq Diemen, p/a Uitgeverij Boom.

Kalverboer, M., Zijlstra, E., van Os, C., Zevulun, D., ten Brummelaar, M., & Beltman, D. (2016). Unaccompanied minors in the Netherlands and the care facility in which they flourish best. *Child and Family Social Work*, 1365-2206.

Kerkhof, A., Spijker, B. (2012). *Piekeren over zelfdoding; een stapsgewijze methode om minder last te hebben van gedachtes over zelfdoding (Ruminating about suicide; a step-by-step method for reducing suicidal thoughts)*. Boom Hulpboek.

Kleinman, A. (2005). *Culture and Psychiatric Diagnosis and Treatment: What are the necessary therapeutic skills?* Trimbos Institute.

Korrelboom, K., & Ten Broeke, E. (2014). *Geïntegreerde cognitieve gedragstherapie, handboek voor theorie en praktijk (Integrated cognitive behaviour therapy, manual on theory and practice)*. Bussum Coutinho.

Kouratovsky, V. (2008). Inwikkeling in het belang van cultuursensitieve diagnostiek en therapie (Envelopment in the interests of culturally-sensitive diagnosis and therapy). In Oei, T.I. & Kaiser, L. (2008). *Forensische Psychiatrie onderweg* (pp 371-385). Wolf Legal Publishers.

Laban, K., Attia, A., & Hurulean, E. (2010). Veerkracht als uitgangspunt bij diagnostiek en behandeling bij asielzoekers en vluchtelingen. In de Jong and Colijn (red). *Handboek Culturele Psychiatrie en Psychotherapie*.

Lamkaddem, M., Essink-Bot, M., Deville, W., Gerritsen, A., & Stronks, K. (2015). Health changes of refugees from Afghanistan, Iran and Somalia: The role of residence status and experienced living difficulties in the resettlement process. *European journal of public health*, 25 (6), 917-922.

Lanslots, E. (2012). *Een belevingsonderzoek naar agency bij niet-begeleide buitenlandse minderjarige meisjes. (A research into the experience of agency among unaccompanied female minors)*. [Master's thesis, Gent University].

Lønning, M. N. (2020). Layered journeys: Experiences of fragmented journeys among young Afghans in Greece and Norway. *Journal of Refugee Studies*, 33, 316-335. DOI: <https://doi.org/10.1093/jrs/feaa052>

Majumder, P., Vostanis, P., Karim, K., & O'Reilly, M. (2018). Potential barriers in the therapeutic relationship in unaccompanied refugee minors in mental health. *Journal Mental Health*, 28(4), 372-378.

Mangrio, E., & Sjögren Forss, K. (2017). Refugees' experiences of healthcare in the host country: A scoping review. *BMC Health Services Research*, 17, 814 (2017). <https://doi.org/10.1186/s12913-017-2731-0>

Migrant's health. (n.d.). European Commission. Retrieved July 17, 2020, from https://ec.europa.eu/health/social_determinants/migrants_en

Missing Children Europe (2017, 18 January). *Mention the unmentioned: invisible, 10,000 child refugees have already disappeared in Europe*. Retrieved February 23, 2017, from <http://missingchildreneurope.eu/news/Post/1099/Mention-the-unmentioned-Invisible-10-000-child-refugees-have-already-disappeared-in-Europe>

Monitoring Returning Minors (2014). *The Migrant*, summer 2014, special edition. Hit-foundation.eu Retrieved April 13, 2017, from https://issuu.com/hitfoundation/docs/summer_2014_migrant_monitoring_retu

Mooren, T., & Bala, J. (2016). *Goed ouderschap in moeilijke tijden. Handleiding voor meergezinsgroepen met vluchtelingen. (Good parenting in difficult times. Manual for multiple family groups with refugees)*. Pharos.

Ní Raghallaigh, M., & Gilligan, R. (2010). Active survival in the lives of unaccompanied minors: Coping strategies, resilience, and the relevance of religion. *Child and Family Social Work*, 15(2), 226 – 237.

Ní Raghallaigh, M. (2011). Religion in the Lives of Unaccompanied Minors: An Available and Compelling Coping Resource. *The British Journal of Social Work*, 41(3), 539-556.

Ogden, P., & Minton, K. (2000). Sensorimotor Psychotherapy: One method for processing traumatic memory. *Traumatology*, 6 (3), 149-173. <https://doi.org/10.1177/153476560000600302>

Oppenheim, H., Hornsveld, H., Ten Broeke, E., & De Jongh, A. (2015). *Praktijkboek EMDR deel II, Toepassingen voor nieuwe patiëntengroepen en stoornissen (EMDR manual part II, applications for new patient groups and disorders)*. Pearson Amsterdam.

Oxford University Press. (2015). Resilience. *Oxford Advanced Learner's Dictionary*. Oxford University Press.

Pater, W., Spinder, S., & Berk, M. (2009). *Veilig en beschermd, methodiek beschermde opvang voor alleenstaande minderjarige vreemdelingen (Safe and protected, methodology for protected shelter for unaccompanied children)*. Amsterdam: Pro Education.

Pearson Education. (2014). Resilience. Longman Dictionary of Contemporary English 6. Pearson Longman.

Pharos, (2016). *'Van ver gekomen'; een verkenning naar het welzijn en de gezondheid van Eritrese vluchtelingen (From far away; a review of the health and welfare of Eritrean refugees)*. June 2016. Pharos.

Pinto, D. (2007). *Interculturele communicatie, een stap verder (Intercultural communication, the next step)*. Bohn Stafleu van Lochem.

Plysier, S. (2003). *Kinderen met een tweede huid. Onthaal van kinderen op de vlucht (Children with a second skin, reception for fleeing children)*. Garant- Uitgevers.

Posselt, M., McDonald, K., Procter, N., De Crespigny, C., & Galletly, C. (2017). Improving the provision of services to young people from refugee backgrounds with comorbid mental health and substance use problems: addressing the barriers. *BMC Public Health*, (17), 280.

Pulvirenti, M., & Mason, G. (2018). Resilience and survival: Refugee women and violence. *Current Issues in Criminal Justice*, 23, 37-52.

Rhmaty, F. (2011). *Traumaverwerking met vluchtelingen, een transculturele systeem-benadering (Processing trauma with refugees, a transcultural systemic approach)*. Van Gorcum.

Rijksoverheid. (n.d.). *Nieuw in Nederland; inburgering en integratie van nieuwkomers. (New in the Netherlands; civic integration for newcomers)*. Retrieved March 13, 2017, from <https://www.rijksoverheid.nl/onderwerpen/nieuw-in-nederland/inhoud/inburgering-en-integratie-van-nieuwkomers>

Röder, A., & Mühlau, P. (2012). What determines the trust of immigrants in criminal justice institutions in Europe? *European Journal of Criminology*, 9, 370-387.

Schippers, M. (2014). Working with the unaccompanied child, a tool for guardians and other actors working for the best interest of the child. CONNECT, an EU funded project. Nidos. Retrieved March 13, 2017, from http://www.connectproject.eu/PDF/CONNECT-NLD_Tool2.pdf

Schippers, M., Van de Pol, P., De Ruijter de Wildt, L., Thys, K., Krogshøj Larsen, M., Massoumi, Z., & Rozumek, M. (2016). *Alternative Family Care: Manual for staff working with reception families and unaccompanied children living in reception families*. Nidos, Utrecht. Retrieved, April 13, 2017, from <http://engi.eu/projects/alfaca/manual/>

Schippers, M. (2017). *Kinderen gevlucht en alleen. (Children, fled and alone)*. Nidos.

Schippers, M., Bastiaens, F., & Verstegen, T. (2019). *Veerkracht Versterken van Vluchtelingenkinderen. De Nidosmethodiek voor interculturele jeugdbescherming. (Strengthening the resilience of unaccompanied children, the Nidos methodology for intercultural child protection)*. Nidos.

Schoenmaeckers, R., Al-Qasim, T., & Zanzottera, C. (2019). *Journeys of trust and hope: Unaccompanied minors from Eritrea in Ethiopia and the Netherlands*. *Mobile Africa: Human Trafficking and the Digital Divide*, 3, 425.

Sleijpen, M. (2017). *Crossing borders: Trauma and resilience in young refugees. A multi-method study*. Arq, psychotrauma expert group.

Smid, G. E. (2020). A framework of meaning attribution following loss. *European Journal of Psychotraumatology*, 11 (1). DOI: 10.1080/20008198.2020.1776563.

Spinder, S., & Van Hout, A. (2008). *Jong en Onderweg: Nidosmethodiek voor de begeleiding van ama's (young and in transit: Nidos methodology for guiding unaccompanied children)*. Nidos.

Spinder, S., Van Hout, A., & Hesser, K. (2010). *Thuis en Onderweg: Nidosmethodiek voor Opvang en Wonen in Gezinsverband (At home and in transit: Nidos methodology for reception and living in families)*. Nidos.

Staring, R., & Aarts, J. (2010a). *Jong en illegaal in Nederland, een beschrijvende studie naar de komst en het verblijf van onrechtmatig verblijvende (voormalige) alleenstaande vreemdelingen en hun visie op de toekomst (Young and illegal in the Netherlands, a descriptive study of the arrival and stay of undocumented former unaccompanied children and their vision of the future)*. Criminology Department, Erasmus University Rotterdam.

Staring, R., & Aarts, J. (2010b). Werken in de marge Illegaal verblijvende jongeren in Nederland (Working on the fringes of society, young people living illegally in the Netherlands). *Justitiële verkenningen*, jrg. 36, no. 7, 2010 Informele economie, uitbuiting en illegaliteit (the informal economy, exploitation and being undocumented). WODC-Boom juridische uitgaven, 43 – 55.

Stoffelen, A., & Visser, J. (2016, 30 Sept 2016). Part 21. De administratie van een nieuwkomer, 'Welkom, nu begint de bureaucratie' (*Newcomers and bureaucracy*). *Volkscrant*. Retrieved, February 3, 2017, from <http://www.volkscrant.nl/binnenland/welkom-nu-begint-de-bureaucratie~a4386336/>

Stöfösel, M. & Mooren T. (2010). *Complex trauma diagnostiek en behandeling (Complex trauma diagnosis and treatment)*. Bohn Stafleu van Loghum

Struik, A. (2010). *Slapende honden? Wakker maken!: Een behandelmethodede voor chronisch getraumatiseerde kinderen. (Sleeping dogs? Wake them! A method for treatment of chronically traumatised children)*. Pearson Assessment And Information B.V.

Tjin A Djie, K., & Zwaan, I. (2007). *Beschermjassen: transculturele hulp aan families. (A protective layer: transcultural help for families)*. van Gorcum.

UNICEF (2016). *Uprooted - The growing crisis for refugee and migrant children*. United Nations Children's Fund (UNICEF).

Valibhoy, M.C., Kaplan, I., & Szwarc, J. (2017). "It comes down to just how human someone can be": A qualitative study with young people from refugee backgrounds about their experiences of Australian mental health services. *Transcultural Psychiatry*, 54 (1), 23-45.

Van Es, C., Sleijpen, M., Ghebreab, W., & Mooren, T. (2019). Cultuursensitief werken met alleenstaande jonge vluchtelingen: 'Veerkracht-project' biedt trauma geïnformeerde interventie (Culturally sensitive approach to unaccompanied children: 'Resilience project' offers trauma-informed interventions). *Kind en adolescent praktijk*, 18 (4), 16–22. <https://doi.org/10.1007/s12454-019-0040-y>

Van Hest, F. (2012). Rouwen met vluchtelingen en asielzoekers. (*Grieving with refugees and asylum seekers*) *Tijdschrift voor groepsdynamica en groepstherapie*. 7(2), 6-18.

Van IJzendoorn, M.H. (2008). *Opvoeding over de grens. Gehechtheid, trauma en veerkracht (Parenting across borders: attachment, trauma and resilience)*. Amsterdam: Boom Academic.

Van Reisen, M., Al-Qasim, T., Carlotta Zanzottera, C., & Schoenmaeckers, R. (2018). *Trust and the Triggers of Trauma: Exploring Experiences of Trust between Eritrean Unaccompanied Minors and their caregivers in The Netherlands*. Tilburg University, EEPA, Nidos.

Van der Veer, G. (1996). Voogdijmaatschappelijk werk en gevluchte adolescenten. (*Guardianship and fled adolescents*). De Opbouw: instelling voor ambulante jeugdhulpverlening.

Van der Veer, G. (2002). *Gevluchte adolescenten: ontwikkeling, begeleiding en hulpverlening (Adolescent refugees: development, guidance and support)*. Pharos.

Vermette, D., Shetgiri, R., Al Zuheiri, H., & Flores, G. (2015). Healthcare Access for Iraqi Refugee Children in Texas: Persistent Barriers, Potential Solutions, and Policy Implications. *Journal of Immigrant and Minority Health*, 17(5).

Verstegen, T. (2012). *Een duurzaam (terugkeer)perspectief voor ama's; commitment van het kind en commitment van de familie. De dubbel C benadering (sustainable prospects for unaccompanied children; commitment to the child and their family)*. Nidos Utrecht. Retrieved May 8, 2018 from <https://www.nidos.nl/>

Vervliet, M., & Derluyn, I. (2013). *De trajecten van niet-begeleide buitenlandse minderjarigen: Verwachtingen, agency en psychosociaal welzijn*.

Children on the move, a guide to working with unaccompanied children in Europe

This guide has been written for all those involved in the guidance and support of unaccompanied children. It is also for anyone who is simply interested in how unaccompanied children deal with the enormous task of finding their way in an unknown country after going through war, poverty, flight, traumatic experiences, loss, uncertainty and uprooting.

The content is based on the knowledge and years of experience of the many participating partners who now form the European Guardianship Network (EGN). Working with these children has given them all valuable insights into who these children are and what they need.

All unaccompanied children should be regarded as unique so there is no 'one size fits all' approach for this vulnerable and diverse group. The guide aims to offer the reader understanding of children's strengths, needs and their emotional baggage. Knowledge of their background, cultural differences, guidance needs, health issues and safety risks is indispensable in offering them suitable guidance. By combining the insights from different European countries, with their different perspectives, practical experience, knowledge and literature, this comprehensive guide provides the skills and insights that will help professionals support the children. Application of this guide will also ensure that each child is given the guidance and support, education, accommodation and treatment they need, so that by the age of 18 they are sufficiently resilient and self-reliant to live their life independently.

Marjan Schippers was a child-psychologist at Nidos, the Dutch guardianship agency appointed by the government in 2002 to provide guardianship services for unaccompanied asylum seeking and refugee children. She worked for Nidos from 2009 until 2021 and was a valuable member of the organisation. She passed away in 2021. She wrote this guide in cooperation with the members and partners of EGN.

