Principles and Approaches to Guide the Relocation and Integration of UAC from Greece to other EU Member States

Background
As of February 29, there are 5,379 unaccompanied children in Greece who remain in urgent need of durable solutions, including expedited registration, processing and relocation. Recent pledges by EU countries to support the relocation of some UAC is welcomed. This Principles and Approaches to Guide Relocation and Integration document has been aligned with the complimentary guidance “Minimum Child Protection Standards for Identification” that outlines the principles that should guide selection and prioritization.

Once children have been identified for relocation, a number of measures to protect and streamline the relocation and integration process in line with child protection standards are recommended. This document is a chapeau of these recommendations and builds on the existing support structures that exist across Europe and in likely countries of relocation (such as Germany and Finland). These recommendations recognize and derive from the strength of these systems, while proposing a number of underlying considerations that should inform the thinking of authorities and social workers tasked with relocation of unaccompanied children from Greece.
Guiding Principles:

Identification of children for prioritization must be based on sound criteria in line with humanitarian principles, child rights frameworks, and the 1951 refugee convention. These have been proposed in the complementary “Standards for Identification” document. Similarly, the process of expedited processing and relocation of UAC selected must follow these principles including:

- **Best Interest of the Child:** decisions related to the relocation of unaccompanied children must be based on an individualized review of what is in that child’s best interest.
- **Do no harm:** All migrant children face vulnerabilities and have needs—often critical ones. Prioritizing or processing UAC for relocation, should not adversely impact other children or delay meeting their urgent needs. Similarly, approaches should be careful to safeguard against creating an incentive for children to arrive unaccompanied.

1 See complementary UNICEF Document on “Standards and Guidance on Identification and Relocation of UAC” for more details.
Preparing for Relocation:

In the country of departure (Greece):

- Eligibility criteria should be as broad as possible and based on need (see Minimum Child Protection Standards for Identification document for proposed parameters).²

- Each child’s case should undergo a best interest assessment (BIA)/best-interest-determination (BID) process involving caregivers and guardians taking into consideration the needs and views of each individual child and matching them to a country of relocation where appropriate (detailed processes for this have been proposed in the European Commission “Standard Operating Procedures”).²

- In cases where countries require a security check, this should be streamlined as much as possible and commence immediately upon notification of a relocation decision by the Greek authorities. In case a child is rejected by a Member State on security grounds, all relevant information pertaining to the rejected candidate should be transmitted to the Greek Authorities through the appropriate channels and services.

- As part of the UAC selection process, there must be sufficient time to allow for children to be fully informed about the options, absorb and understand information and be consulted on their views as it pertains to relocation. Considering the child’s evolving capacities, they should be provided with the relevant information to exercise their ability to identify the alternatives available if they chose not to be relocated. Information from these discussions should be used to: 1) inform their best interest determination; and 2) where relevant, be used to inform integration in the country of relocation. If the child has a reasonable justification for not wanting to be relocated to one particular country, they should be considered for transfer to another country unless they do not wish to be relocated at all.

- Governments of asylum (Greece) and relocation should reach an agreement on handover procedures, expedited protocols, and data-sharing. The safe and confidential transfer of case-file information and any specific support needs to case-workers in the country of relocation is essential to their ability to provide support upon arrival.

- In the case of unaccompanied children, maintaining and regular updating strong casefiles that include any known details about the child’s history, including health or mental health information, education enrollment, learning disabilities, interests, skills, languages, and family history are particularly critical. Authorities are encouraged to invest in ensuring that these files are comprehensive so that these parts of the child’s story can be maintained, and adequate, tailored, services are provided in the country of relocation. Sharing such information among the different actors that are providing assistance to children throughout the different phases of the relocation process and allowing for those to update files with any new information that might become available, minimizes duplication in the processing and questioning of children, including, upon arrival in the country of relocation.

- Any information that could inform future family tracing efforts should be transferred to the country of relocation so these efforts can continue.

- Once a child’s case has been accepted by the country of relocation (and any required clearance has been obtained), children should be informed about the relocation decision, any aspects of the decision-making that are relevant to them, and the steps that will be involved in relocation. Where possible, this should include details related to early integration in the country of relocation. If only partial information is available, then the case manager should share as much information as possible, and ensure the child is fully informed before a transfer takes place. It is important to recognize that children may have mixed feelings as well as fears about their relocation. Officials and caseworkers can help prepare children through providing:

  o Simple, age-appropriate and accurate information on what is going to happen before, during and after their relocation. This may include: details on the anticipated journey; where they will live upon relocation and with whom; clearly defining the process that will await them to determine their care arrangements and legal status; contact information for support agencies/persons upon their return (e.g. legal and social services).³

  o Children should be given time to process information and an opportunity to express concerns and ask questions to help them prepare for their transfer.

- Children should be given the opportunity to prepare and to say goodbye to peers, guardians, and caregivers. Guardians or caregivers should be encouraged and supported to prepare children for relocation.

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² For additional details on previous relocation processes, see: IOM, “Draft Standard Operating Procedures for the Relocation of UMC fro Greece.”

³ Germany has an excellent website available to inform unaccompanied children about their rights and the support services available to them. Such a resource can be made available in advance to help children be more informed. [https://handbookgermany.de/en/rights-laws/asylum/under-18.html](https://handbookgermany.de/en/rights-laws/asylum/under-18.html)

⁴ Depending on the placement, this may include the need for tailored or complementary training for social workers—a need that should be reviewed on a case by case basis.
In the country of relocation (e.g. Germany, Finland, etc.):

Given the strong national systems that are in place to support migrant and refugee integration in many EU member states, efforts targeting UAC should be integrated into these systems and draw upon the expertise available.

• As soon as a relocation decision is taken, authorities in the country of relocation should be informed.

• Prior to the relocation, social workers child psychologists who will be responsible for supporting the children should be identified, informed and prepared for their arrival. Efforts should be taken to identify people who are considered high-performers, have excellent skills in developing relationships and providing tailored social support. Trust-building between relocated children and social workers will be helped significantly by identifying social workers whom the child would potentially identify with (e.g. with shared language, cultural background, age, gender, etc.). Efforts should be taken to ensure that these social workers and psychologists can be available to the children over a sustained period of time (1-2 years).

• Specialized expertise to identify and address medical, mental health and psychosocial needs, and/or needs related to the experience of sexual or gender-based violence should be identified and a protocol for referral should be put in place.

• Similarly, specialized expertise, legal aid and representation may need to be made available free of charge to the child on access to administrative procedures accessing durable solutions in the country of relocation, including after the child turns 18.

• Integration support services should be identified and prepared to support language, educational and vocational support in the country of relocation.

• Accommodation should be identified in advance of relocation and communicated to Greek authorities as well as other relevant stakeholders ahead of relocation. Given the different profiles and needs, accommodation decisions should be based on individual cases. Family-based care should be the norm for younger children (for whom this is almost always in their best interest) and is strongly encouraged for all children to support their integration.

• Officials involved in the transfer of children can help ensure their safety by following child protection principles throughout the transportation, such as by ensuring:
  o Informed consent/assent has been obtained.
  o Presence of social workers, child protection actors or other trusted humanitarian actors to accompany children. Consideration is given to the gender balance of person/s requested to accompany children.
  o Medical escort in case of pregnant girls and/or special attention for girl mothers, children with disabilities etc.
  o Safest and most child-appropriate transportation is selected noting ages, abilities and medical conditions.
  o Safety and wellbeing throughout journey, e.g. adequate water, meals, infant formula (if needed), hygiene items including diapers and sanitary pads, comfort aids for children.

• Media reporting on children should never put them at risk and the best interests of each child should be protected over any other consideration, e.g. public interest. Coverage that identifies children could put them at risk of harm. Officials can support children by being aware of these risks and by avoiding sharing specific or identifiable information with the media.
Upon Arrival in the country of Relocation:
Governments across Europe have existing frameworks for processing and supporting refugee integration. They are encouraged to use these systems and avoid approaches that single out migrant children and could undermine their integration.

- Migrant children have experienced months and in some cases years of temporary accommodation. Placing them in an interim care facility while Health and Social Workers can conduct assessments and provide medical care may be deemed necessary but should be limited to the shortest time possible. These facilities should be as home and family-like as possible, with high caregiver to child ratios.

- Necessary health, including mental health, assessments should be conducted as quickly as possible, and by professionals trained in gender-sensitive assessments and building upon medical screenings conducted before their departure from Greece. Confidentiality must be maintained. Caution is needed to avoid having the child interact with a high number of professionals and over-exposing him/her to continuous requests and re-telling of their experience, which can lead to additional traumatization, stigmatization and harm. It is also important to ensure both male and female professionals are available.

- Any testing for HIV or other disease must be truly voluntary, confidential, and involve informed consent and counselling.

- When placed in foster care, children’s family links should continue to be pursued.

- Options for continued family tracing should be reviewed, communicated to the child, and commence as soon as possible where relevant.

Considerations for Successful Education Integration:

- Completing basic schooling is mandatory in European countries and is an essential part of integration for unaccompanied children being relocated. However, careful consideration of placement and support needs are required to ensure the child will be equipped to succeed.

- It is recommended that the education system develops a coordination mechanism to define an individualized and gender sensitive education plan for all unaccompanied migrant boys and girls, including catch up education, accelerated learning, or alternative education, where needed.

- Depending on the child’s age and the laws of the country, a determination may be made about whether they should be placed in a traditional secondary school or a vocational training program.

- Children may need to begin with intensive language courses before being able to join a school. In other cases, there may be schooling available in a language spoken by the child. Discussions at community and school levels will be needed to match the child to available resources, and effort will be needed to ensure smooth transitions to school and learning. When possible, children should be matched with teachers who speaks a common language.

- In some cases, teachers may benefit from trainings that help them reduce stigma and support integration of unaccompanied migrant children into the classroom and school environment.

- In addition to education enrolment, after school programs which provide socialization opportunities can be essential for children to integrate into their communities.

- Follow-up measures should be put in place to monitor progress and make any necessary adjustments to help the child succeed.

Integration into Countries and Communities of Relocation
European countries have a considerable amount of available research and experience that can and should guide their approach to integration of unaccompanied minors. For example, research indicates that language acquisition is a key indicator that enables integration—particularly into education and the labor force. Such evidence should be used to prioritize language support in the country of relocation without delay. Additional recommendations:

- Social workers should be assigned to develop individual child integration plans through existing case management systems in a manner that is trauma informed. A 1:5 social worker to child ratio is suggested. Visitations from the social workers may be frequent in the first months but should be tailored to the needs of the particular child. A minimum of two-years of follow-up should be planned.

- If national social and child protection systems are overwhelmed or limited in their ability to support these cases, support from the international and local NGO community to government could include social work backstopping (with additional social workers deployed into government systems, or in NGOs that are linked to Government workers); adding specific mental health support and counselling services for children where required.

- Children should be given regular access to information about their options, legal status, and available support services. This should include information related to pursuing family tracing, family reunification, and accessing any required legal services or representation.
Annex: Key Concepts

**Family Unity:** entitles all children of the right to a family, and families a right to care for their children. Unaccompanied and separated children should be provided with services aimed at reuniting them with their parents or primary legal or customary caregivers as quickly as possible, unless contrary to their best interests.

**Best Interests of the Child:** encompass a child's physical and emotional safety (their well-being) as well as their right to positive development. The best interests of the child should provide the basis for all decisions and actions taken, and for the way in which service providers interact with children and their families. Those involved in the care of children must constantly evaluate the positive and negative consequences of actions and discuss these with the child and their caregivers when taking decisions. The least harmful course of action is always preferred. All actions should ensure that the child’s rights to safety and on-going development are never compromised.

**Participation and respect for the views of the child:** underscores that all children should be able to express their views, and that these views should be respected and given due weight in relation to the child’s age and maturity. Children must be kept informed and, as far as possible, involved in decision-making and plans concerning their care.

**Confidentiality:** requires actors to protect information gathered about individuals and to ensure it is accessible only with an individuals' explicit permission. It means collecting, keeping and sharing information on individual cases in a safe way and according to agreed data protection policies and protocols. Actors should not reveal individuals’ names or any identifying information to anyone not directly involved in the care of that individual. When information is shared, it should be shared on a “need-to-know” basis and limited to only the information necessary to enable better protection of that individual.

**Do No harm:** means ensuring that actions and interventions designed to support the individual do not expose them to further harm. Care must be taken to ensure that no harm comes to the individual as a result of a staff member or volunteers’ conduct, decisions made, or actions taken on behalf of the individual. Caution should also be taken to ensure that no harm comes to individuals as a result of collecting, storing, or sharing their information. For example, care should be taken to avoid creating conflict between individuals, families or communities, and collecting unnecessary information that, if in the wrong hands, could put the individual at risk of violence.

**Need-to-Know:** describes the limiting of information that is considered sensitive, and sharing it only with those individuals for whom the information will enable the provision of services. Any sensitive and identifying information collected on individuals should only be shared on a need-to-know basis with as few individuals and organizations as possible. Individuals involved in the care of children have to be especially careful not to accidentally divulge information with other colleagues, family or friends unnecessarily.

**Informed consent:** is the voluntary agreement of an individual who has the legal capacity to give consent. To provide informed consent, the individual must have the capacity and maturity to know about and understand the services being offered and be legally able to give their consent. Parents/caregivers are typically responsible for giving consent for their child to receive services until the child reaches 18 years of age.

**Informed assent:** is the expressed willingness to participate in services. For younger children who are by definition too young to give informed consent, but old enough to understand and agree to participate in services, the child’s “informed assent” is sought. Informed assent is the expressed willingness of the child to participate in services.

**Non-discrimination:** a basic tenet of international humanitarian rights and humanitarian law, stipulates that the protection and guarantees of international low must be granted to all, regardless of nationality, ethnicity, gender, age, ability or other status.

*Source: Global CP case management guidelines & practical guidance on case management*