

## **“It was like they cut off all my dreams”: Emotional health and wellbeing of undocumented children in London**

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# “It was like they cut off all my dreams”: Emotional health and wellbeing of undocumented children in London

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## Executive summary

Undocumented children face a range of circumstances that impact on their emotional health and wellbeing. Children and their families are often living under the shadow of their immigration status, with a heightened risk of poverty, ill health and exploitation, and limited access to services. Many face an uncertain future, unable to make plans and prevented from reaching their potential. In this context, this research project was initiated to explore the prevalence, demographics and emotional health and wellbeing needs of undocumented children in London. This report presents the findings from this project in two stages: firstly, an estimate of the number of undocumented children in London and boroughs with particularly high prevalence, which was conducted through a Delphi panel process comprised of people with expert knowledge of the sector. Secondly, a review of the literature and interviews with young people and parents were carried out to explore the experiences and needs of undocumented children and families, the factors impacting on their emotional health and wellbeing, and options for support.

Based on the first stage of the research, the estimated number of undocumented children in London ranged from 80,000 to 100,000, with both a mean and median estimate of 90,000. This is an increase on the projection of 61,000 based on the 2011 census, and on other previous estimates of the undocumented population. However, it remains the case that any attempt to estimate these figures will always be impacted by the hidden nature of this population and the fluidity between types of immigration status. The consensus among participants was that Brent, Newham and Croydon were likely to be among the boroughs with the highest numbers of undocumented children and families. This was supported by the initial census projections prior to the Delphi panel process, which identified Brent, Newham and Ealing as boroughs with potentially high levels of undocumented people. Haringey and Hackney were also judged by Delphi participants to have potentially high numbers of undocumented people.

The second stage of the research highlighted the range of issues affected the emotional wellbeing of undocumented children, young people and families, including past experiences of trauma, separation and loss, and the current impact of issues including legal status, accommodation and subsistence, health, food and nutrition, education, and safety. Young people and parents described how living with uncertainty made it difficult to engage with emotional support and to make plans for their future. Some children and young people also faced exclusion and isolation among their peers, and legal and practical barriers preventing them from accessing support. Many young people and families initially had a limited understanding of the immigration system and struggled to access good quality legal advice to regularise their status.

Both the young people and parents we spoke to demonstrated resilience, strength and resourcefulness. They developed their own support networks, developed coping strategies and supported each other to get through the challenges they were facing. Where they felt able to think about the future, they described aspirations to work, study and build a life for themselves. For many, this included moving on from the trauma of their past experiences and gaining secure status in the UK. For those who had been granted status after a period of being undocumented, they were already taking steps to follow their aspirations, engage with the support available to them and move forward with hope for the future.

The research sets out a range of recommendations at the service delivery, policy and research levels, which include:

- Developing accessible services in partnership with other organisations to provide children and young people with consistent support;
- Adopting a rights-based approach to provide holistic support, build relationships with young people, and intervene early to prevent crisis;
- Statutory guidance to ensure local authorities and other agencies are fully aware of their duties to support undocumented children and families;
- Equitable funding across boroughs to enable undocumented children and families to receive a consistent level of support;
- Review of legal aid provision for non-asylum immigration cases, welfare conditionality and right to work so that families are financially able to support themselves and regularise their status;
- Additional research into the long-term experiences of undocumented children and evaluation of effective models of practice to support emotional health and wellbeing.

## Introduction

Undocumented children face a range of circumstances that impact on their emotional health and wellbeing. Children and their families are often living under the shadow of their immigration status, with a heightened risk of poverty, ill health and exploitation, and limited access to services. Many face an uncertain future, unable to make plans and prevented from reaching their potential. In this context, this research project was initiated to explore the prevalence, demographics and emotional health and wellbeing needs of undocumented children in London. This report presents the findings from this project in two stages: firstly, an estimate of the number of undocumented children in London and boroughs with particularly high prevalence, which was conducted through a Delphi panel process comprised of people with expert knowledge of the sector. Secondly, a review of the literature and interviews with young people and parents were carried out to explore the experiences and needs of undocumented children and families, the factors impacting on their emotional health and wellbeing, and options for support.

### Definition of terms

The term 'undocumented' is used in different ways in the existing literature on this topic. We have chosen to use a definition that is as inclusive and widely accepted as possible in order to capture the range of statuses and experiences that fall within this category. We have therefore drawn on the definition from Gordon et al. (2009: 4-5), which includes the following:

- People who have entered the country illegally, either by evading immigration controls or presenting false papers
- Migrants who have been lawfully in the country but have stayed beyond their permitted period, including:
  - People who have been refused asylum
  - People who have overstayed periods of legal residence
- Children born in the UK to irregular migrant couples

For the purposes of our focus on children, this includes children whose parents fall within the first two categories, children who have been trafficked without formal documentation, and former unaccompanied children who have been granted temporary leave until the age of 17.5 but have been refused further leave to remain on reaching adulthood. As Bloch and McKay (2017: 71) argue, being undocumented is 'not necessarily an end state but instead one stage in a fluid process between different types of status'. Children and adults may move between different statuses and entitlements, and individuals within a family may not share the same status. Many individuals included within the definition of undocumented are entitled to citizenship or settled status, but may not have the means, legal support or resources to regularise their status.

### Outline of the study

The research set out below had three key objectives:

- 1) To identify the prevalence of undocumented children in London
- 2) To identify London boroughs of particularly high need
- 3) To uncover the emotional health and wellbeing support needs of this group

The first stage of the project aimed to address the first two objectives, by providing an informed estimate of the prevalence of undocumented children across London and identifying boroughs with particularly high numbers of children and young people. We explored these questions using the Delphi method, a structured technique using a panel of experts to reach a consensus (Dalkey and Helmer, 1963). As part of the Delphi panel process, we aimed to establish numbers and demographics at borough level, and estimates of eligibility for naturalisation. This approach was supported by a desk-based review of literature looking at prevalence of undocumented status among children and families. Sources included academic research, as well as reports and policy documents by non-governmental organisations (NGOs) and local authorities.

The second stage of the project drew together the existing literature on the emotional health and wellbeing needs of undocumented children and families, supplemented with findings from qualitative interviews conducted with nine young people and parents with experience of being undocumented. We outline a number of key themes that feature in the lives of undocumented children and families, including housing, food, education, health and security, and explore how these can impact on emotional health and wellbeing.

## Prevalence of undocumented children in London

### Existing estimates of undocumented population of the UK

Establishing a reliable estimate of the number of undocumented children in London presents a number of challenges, particularly due to the hidden nature of this population and the potential for status and entitlements to change over time. However, gaining an insight into the prevalence of undocumented children and families is an important part of ensuring adequate service provision to meet their needs.

There have been a number of estimates of the size of the undocumented population in the UK. Most recently, the former Director General of immigration enforcement, David Wood, gave evidence to the House of Commons Home Affairs Committee that there are likely to be over a million undocumented migrants currently living in the UK (Home Affairs Committee, 2018), a figure similar to the one of 1.1 million in 2010 by anti-immigration think tank Migration Watch (Migration Watch, 2010). Wood's estimate appears to be based on the assumption that 150,000-250,000 foreign nationals remain in the UK illegally each year (Palmer and Wood, 2017) but it does not seek to account for deaths, regularisations, or for removals and/or voluntary returns.

A more rigorous method is used by Woodbridge (2005) to give a central estimate of 430,000 undocumented migrants in the UK utilising the 'residual method' which subtracts the known legally resident population from the total of foreign born found in the census to come to a 'residual' number of undocumented migrants. Gordon et al. (2009) update this figure to include the effect of EU enlargement, and also includes an estimate of the number of children born in the UK. Gordon et al.'s (2009) estimate is of a central figure of 618,000 undocumented migrants living in the UK in 2007.

Gordon et al. (2009) use data from the Labour Force Survey to attempt to break down the undocumented migrant population by age, and estimate that a quarter are under 18, giving a central estimate of 85,000 UK born children of undocumented migrants. More recently, Sigona and Hughes (2012) update these figures to take into account the Home Office case resolution exercise and make an estimate of 120,000 children in the UK at the end of March 2011, of whom half were born in the UK. Finally, the Children's Society use the same method using data from the 2011 census to reach an estimate of 144,000 undocumented migrant children in the UK (Dexter, Capron and Gregg, 2016).

The strength of using the residual method is that, unlike other methods of estimating the size of the undocumented migrant population, it uses existing national statistics as its starting point, which can be argued to be more rigorous. However, by definition estimating the size of the undocumented migrant population is difficult. Vollmer (2008) has described this challenge as 'counting the uncountable'. One criticism of the residual method is that it is based on census data (adjusted for undercounting). As undocumented migrants might not be represented in the census, the method runs the risk of inaccuracy. Another weakness is that it cannot be used at a local level because the data necessary to calculate the residual is not available at the level of local government. Similarly, it is difficult to calculate the residual at a London level, because the data are not available to make this calculation. Even if data were available for the numbers of people granted settlement by Local

Authority area, it would be necessary to know whether they moved after being granted settlement or if they remained in the city.

### Existing estimates of undocumented children in London

Gordon et al. (2009) estimate that at the end of 2007, there were 442,000 undocumented migrants in London, of whom 61,000 were UK-born children. This would mean that around 70 percent of undocumented migrants in the UK live in London. It is difficult to disaggregate this by borough, although using the census data on the foreign-born population makes it possible to give an indicator of the boroughs where there are larger numbers of undocumented migrants. It is not possible to verify this estimate because it is not known if the proportion of regularised migrants to undocumented migrants is consistent across the whole of London. However, if the proportion was consistent, Gordon et al.'s (2009) estimate of 618,000 undocumented migrants in the UK would represent 7.7 percent of the foreign-born population, of which a quarter are children. If this was the case, the Borough with the most undocumented migrant children would be Newham, closely followed by Brent and Ealing, as shown in the projections in Figure 1.

Figure 1: Projected numbers of undocumented children by London borough

Borough	Projected number	Borough	Projected number
Barking and Dagenham	1030	Hillingdon	1508
Barnet	2260	Hounslow	1983
Bexley	582	Islington	1137
Bracknell Forest UA	235	Kensington and Chelsea	1245
<b>Brent</b>	<b>3008</b>	Kingston upon Thames	764
Bromley	728	Lambeth	1857
Camden	1542	Lewisham	1618
City of London	43	Merton	1271
Croydon	2016	<b>Newham</b>	<b>3096</b>
<b>Ealing</b>	<b>2732</b>	Redbridge	2015
Enfield	1749	Richmond upon Thames	697
Greenwich	1418	Southwark	1995
Hackney	1660	Sutton	650
Hammersmith and Fulham	1210	Tower Hamlets	1994
Haringey	1678	Waltham Forest	1577
Harrow	2007	Westminster	1944
Havering	388		

Newham is the borough with the highest numbers of residents from the most common countries of origin for undocumented migrants, and both Brent and Ealing are in the top five. Newham, Brent and Ealing are also the three boroughs with the highest numbers of births to non-EU national foreign born mothers (Jolly, Thomas and Stanyer, 2018). Using data from the UK Annual Population Survey (APS), these three boroughs can be compared (see Figure 2). Ealing has fewer undocumented children, both proportionally and in real terms than the other two boroughs, and the demographics of the non-EU migrant population are also different, with a far lower proportion of migrants from South Asia than

the other two boroughs. Ealing is the only borough out of the three where the number of migrants from the rest of the world outnumbers the number of migrants from South Asia.

Figure 2: Comparison of Newham, Brent and Ealing by populations

Borough	Newham		Brent		Ealing	
<b>Total population of borough</b>	342,000		331,000		347,000	
<b>Size of non-British population</b>	120,000		118,000		102,000	
<b>Number of non-EU migrants</b>	48,000		42,000		39,000	
<b>Projected numbers of undocumented children</b>	3,096		3,008		2,732	
<b>Most frequent region of origin</b>	South	Asia	South	Asia	South	Asia
	(30,000)		(20,000)		(12,000)	

### Delphi methodology

Given the difficulties discussed in relation to using the residual method in London, we adopted an alternative method of estimating the numbers of undocumented migrant children for this project: the Delphi model. The method has been widely used in estimating numbers of undocumented migrants around Europe, including in Switzerland (Piguet and Losa, 2002), the Czech Republic (RILSA, 1997), Italy (ISTAT, 1991) and the Netherlands (Zandvliet and Gravesteyn-Ligthelm, 1994). Pinkerton, McLaughlan and Salt (2004) suggest Delphi as one possible method of estimating numbers of undocumented migrants in the UK, and Gordon et al. (2009) recognise Delphi as one of the three ‘extensively investigated’ methods of quantifying the undocumented migrant population. More recently, the method has been used to develop an estimate of the numbers of undocumented migrant families in Birmingham (Jolly, 2019).

Using the Delphi approach enabled us to seek consensus on numbers using a panel of experts (Dalkey and Helmer, 1963). An online panel of participants with personal or professional knowledge of the numbers of undocumented migrant children around London were invited to participate in a series of three sequential online questionnaires. Respondents’ identities were known to the researchers but blind to the identity of other participants. This is a key element of the Delphi process and ensures that respondents are not influenced by others, and avoids peer pressure in the decision making process (Hsu and Sandford, 2007).

Panel members were invited to give their opinion of the numbers and location of undocumented migrant children in London, based on their expert knowledge. The information was collated and summarised by the researchers between each round, and fed back to panel members, who were then given the opportunity to amend their estimate after reading the feedback from the previous round. The process usually reaches consensus within three rounds (Goodman, 1987).

Participants were selected from a range of professional and personal backgrounds, with a view to including a broad spectrum of opinion and expertise in the panels. Participants were recruited from a number of different organisations to ensure that different perspectives were represented, with minimum quotas for each setting. Categories included local government, local charity, national charity and people with personal experience of being undocumented. The largest number of participants in

round one were employed by local government, and this imbalance was corrected in the second round. Similarly with areas of work, quotas were used to ensure that a minimum number of participants were involved with direct work, first line management of direct work, and strategic and policy roles, in addition to those with direct experience of being undocumented.

### **Delphi results: Estimates of prevalence of undocumented children**

In the first round, estimates of the numbers of undocumented children ranged from 10,000 to 500,000. The most common estimate was of 70,000, which was also the median estimate. The mean estimate was 102,000, but this was adjusted upwards by the inclusion of a single outlier estimate of 500,000. Participants who worked for a local authority were more likely to make a lower estimate, with employees from charities most likely to tend towards a central estimate. The participant who had the highest estimate in round one was an undocumented migrant themselves.

When prompted, two-thirds of panel members estimated that the true number of undocumented children was higher than the projection from the 2011 census of 61,000. When asked their reasons, approximately one third of panel members said they thought the number had increased since the census:

*I would assume that the number has increased since 2011 due to more hostile immigration rules. I also expect census data underestimates the true figure as undocumented migrants may be less likely to participate due to fear of immigration control. (Local charity manager)*

When participants were asked how they came up with their estimate, just over a third acknowledged that they were just guessing, or going on 'gut feeling'. One national charity worker based their number on policy reports and a former undocumented migrant on previous estimates by the LSE and Mayor of London's Office (61,000 children in London at the end of 2007) (Gordon et al., 2009). One participant made an estimate for each borough, with an added percentage for those children who were not known by services to come up with a total of 45,000. Another took a national estimate of the numbers of undocumented migrant children and worked out the proportion who were likely to live in London (80,000). Finally, some based their estimate on the numbers of children accessing their service:

*In my professional life, I see about three undocumented migrant families in London every week. A lot of them are unknown to other agencies and local authorities and couldn't have been taken into account in the 2011 census. (Local NGO worker)*

One charity worker used this method to extrapolate that there are potentially 70,000 undocumented migrant children in London.

In the second round, after seeing the first-round results, half of the Delphi participants lowered their estimate, with a quarter raising their estimate, and a further quarter stating they were 'unsure'. By the end of this round, the range had narrowed considerably to between 70,000 and 100,000 and the mean and median estimates were 85,000.

When the second round was completed, the responses had narrowed to a fairly stable consensus between participants. In round three, only four people chose to amend their answer. Two were employed by a local charity, one by a national charity, and one was a former undocumented migrant. Estimates ranged from 80,000 to 100,000, and both the median and mean estimates were 90,000. Two participants increased their estimate, one decreased, and one reverted to their answer in round one. One participant was very unsure of their answer, but the remaining three participants were

neutral. This compares favourably with the previous round where 3 people were unsure or very unsure of their answer, only one was neutral, and one was sure of their answer.

### Delphi results: London boroughs with high prevalence

When asked for the top three boroughs where undocumented migrant children and families were believed to live in the second round of the Delphi panels, the most common three boroughs identified were Croydon, Newham and Brent, as shown in Figure 5 below. Participants said they chose the boroughs because the Home Office is based in Croydon, the fact that these are ethnically diverse areas, and on the basis of where the undocumented children they work with come from.

Figure 5: Boroughs ranked within top three for highest prevalence of undocumented children

Borough	Number of participants	Borough	Number of participants
Barking and Dagenham	3	Hillingdon	3
Barnet	1	Hounslow	0
Bexley	0	Islington	0
Bracknell Forest UA	0	Kensington and Chelsea	0
Brent	10	Kingston upon Thames	0
Bromley	0	Lambeth	5
Camden	0	Lewisham	3
City of London	6	Merton	0
Croydon	11	Newham	11
Ealing	6	Redbridge	0
Enfield	0	Richmond upon Thames	0
Greenwich	0	Southwark	7
Hackney	4	Sutton	0
Hammersmith and Fulham	0	Tower Hamlets	5
Haringey	2	Waltham Forest	0
Harrow	0	Westminster	1
Havering	0		

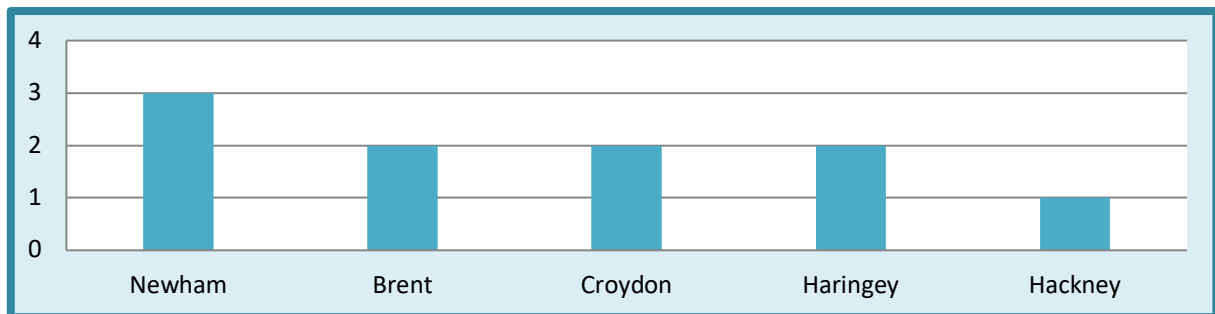
Brent and Newham were also in the top three boroughs with the highest number of undocumented migrants based on the census and by births to non-EU migrant mothers. This triangulation means that we can be confident that they are areas with large numbers of undocumented migrant families based on projections of the likely population, but also based on the 'on the ground' experience of panel members.

The fact that the Home Office is based in Croydon is a local factor which participants felt would impact on the number of undocumented migrant families living in the borough, making the population higher than would be expected based on the census projection.

In the third round, participants were asked which of the seven boroughs which were mentioned by participants in the previous round had the highest numbers of undocumented migrant children. Participants named Newham, Brent, Croydon, Haringey and Hackney. Newham had the highest

number of mentions, while Brent, Croydon and Haringey had the same number, and Hackney the smallest number of mentions.

Figure 6: Participant estimates of high-prevalence boroughs



### Key findings

- After three rounds of Delphi panels, the estimated number of undocumented children in London ranged from 80,000 to 100,000, with both a mean and median estimate of 90,000. This is an increase on the projection of 61,000 based on the 2011 census, and on other previous estimates of the undocumented population.
- The consensus among participants was that Brent, Newham and Croydon were likely to be among the boroughs with the highest numbers of undocumented children and families. This was supported by the initial census projections prior to the Delphi panel process, which identified Brent, Newham and Ealing as boroughs with potentially high levels of undocumented people.
- Haringey and Hackney were also judged by Delphi participants to have potentially high numbers of undocumented people.

## Emotional health and wellbeing support needs

The second stage of the project explored the support needs of participants in relation to their emotional health and wellbeing. In addition to a review of the existing research, qualitative interviews were conducted with nine participants: five young people aged between 17 and 24, all of whom had initially come to the UK as unaccompanied asylum-seeking children, and four parents. All are referred to by pseudonyms in this research. Three of the young people were female and two male, while all the parents we spoke to were female. Of the parents, some had come to the UK as children or young people themselves, whereas others had arrived more recently. Two were lone parents and two lived with a partner. All parents had at least one child currently living with them of primary school age or younger, most of whom had been born in the UK; some also had older children. One of the young people was also a parent. The young people and parents we spoke to had come to the UK from Albania, Jamaica or Nigeria, and had been in the country for between two and more than 20 years. Several participants either currently or previously lived in London boroughs identified as likely to have a high prevalence of undocumented children and families, particularly Croydon, Newham and Haringey. All participants were either undocumented, had recently gained status after a period of being undocumented, or were at risk of becoming undocumented due to unsuccessful asylum applications. Participants were contacted via support organisations that were already working with them, and interviews took place on the premises of these organisations. This provided benefits in terms of participants' emotional safety and wellbeing, but it is important to recognise that the interviews did not capture the experiences of people who were not linked into services, who are likely to be even more marginalised.

The existing research highlights health, nutrition, accommodation, education and vulnerability as key areas of need which impact on the emotional health and wellbeing of undocumented children (Barnardo's, 2017). These areas were broadly consistent with those identified by Delphi panellists in the first stage of this project:

- Lack of access to health services;
- Inadequate diet and nutrition;
- Lack of safe accommodation;
- High vulnerability and exposure to crime and exploitation;
- Knowledge of rights and entitlements.

Accommodation and health were felt to be the highest priority needs by Delphi panel participants. The impact of potential attachment issues was also highlighted by participants, particularly in relation to former unaccompanied asylum seeking children who had experienced loss and separation. Interviews with participants focused specifically on the areas listed above, in addition to general questions about emotional health and wellbeing, strengths and protective factors, and pathways to support.

### Emotional health and wellbeing

There are a wide range of emotional health and wellbeing difficulties experienced by undocumented children, which intersect with the challenges they face in other areas. Skehan et al. (2017) found that a significant number of children referred to a project for undocumented children run by the Migrant and Refugee Children's Legal Unit (MiCLU) had experienced physical, emotional or sexual abuse, and

many had been trafficked or fled persecution. As a result, more than 90 percent reported emotional problems and many suffered emotional distress described as 'serious enough to affect their wellbeing and impair their functioning to some degree' (Skehan et al., 2017: 2).

Mental health conditions are particularly prevalent among undocumented migrants (Beck et al., 2017). Young people in particular, especially those who came to the UK as asylum seekers, are likely to be suffering from mental and psychological health conditions such as PTSD, and to be experiencing symptoms such as disturbed sleep, anxiety, headaches and panic attacks (Chase, Knight and Statham, 2008). These experiences were borne out by the young people we spoke to who had come to the UK as unaccompanied asylum seeking children. Several reported being prescribed antidepressants and sleeping medication, and both young people and parents described trying to distract themselves from thinking about their past experiences and current difficulties:

*Every day I say, I'm not going to think about that, everything is going to be ok. And in the daytime, I play with my kids and it's different. But when they are sleeping, I can't sleep – I think about the past. Sometimes I cry all night. (Dalina, young parent)*

Time spent alone was particularly difficult for both the young people and parents we spoke to, which was exacerbated for those who were unable to work or study during the day, so had little to fill their time apart from their own thoughts. Thinking about the past was particularly distressing for those who had experienced trauma, abuse or trafficking. One young person described how thinking about her experiences triggered her eating disorder:

*I suffer from bulimia, and sometimes, when I feel good, I forget it, but sometimes I get really upset and I vomit all the time. I get upset about my life, the things that are past in my life. (Agnesa, young person)*

The immigration system was seen as a significant source of emotional distress for participants, both in terms of the length of time waiting for decisions and the impact of being refused status. The Children's Society (2018) highlights the ways in which immigration and asylum processes can create stress and contribute to mental health difficulties among young people. Two young people described the loss of hope they felt on receiving negative decisions in their asylum claims:

*I was in the court once, and the judge refused me. He said, 'I refuse. I don't trust you', but he had no proof. He just said 'I don't trust you'. I felt very bad, like depressed, broken, because I felt that was it. (Emin, young person)*

*It's affecting me too much, because being here for three years I was trying to build my life from the beginning, and when I got the negative decision, it was like they cut off all of my dreams that I had. (Selvi, young person)*

This was also seen in Apland and Yarrow's (2017) report on the wellbeing of children subject to immigration control, which highlights the way in which the immigration system left children and young people feeling disempowered, unable to make choices about their future, and uncertain of their status, even when they went on to receive positive decisions.

Allsopp et al. (2015) highlight the overriding role that time plays in the experiences of unaccompanied children as they transition into adulthood and face age-linked support entitlements, time-limited

grants of status and long periods of waiting for decisions on their applications. Both young people and parents described the impact that waiting had on their mental wellbeing:

*It's depressing me lots and lots, because you don't know what to do, you can't go anywhere. (Constance, parent)*

*It is stressful, a lot, because my mind is there 24/7. It give you stressed, and I might say depression and nightmares as well. It's very hard. Basically every time I think of it, I feel depressed. Every time I think of what's going to happen. (Emin, young person)*

Participants also described their fears of being returned to their countries of origin as a major influence on their emotional wellbeing:

*I know the bad things that happened there and every day you are not sure for your life, I'm not sure what's going to happen. You don't know if you're going to live; it's difficult. (Dalina, young parent)*

*I feel so lonely and scared, because I feel like if they send me back to Albania, I know I'm going to be killed because I'm in danger. So I feel scared, I feel worried. If I get the visa I think it will make a change in me. (Mihal, young person)*

Many parents had also had to deal with trauma and abuse since their arrival in the UK, including through abusive working environments and experiences of trafficking, and most had not received any mental health support. As with the young people, these difficulties were compounded by the immigration system and the uncertainty this created. One parent described the impact on her wellbeing and sense of self of having to comply with reporting requirements over a long period of time:

*I am still going to the Home Office to report, and that is even giving me depression because I haven't done anything wrong. Why are we going there to report everything? And we have to queue, queue, queue so much, sometimes you're standing for two hours. And they shout at you, they treat you like you are nobody. Every time I go there I develop hatred. And it's not good, it's not me, I'm a nice person. But the way they treat you like shit – it's not a good experience. (Constance, parent)*

Parents spoke to us about the emotional impact on their younger children, who did not understand the complexity and impact of their own or their parents' status. Some parents tried to keep their status hidden from their children:

*I don't let them know because they're still children – it's not good to let them know all these things. (Constance, parent)*

However, withholding information about immigration status meant that parents were carrying the additional burden of dealing with their circumstances alone, or being unable to prepare their children for the potential future impact on their own lives. Other parents felt that their children were aware, even though they tried not to worry them, and felt this was affecting their children's emotional wellbeing:

*Sometimes when I'm crying, when I'm tired, they will come and give me a hug and say, 'Mum, it's ok, don't worry, everything will be fine'. (Florence, parent)*

Even where parents were able to protect their children from learning about their immigration status, they felt that the financial implications of the status – in terms of both the cost of applying for status and the inability to work – had an impact on their daily lives. Several parents talked about the impact on their children of missing out on opportunities that were enjoyed by their peers, such as school trips or extracurricular activities:

*Last year I found it very difficult because they had one trip and my son was going to be six. It was £25 and I was feeling bad because he always said, 'I want to go with my friends' but it was expensive so it was too difficult. (Dalina, young parent)*

Research by Smith (2018) and Skehan et al. (2017) highlighted the choices undocumented children have to make about whether to disclose their undocumented status, and this theme was also borne out among parents in our study. One mother described how her son had missed out on his best friend's birthday trip to Paris and she felt unable to explain her circumstances to his friend's parents:

*The mother was saying 'Are you going to let him go with us?' because I didn't tell her I didn't have my papers, I just said I couldn't go. So I had to explain to my son, 'You can't go, I don't have a passport, you don't have a passport. And he cried. He was very, very unhappy because he wanted to go. (Florence, parent)*

Many of the parents we spoke to described how they felt they had given up on regularising their own status and now only hoped that their children would be given the chances they had not had:

*I want my children to be ok – I don't mind about myself. I grew up with no mother, my mum died when I was born, so I'm going to be here for my children. I want my children to be ok, that's all I want even if they can't grant me [leave to remain]. (Constance, parent)*

One parent who had fled abuse in Albania discussed how she had had to balance out what was best for her children between the risk in her country of origin and the situation she faced in the UK:

*You can't live every day if someone is abusing you, beating you, shouting at you. When I had a baby, I said ok, I'm going to do something, because it's not just me. When you have a baby you think just for them, you don't think any more for yourself. (Dalina, young parent)*

### **Status, rights and entitlements**

The experiences and current circumstances of participants varied, and most had experienced different immigration statuses since arriving in the UK. The young people interviewed had all come to the UK as unaccompanied asylum seeking children. One had now been granted refugee status, whereas the others had all been refused and were at varying stages of challenging their decisions through appeals, fresh claims or judicial review. Of the parents, most had arrived in the UK as children or young adults, with the remaining participants arriving more recently.

Participants who had children discussed the impact that being or becoming a parent had on their experience of being undocumented. For one young parent who had fled with her two-year-old child from an abusive relationship in her home country, this included questioning whether she had made the right choice for her family:

*I said to myself, have I done the right thing? It was very difficult. And I was scared because I didn't know them and they could do anything to me. Maybe they can take my son from me and I won't see him anymore. (Dalina, young parent)*

Parents who had arrived as children or young adults described the process of understanding the impact their immigration status was having on their own or their children's lives, and the need to address it. For one parent who had arrived as a young person several years ago, it was having children that made her realise the impact of her status:

*Things were a bit easier as a single person. There was just me, so whatever I was doing was okay for me. Then things started becoming difficult for me when I started having children. I took menial jobs to feed my children. And the guy I was with then didn't have his papers either, so it was kind of difficult. (Florence, parent)*

Lack of awareness of immigration processes was a key challenge for the majority of those interviewed, either due to a lack of understanding of the requirements of immigration processes, or in terms of a lack of appreciation of the impact a lack of status was likely to have on other areas of their lives.

Developing an understanding of the immigration system and the impact of status had been a challenge for participants, particularly those who had arrived as children or young adults. Both young people and parents talked about how they had first come to understand the need to put in an asylum claim or seek to regularise their status. The young people had generally been referred or come into contact with local authority children's services and entered the immigration system in that way.

*I tried so hard, because I didn't know English and nothing, it was so hard. So I tried to contact with people just to help me find a lawyer or something, a solicitor. I tried hard. And someone help me and send me to the solicitor and after they ask me for things and I apply for asylum. (Mihal, young person)*

Similarly, another young person who was also a parent described her lack of understanding of the system on arrival.

*I didn't know where to go. So I just went to some office but it wasn't the right place. Then a social worker came there, they took me to a hotel and then from the hotel they dropped me in hospital because my son was feeling bad. And I stayed in hospital about three days and then they took me again to a hotel. After one week some officer came and I did interview on what they said you to do. That time I was like, alright they are doing something for me. (Dalina, young parent)*

One parent described how she was brought to the UK from Nigeria in 2000 to work for a family but was then mistreated.

*I came with the help of someone who pressed me to come here and help with her children and stuff like that. But the lady was maltreating me, so I had to leave the house. And she held my passport, she wouldn't give it to me. One of her friends came to the house and saw everything that was going on and she found me another place to stay and help out with other children. (Constance, parent)*

It was several years after her experience with this family, when she had four children of her own and immigration officials came to her workplace, that the parent then fully realised the implications of her status:

*Up until 2015, everything was fine, I was paying my rent and then the immigration came to my house and stopped me from working. So that's why we have to end up going to the social services for help and stuff like that. So we put application in so they would help us. My son was three – he is going to be eleven now – and we were refused. So we just left it because the lawyer was taking too much money from us and we had to work a lot to get the money. And so we left it until when the immigration stopped me from working. So we had to rely on social services. And when we put application in 2016, up to now we haven't heard anything from them. And it's been so difficult, depressing. I cry every day, I cry before I go to bed. I think I haven't done anything wrong because I'm working. I don't have any criminal record, none whatsoever. I was just working to make my children okay in this country. (Constance, parent)*

One woman who was brought to the UK in 1997 by an agent at the age of 19 said she had not initially understood the need to submit an application:

*I did not in fairness start to regularise until about five, six years after I came. So I didn't start until like three years before I had my first child, so that was like thirteen, fourteen years ago, and I've put in so many applications that were refused. (Florence, parent)*

Following conversations with friends, she began to feel she needed to address her immigration status:

*I was getting older and wiser, and then I knew the consequence of not having your papers. I didn't know initially. Then I started mixing with people and they'd be saying, 'So what have you done?' I said, 'I don't know.' They're thinking, you have to start doing this. If you get stopped on the road and don't have papers, you have to do this, so that made me think, ah, okay. (Florence, parent)*

When participants became aware of the need and process to regularise their status, cost was a major barrier. Lack of access to legal aid and the expense of applications for leave to remain have acted as barriers to children, families and young people trying to regularise their status (Dorling et al., 2017). A report by the Children's Society highlighted the impact of the Legal Aid, Punishment and Sentencing of Offenders Act 2012, which took unaccompanied children outside the scope of legal aid unless they were applying for asylum (Connolly, Crellin and Parhar, 2017). While this provision was reversed in 2018 following a legal challenge, providing hope to separated children seeking to regularise their status, the cost of legal and application fees for many families remains prohibitive. Research by both the Children's Society and Coram Children's Legal Centre found that children and families were having to put themselves in difficult situations to pay for legal advice, including risking sexual and criminal exploitation, such as one mother who took on illegal work as a cleaner two weeks after giving birth to pay for immigration advice (Pinter, 2018; Dorling et al., 2017). The need for effective legal advice went beyond the immediate immigration requirements; MiCLU found that other issues such as housing, education and crime were solved by having access to specialist legal advice which was able to address both immigration problems and other welfare needs (Skehan et al., 2017).

Many of the participants described difficulties with legal advice and felt that they had not been adequately represented within the immigration process or had been given misleading advice:

*I was in a hearing for three and a half hours and it was very stressful. Even the lawyer let me down; she couldn't protect me, she wasn't saying anything. I was just talking on my own for three and a half hours. (Mihal, young person)*

One young person said his solicitor had told him there was nothing more he could do after being refused asylum, but he was later advised on further options by a specialist NGO:

*My solicitor, he told me that you cannot apply for another court hearing and I trusted him because I'd been with him for a long time. But when I showed the papers at [the NGO], they said 'No, you can still apply'. They found another lawyer for me and helped me through it. (Emin, young person)*

Poor quality legal advice and a lack of understanding of the legal processes were mentioned by many of the participants. This ranged from the wrong applications being put in, to mistakes being made in data entry to lack of effective representation within legal processes. Participants described a reluctance among some representatives to pursue a case beyond the initial refusal, particularly as the legal options became increasingly complex and labour-intensive.

Some parents we spoke to did not share the same immigration status as their children or partner. It is common for members of the same family to have different immigration statuses. Sigona and Hughes (2012) estimate that over half of undocumented children were born in the UK, and could therefore eventually apply for regularisation after seven years if they are able to evidence their presence in the country, and pay for their application to the Home Office. However, the risks and problems of having an irregular migration status are shared across the generations even when the children themselves have citizenship, a situation that is described by Enriquez (2015) as 'multigenerational punishment', a form of legal violence that affects families with members who are undocumented on a daily basis. Two of the parents we spoke to discussed the different statuses within their families, and in one case the different outcomes of the same application process:

*I don't know what happened because I put my paper through the same process as my partner and children and still they haven't granted me. My partner, when my son was ten he hadn't got a British passport. So we applied for him and he has got a British passport now. And my husband used that to get his own, so he's got it now and I haven't got mine. I am the so-called mother and I look after the children a lot, you know. (Constance, parent)*

Lind (2018) notes how although the struggles of undocumented migrant families are multigenerational, there are cases where the rights and best interests of children are set in opposition to parents' rights, with pressure on parents to return to their country of origin or be seen as inadequate in their parenting role.

### **Accommodation and subsistence**

Undocumented migrant children, young people and families are not eligible for council housing or local authority homelessness assistance, and are not entitled to housing benefit (Dexter et al., 2016). The 2014 Immigration Act also removes the right to rent private accommodation, and the combination of these factors can put children at risk of instability and exploitative labour, and force families into more 'underground' sub-standard accommodation (Dorling et al., 2017). Skehan et al. (2017) describe access to safe accommodation as 'a crucial issue' for some of the young people they were working

with, and needed specialist legal advice to access safe accommodation because of the lack of access to many mainstream forms of housing provision. Twenty-three percent of the children and young people who were referred to the project were street homeless when they were referred to the project (Skehan et al., 2017).

Bloch, Sigona and Zetter (2009) indicate that overcrowding in housing was a big issue for young undocumented migrants, and the cost of accommodation was also a barrier to accessing suitable housing. Dorling et al., (2017) found that undocumented families faced racism, exploitation and discrimination from private landlords, where poor housing was rented at high prices in the knowledge that families wouldn't complain because of fear of detection by the authorities. The impact of poor quality and insecure accommodation created significant parental stress and long-term disadvantage for children.

Sigona and Hughes (2012) found children and young people living in a variety of housing situations, some were supported by the local authority under section 17 of the Children Act 1989, but the majority lived in private rented accommodation, where issues of overcrowding, sharing rooms and extended family in cramped conditions produced tensions and impacting on children's abilities to engage with education. Unofficial subletting with numbers of tenants expanding as and when circumstances demanded was common. Indeed, getting into trouble for subletting was found by the Children's Society to be a frequent reason for homelessness and referral for support (Dexter, Capron and Gregg, 2016).

### Access to support

The no recourse to public funds (NRPF) rule restricts access to a range of state welfare services for people who are subject to immigration control, including:

- Income-based jobseeker's allowance
- Income support
- Child and working tax credits
- Universal credit
- Child benefit
- Housing benefit
- Council tax benefit and council tax reduction
- State pension credit
- Attendance allowance
- Severe disablement allowance
- Personal independence payment
- Carer's allowance
- Disability living allowance
- Council housing
- Local authority homelessness assistance

Access to NHS healthcare, compulsory age schooling and children's social care are not classed as public funds in the Immigration Rules, though there are other restrictions and barriers to accessing these services. Not all families who have NRPF are undocumented – many people who are in the UK on work permits or visas also have NRPF – however, all undocumented migrants have NRPF. In addition, parents who are undocumented do not have the right to support their family through taking up paid employment.

Support with accommodation from local authorities under section 17 of the Children Act can also be difficult to access and inadequate for children's needs (Dorling, 2013), particularly where 'robust front door' gatekeeping policies are in place (Lewisham Borough Council, 2015) to limit access to support. Local authority eligibility criteria for providing section 17 support were increasingly strict, with local authorities asking families to prove 'genuine destitution' (Dexter, Capron and Gregg, 2016) and assessments which focused on financial history and availability of alternative support networks rather than the needs of the child. Analysis by the Children's Society indicates that only 38 percent of undocumented migrant families who approached local authorities for support actually received help

(Dexter, Capron and Gregg, 2016). For those that did, rates of support were below mainstream social security benefits, and some local authorities provided financial support for only the children in the family and not the parents, leaving families with not enough to live on (Dexter, Capron and Gregg, 2016). Threipland (2015) found that 64 percent of properties provided in London to children under section 17 were not appropriate and bed and breakfast-style accommodation without adequate space for children to play or study was common (Price and Spencer, 2015; Farmer, 2017).

The accommodation provision for those we spoke to was variable. Some were happy with where they were living, while others had difficulties with overcrowding, instability of accommodation and proximity of the location to existing networks and essential services. Most parents were in private rented accommodation, apart from those accommodated by the local authority in hostels or shared housing. In both cases, they faced a lack of security in terms of the housing. Those families accommodated by the local authority risked being moved, and those renting privately had experiences of the rent being put up or having to leave to find new accommodation.

One woman described her accommodation in comparison with her situation before she was forced to flee an abusive relationship in her country of origin. She felt that the safety of her children overrode any concerns about the standard of housing:

*It's shared accommodation, we are six families there. There are ten kids. It is difficult, but the thing is I can live with difficult because I know my kids they are safe. I don't care if I just have one room. (Dalina, young parent)*

She contrasted her current worries about the future with the immediacy of her worries before she left her country of origin:

*Now, when I am sleeping I'm constantly thinking, what's gonna happen tomorrow? But when I was there I didn't sleep because I was thinking, what's gonna happen tonight? I didn't sleep because I also feared for my life and for my son's life. So it was bad there, it's still like that. (Dalina, young parent)*

Several of those we spoke to had experience of shared accommodation with other families or young people. For one parent who had recently been granted status, this had resulted in her and her children having to move out of the housing provided by the no recourse to public funds (NRPF) team and into emergency accommodation in a hostel. The size of the living space and lack of privacy was a challenge in the new accommodation:

*It's one room, with two boys. Every day I like to wake up before them so I can have my bath and do everything before they wake up. I really don't like it, they are growing. (Florence, parent)*

Participants also reported issues with their accommodation, including damp, sink blockages and cockroaches, but often found there was no response from landlords or the local authority. One parent explained the conditions where she, her partner and four children were living:

*Where we were living before, oh my God you don't want to see it. The whole place was two bedrooms and a toilet and it was so small, so stinking, so damp and we were living there one year and two months before they finally moved us. And there were a lot of cockroaches. (Constance, parent)*

She was eventually moved when the landlord found that there were six people living in the accommodation, but prior to that some of the family had to sleep on the floor. Overcrowding was a common problem, with a number of participants living in cramped accommodation or sharing space with other young people or families.

Lack of access to banking services because of lack of ID and restrictions under the Immigration Act 2014 left people vulnerable to exploitation from loan sharks (Bloch, Sigona and Zetter, 2009), and getting into debt to pay for housing costs was a common occurrence observed by practitioners working with undocumented migrants (Dexter, Capron and Gregg, 2016). Several participants reported difficulties with paying rent or other essential costs, and many had had to borrow money from others in order to make ends meet.

Instability of accommodation was a key area of concern for those we interviewed. Several participants described frequent accommodation moves, with most having lived in at least two areas of London, and some having moved multiple times over a short period. Two of the young people we spoke to had experienced homelessness, and several of the families had been destitute prior to support from the local authority. One young person who was now living in a hosting arrangement had spent a week staying with friends after she was made homeless and before her hosting arrangement was organised.

*I was moving everywhere, moving from one friend to another, and it was very stressful. (Selvi, young person)*

Another young person was evicted from his accommodation after being asked to pay additional rent which he was unable to afford. He said that his social worker said it was his fault for not paying and he had more than two months with nowhere to stay.

*To be honest she left me without place for two months, over two months. I stayed with friends, anywhere I could stay, but yeah, she did leave me for over two months without a place and she was like, 'Oh, you've got a lot of friends; go stay with your friends'. (Emin, young person)*

The location of accommodation was another important issue raised in interviews. Participants spoke about the areas they were living in and the benefits and challenges they faced, particularly around safety, access to education and services, and local support networks. For the young woman living in a private hosting arrangement arranged by a local charity, the change in area had an impact on her ability to access support:

*It is a very nice area, but I'm really far away, far from everything I had, all the support I had. (Selvi, young person)*

The fact that she had no income meant that she could not travel back to her previous area and there were no similar services near her new accommodation. Travel costs were a challenge even for those receiving financial support, and had a significant impact on young people's ability to engage with education, access services, and maintain friendship groups.

All participants had very limited financial support, generally provided by the local authority, and some had no support at all. Some had been destitute in the past, or had worked illegally in order to survive.

Parents gave examples of having to go without things they needed in order to meet their children's needs.

*Most of the time I just want them to be comfortable. Sometimes I would want to buy something for myself and I'll say oh, I need a cardigan, but then he needs a jacket. He gets his own jacket, because he's a little boy and he wouldn't understand so much. So I would get him so many things. I would get them their things and deprive myself of certain things to make them happy. (Florence, parent)*

Those who received regular payments from the local authority spoke about their difficulties meeting the costs of bills, transport, clothing and food. One parent said that money had been provided for her children but not for her and her partner for two years, until she challenged this. Another parent had been given vouchers, which could not be used for bus passes or in the shops where she would usually buy food.

## Health

Currently undocumented migrants are able to legally access primary healthcare through the NHS such as registering with a GP, but have to pay for secondary, or acute health services, such as hospital and maternity care (Chauvin, Simonnot and Vanbiervliet, 2013). However there is evidence of a reluctance amongst GP's surgeries to register undocumented migrants, including putting barriers in place such as having to provide proof of immigration status in order to register (Dorling, 2013). Additionally, for families who are undocumented, but are seeking to regularise their status, the Immigration Health Surcharge is an additional financial barrier, which currently costs £200 per person per year of leave granted, in addition to application fees (Dorling et al. 2017).

De Vito et al.'s (2016: 1) systematic review of access to healthcare for undocumented migrants across Europe found that undocumented migrants were at particular risk of 'infectious diseases, chronic illnesses, mental disorders, maternal-child conditions, dental issues, acute illnesses and injuries'. The review identified problems with accessing healthcare because of differing entitlements and other socio-cultural barriers including language and communication, lack of knowledge of the healthcare system, and a lack of cultural awareness on the part of healthcare providers (De Vito et al., 2016). Similarly, Winters et al.'s (2018) systematic review of 29 studies on the use of healthcare services by undocumented migrants in Europe found that healthcare services overall were underutilised by undocumented migrants, that care was often insufficient, and that there were barriers including lack of understanding of entitlement (Winters et al., 2018).

Although there is limited research on psychiatric treatment for undocumented migrants, Aggarwal (2017) suggests that there are particular barriers that undocumented migrants face including not having documents that give access to treatment, and fear of being reported to authorities. These are exacerbated by exclusions from publicly funded health systems such as the Affordable Care Act in the US and secondary NHS healthcare in the UK (Edward, 2014; Rosen, 2014).

In the UK specifically, Bloch, Sigona and Zetter (2009) found that although the ability of young undocumented migrants to access healthcare varied, depending on individual staff decisions such as whether immigration status was checked, fear of accessing healthcare is a problem for young adults with an irregular migration status. Access to healthcare can be a particular problem for pregnant

women and families with children, with sometimes limited access to antenatal care (Beck et al., 2017). A reliance on cheap over the counter painkillers such as paracetamol or homemade traditional remedies sometimes replaced seeking professional medical attention. However, even when people were able to access a GP, paying for prescriptions could prove a challenge (Bloch, Sigona and Zetter, 2009; Jolly, 2018a).

The specialist legal advice project at the MiCLU found that 19 percent of referrals to the project involved children or young people experiencing a health care emergency, with the majority being mental health crises (Skehan et al., 2017). Of these children and young people, 80 percent had sought previous help, and 75 percent had been denied medical help (Skehan et al., 2017). These restrictions not only harm children and young people's health, but according to the European Agency for Fundamental Rights, are in some cases more costly to health services than providing access to preventative healthcare in the first place (European Agency for Fundamental Rights, 2015).

Some participants described ongoing health needs, and the associated impact in some cases on their emotional and mental health and wellbeing. Health needs included diabetes, asthma, eczema, sleeping problems and mental health difficulties including depression. One parent talked about the difficulties when she had been unable to get medication for her diabetes and her son's conditions.

*It really, really, really impacts, because there is days when my body just can't go on, and I can't manage. My son he has asthma as well, he has asthma and he has eczema. So there are days when it's really hard. (Elizabeth, parent)*

Those who arrived as unaccompanied asylum seeking children in particular were dealing with the impact of trauma, separation and loss in their country of origin and during their journey, in addition to their experiences in the UK, which often compounded the emotional and mental health impacts they were already managing. Two of the young people we spoke to had been prescribed antidepressants and sleeping tablets as a result of the trauma they had experienced. One of those, who had been living in a hosting arrangement since being made homeless, was not able to register with a GP due to her lack of a permanent address. Her lack of income also meant that she could not afford to travel back to see her previous doctor. She had previously been registered with a GP and was receiving a course of talking therapy as well as antidepressants and sleeping tablets, but was unable to complete her therapy or access her medication once she moved:

*This has affected my mental health so much, because I'm not getting my medication, and I don't have any support. Even if I can get an appointment and prescription, I would not have money to pay for it. (Selvi, young person)*

One parent said she felt she had to have her second child at the same hospital as her first, despite having moved to another part of London since then and having another hospital much nearer.

*My friend said, 'if you go to that hospital they're going to ask for your papers if you are new there. They're going to ask you to bring your passport.' But because I had my first one in the other hospital, they already had all my records, so I thought I would rather go back there. It wasn't what I wanted to do, but I had to do it. (Florence, parent)*

Those who had come as unaccompanied children had been linked in with GP, dentist and optician services while in the care of the local authority, and had not had to pay for treatment or prescriptions.

The difficulty for them came when they had needed to move and had not had the required paperwork to register. For the parents who had been in the UK for many years, they noted the difference between registering when they first arrived and the requirements to register now. One parent noted this change when saying that she had had no difficulties registering with GP or getting access to healthcare which she puts down to the different political climate at the time when she arrived:

*I registered when I came to this country, everything was easy then. That was like nearly 20 years now, so everything was fine. I was so lucky. (Constance, parent)*

Several other participants also reported that accessing GPs had become harder over time, in keeping with the increased gatekeeping requirements of 'hostile environment' policies. Some had managed to register with a GP surgery when they first arrived in the UK, and were then able to maintain that registration and gain access to other health services on the basis that they already had a GP.

One parent described having a GP local to her address in South London, but when she had moved to North London was told she would need her passport to register. For that reason, she had continued to travel across London whenever she needed to see a GP.

*Moving to North London, I tried to get another GP, when I got to the GP they said I had to bring in my passport, and I thought, oh! So I thought, okay, I'll just respect myself, keep going back to South London. So from North London if there was anything wrong with me I had to travel two or three hours to go to North London, because that was the only GP I had. There was nothing I could do. I couldn't have one here because I didn't have the documents. So it was a bit of a stress. (Florence, parent)*

## **Diet and nutrition**

Without the right to work or to claim mainstream social security benefits, families can find it difficult to maintain a balanced diet for dependent children (Jolly, 2018b), and the cost of food and other essentials represents a high proportion of the living costs for young undocumented migrants (Bloch, Sigona and Zetter, 2009). Skehan et al. (2017) gave examples of children who presented to the project with immediate protection needs such as hunger and lack of a sustainable source of food. Sigona and Hughes (2012) found evidence of parents with dependent children working long hours in informal jobs below the minimum wage which made it difficult to make ends meet and buy adequate food.

Despite the risk of food insecurity, undocumented migrant families are likely to have low take up of access to food banks, particularly because of the limitations on the number of food vouchers families can receive (Dexter, Capron and Gregg, 2016; Jolly, 2018b). This was borne out by the experiences of those we spoke to, none of whom had used a food bank. One parent said she had been encouraged to attend one, but said that there was only tinned food available, and she did not feel this was healthy for her family.

Undocumented families are also likely to be ineligible for free school meals, which placed additional financial pressures on the already limited budgets of those with school-age children, as borne out by current research (NELMA, 2018) and the experiences of our participants:

*Out of the money we are getting we still have to pay ten pounds for each child, so every week I have to pay twenty pounds. (Constance, parent)*

Existing research shows that some undocumented migrant parents resort to surviving on cheap, repetitive food such as boiled rice (Bloch, Sigona and Zetter, 2009) or supermarket own-brand noodles (Jolly 2018a), and practitioners at the Children's Society gave examples of children going to school with crisps for lunch or mouldy bread (Dexter, Capron and Gregg, 2016). Even when undocumented children were able to get financial support from local authorities as children in need under section 17 of the Children Act 1989, subsistence support was sometimes too low to be able to provide an adequate diet (Jolly, 2018b; Price and Spencer, 2015) and temporary accommodation sometimes did not contain appropriate cooking facilities (Dexter, Capron and Gregg, 2016). One of the difficulties for parents was when their children were asking for food items that were too expensive, and they felt they were letting them down.

*It is difficult because kids – you know how they are – they don't care about how much you have. Not that they don't care but they can't understand. They want lots of things but it is difficult because I have just £35 per person, so if you're gonna go just one time to do shopping, just for the food, just one time you spend £35. (Dalina, young parent)*

The parents we spoke to described how they sought to ensure their children had healthy and balanced diets, including by going without themselves at times.

*I just kept my house going on anything, no matter how little it is, the kids would be fed well. I would just do anything. I had menial jobs, I had quite good friends who would support me as well, and there was good food – all the time there was food for them and good clothes to wear. (Florence, parent)*

Affordability had a key impact on diet, with many unable to afford what they considered to be a healthy diet alongside their other expenses such as travel and other items for their homes, and others having to shop around to make their money go further. Some felt they would prefer to do a monthly shop, but could not afford this so would have to buy items as and when needed. Most participants shopped in supermarkets, and would compare the prices between different shops. Some also used African or Turkish shops, often despite higher prices, so that they could prepare the food they felt was best for themselves or their children.

One young woman who was living in a hosting arrangement did not have access to any money whatsoever to buy food and had to rely on the woman supporting her to be able to eat:

*I don't buy my own food, because I'm not getting any financial support, so I just have to wait for that woman, when she cooks for me, because I have no money at the moment, nothing. (Selvi, young person)*

## Education

Access to education is a key issue for undocumented migrant children, and can have a significant impact on emotional wellbeing, self-esteem and peer relationships. Local authorities have a duty to provide primary and secondary education to children under the Education Act 1996 irrespective of immigration status (Dorling, 2013). However, there are still barriers for accessing education for undocumented migrant children highlighted in existing research, including language barriers, and difficulties paying for travel, school dinners (in the absence of entitlement to free school meals) and

school uniforms, as well as the impact of being vulnerably housed and needing to move frequently (Dexter, Capron and Gregg, 2016). Ten percent of referrals to specialist law project set up by MiCLU were for education support (Skehan et al., 2017). Sigona and Hughes (2012) found that access to education varied widely between education authorities even down to individual head teachers. In some cases direct discrimination or lack of understanding of the law by schools and education authorities could also prevent access to schooling, such as a belief that children need to prove their immigration status before accessing schools (Dorling, 2013).

Being undocumented can also impact on post compulsory education for young people when turning 18 (Bloch, Sigona and Zetter, 2009; Chase, Knight and Statham, 2008). Dorling et al. (2017) suggest that many undocumented children may have lived in the UK for their whole lives, but do not know that they have an irregular migration status until they try to access higher education and are unable to access student finance or home fees. According to the MiCLU, trying to access higher education was one of the main reasons that children who were born in the UK discovered they were undocumented (Skehan et al., 2017). For the young people we interviewed, they found it much more difficult to access education once they had turned 18 if they did not have legal status. One young person explained that she had been able to access college during the asylum process, but this was no longer the case, and this had also resulted in a loss of support:

*I was in college before. Then I wanted to start a new course in September this year, but things happened, so I couldn't. I wanted to do my Level 3 Access to Nursing, but unfortunately I couldn't. [During the asylum process] it was okay – I found really nice people there. I had a support worker from college as well, so they were supporting me a lot there. (Selvi, young person)*

The young people and parents talked about the ways in which their status impacted on their study choices, as well as their access and ability to engage with learning and plan for their futures. One participant said he could not take courses that ran over a long period of time, as he might not be able to finish if he had to move home or had a further negative decision on his immigration application. Similarly, parents were concerned about the longer-term stability of their children's educational prospects. Participants also highlighted the impact of their emotional wellbeing on their ability to learn and to concentrate at school or college:

*My problem is just stress, you know. It affects my education, my normal life. It does affect a lot. (Emin, young person)*

The parents we spoke to with children of primary school age did not report any difficulties with getting a school place for their children, though disruption caused by house moves was a key concern. One parent whose child had special additional needs was also able to get one-to-one support in place for him after he was assessed by the school. However, for young people aged 17 and above, access to college places was harder to access and more dependent on immigration status.

Parents reported that their children were generally enjoying school and getting on well, and their concerns mostly centred on the potential for disruption to their education. One parent whose housing was provided by the local authority highlighted her children's education as one of the key difficulties relating to her status.

*It's really affecting us – even my son. Because when you're with social services they keep moving you around and you have to change the children's school, it's really depressing. You have to change their school every time they move you and it's really, really unfair. My son is in Year 6, he's going to secondary school next year, I can't prepare for school because I don't know where we're going to be. (Constance, parent)*

The same parent noted that she currently had to travel an hour and half to school due to the local authority moving their accommodation:

*From the place we are now my son has to travel for school because there's no space for him where we are now. It's like an hour and a half every day. He will come home at night and he's tired. (Constance, parent)*

Where undocumented migrant children are able to access schooling, it can perform a key function in promoting social inclusion, and Sigona and Hughes (2012) found that parents of undocumented migrant children valued education because they felt immigration status was not seen as an issue when in school, and education was one of the few state services where children were treated equally. Past research from schools on the US/Mexican border has demonstrated that inclusive schools which actively accepted children regardless of immigration status were able to increase student performance, integration and participation in school (Crawford and Arnold, 2017).

Both the parents and young people we spoke to placed a great deal of value on education, which they saw as a way to improve their future prospects. However, exclusion was a common theme in children and young people's school lives, due to social difference, language barriers and discrimination. Participants also expressed concerns about the impact for children and young people of disclosing their undocumented status to others. Smith (2018: 2) used the idea of invisibility to describe the way that undocumented children in Sweden may hide 'in plain sight', including by evaluating whether to reveal their status to others in their peer group, leading to isolation. This was reflected in the experiences of several participants who felt they had struggled to fit in. Some young people talked about experiences of isolation or bullying at school or college:

*I'm doing well at school, but sometimes I feel like I'm being left behind by the other students because they speak English really well and I don't, so I just stay on my own. (Agnesa, young person)*

*At the college, like some – the students are kind of racist, kind of insult you about your nationality or your religion. If they find you weak, they just bully you. That happens in other places as well, in public. For example, if I wear a top with the flag of my country, everyone will be staring at me as if I'm a criminal. (Emin, young person)*

Priest et al. (2013), in their research based in the US, highlight the developmental impact of racism and the increased likelihood of poor mental health as a result. Parents were also worried about bullying and isolation of their children at school. Sigona and Hughes (2012) found that school trips abroad were also a source of difficulty for children with undocumented status, and this was echoed in our conversations with parents. In addition to issues with overseas trips, children were often excluded from school trips in the UK or activity clubs if their parents could not afford for them to take part, and parents worried they felt different from the other children due to this constraint. One parent, who

had recently been granted status after more than 15 years in the UK, said that one of the things she was most looking forward to was her children being able to take part in extracurricular activities, as she felt they had been missing out:

*I just can't wait, the little one wants to do karate, they want to do this and that, so when I start work they will be able to do all that. Because they need it. (Florence, parent)*

### **Safety, crime and exploitation**

Dorling et al. (2017) argue that exclusion from legal work and welfare leaves families vulnerable and liable to be exploited. This exploitation can take many forms, with many parents working below minimum wage in the informal economy (Bloch, Sigona and Zetter, 2009), and examples of people being paid less than £1.50 per hour (Pinter, 2011). Sometimes this took the form of domestic servitude which could be risky, exploitative, and damaging to children (Price and Spencer, 2015). Young people faced sexual abuse and exploitation, while parents were also at risk of being forced into sex work or transactional sex in exchange for food and shelter (Dexter, Capron and Gregg, 2016; Price and Spencer, 2015). Several participants who we spoke to said they had taken illegal work or borrowed money they knew they would not be able to give back, putting them at risk of exploitation. One parent spoke of not being paid for work she had done because her employers knew she would not be able to report it.

*Sometimes you don't get paid. The reason is they know you're working there because you don't have your papers. Sometimes they pay you, sometimes they don't, and when they don't pay you, who do you speak with? Because you are terrified of going to the police, and of course you are not meant to take employment anyway, so what do you do? You face so much bullying, discrimination, abuse, so many things. The fact that you don't have your papers, it's like you're nobody. You become a shadow of yourself. (Florence, parent)*

There is a high incidence of undocumented migrants who came to the UK as victims of exploitation or trafficking (Dorling, 2013), and who remain at risk of internal trafficking within the UK (Bloch, Sigona and Zetter, 2009), and of children who live in unmonitored private fostering arrangements which can leave them at risk of domestic servitude (Pinter, 2011). Statistics from the MiCLU project indicate that 60 percent of children referred had been a victim of crime, and ten percent were living with abuse, either from a family member or from others. Sixty percent of these had approached children's services for support, but all had been turned away (Skehan et al., 2017). The abuse experienced by these children varied, with girls and young women more likely to experience sexual abuse and boys and young men more likely to suffer financial abuse. Abuse often intersected with immigration status, and a quarter of those who had been victims of abuse had documents withheld by the perpetrator.

When young people spoke to us about safety, they often compared their situation in the UK to that in their country of origin and so even if they felt at risk in London, this tended to be minimised in comparison. Several participants were conscious of the risk of crime, particularly if they were alone or in areas they considered to be dangerous:

*I feel a bit safe, I'm not the same as in my country. Because I am always with six other families, it's ok if I hear voices in the other room, I know it's alright. But sometime when they have all gone somewhere and I'm alone it is scary because in the road you can hear people fighting and shouting. And that makes me think about my life and it's made me really bad. (Dalina, young parent)*

For some young people, their past experiences made it difficult for them to feel safe:

*Most of the time I'm here, I don't feel that safe, because of my past and things I've been through. (Mihal, young person)*

Participants discussed how secure they felt in their accommodation, and in the areas in which they were living. One parent who was living with her children in a hostel with 150 rooms said that she did not always feel safe:

*I lock my door all the time. There are some boys you see walking past and you smell marijuana. Once I smell it I become scared that that person is not right. They might be good but you see their faces and you're scared. You have to keep your knives out of the kitchen because they can come and pick it up. Once I go into my room I lock the door. Sometimes I don't feel secure, but I try to call my housing officer as much as I can. She doesn't even pick up my call. (Florence, parent)*

Several commented on their perceptions of risk, particularly in areas of London they perceived to be dangerous. The risk of being caught up in violence and criminality was a concern for several of the parents and young people. One mother of two young sons who had recently been granted status hoped to move out of London as soon as she was able to start work:

*I want them to grow up in a better environment. I don't like the area, especially for boys. (Florence, parent)*

Another young male participant worried that he or his peers could be drawn into gang activity:

*You can never trust the people. I know it's a dangerous area, because I've been there, I've seen many things. I wasn't involved – I didn't want to go because I don't want to be in danger. (Mihal, young person)*

Some talked about their positive relationships with neighbours, and the feeling of safety that came with knowing each other. One parent described feeling supported by the local community:

*The area we live in, we're fine. Everybody knows each other, everybody looks out for each other. If somebody goes into your yard, you'd hear, 'Oh, somebody was in your yard today'. Everybody looks out for each other. (Sandra, parent)*

While parents valued areas where there was a community atmosphere, for the young people, they were more positive about areas where they could keep to themselves:

*My area is good – normally with Croydon it's a bit noisy, but my area, my road is very quiet. Everyone minding their own business. (Emin, young person)*

Safety at home depended a great deal on the type of accommodation they lived in. Those who had greater control over who they lived with also reported a higher sense of security. In the wider community, participants often felt unsafe and took steps to protect themselves from risk:

*I'm not scared where I'm living. When I'm inside the house, I'm safe. It's just when I'm going outside or college. I know college is safe because nobody can do anything inside the college, but when I go to get the bus, journey to go home, or when I'm going outside the house for shopping or meeting my friends, then it is more scary. (Agnesa, young person)*

*I'm worried to go out here, because there are dangerous people around. I don't want to lose my life. I don't want to get stabbed or killed or something. (Mihal, young person)*

*I feel safe because the place is full of cameras, police officers. It's nothing to worry about, to be honest. But I don't walk late at night; I stay home. Night is always dangerous, you know. If I'm walking at night I do feel very unsafe. I hate dark, so I stay home. (Emin, young person)*

Some asylum-seeking young people compared their current level of security with their situation in their country of origin and their fears for their safety if forced to return.

*I just want to be here, I don't want to leave this country, I don't want to stay in another country. I feel safer here. Everything is safe here. When you go out you see police it's good because you don't feel like someone is going to come to you and do bad things. Like when you see police around you feel happy because you feel safe. In Albania everything is corrupt, the police is corrupt. If I go in Albania the police are not going to do anything about it, so it's hard. (Mihal, young person)*

Relationships with the police varied between participants. While some felt reassured by the presence of police as in the example above, others were conscious of drawing attention to themselves in case this resulted in immigration enforcement action against them. One young person who had been granted refugee status highlighted the difference in experiences between him and friends who are undocumented:

*It's scary but because I have that card, I'm not that scared, because I know that if a police or someone is stopping me, I will show the ID and I will be safe. It's different for people who don't have status because if the police stop them and they don't have something to show then they can arrest them and send them back to their country or something. (Agnesa, young person)*

### **Strengths and protective factors**

Participants were asked about what they did to make themselves feel better, or to help them cope with the situations they were living with. The young people and parents we spoke to had a range of strategies to support themselves, ways of helping them cope with the realities of their daily lives, and support networks they had built up around them. For both parents and young people, socialising and keeping active were important ways of forgetting about things that were troubling them:

*Sometimes you go out socially, just something to make you happy. (Florence, parent)*

*Sometimes I go to football, I play with friends at the weekends. Three days I've got college and the other four days I'm just chilling with friends, going to different places like to see Big Ben and stuff. I just want to be active, not staying at home. If you stay at home you are just going to be sad and worried. (Mihal, young person)*

*I lock myself in my room, I listen to some music that will calm me down, or I might call some friends or see them. (Emin, young person)*

*First of all, when I'm feeling sad or something, I have a little niece and I think about her, or I call my sister and speak with her, and that makes me happy. They live in Italy. (Agnesa, young person)*

For others, they did not feel there was anything they could do when they were feeling low:

*I just sit there. In that time where everything's quiet, I can't take my mind out from there, because I'm not sure what's going to happen. All the time I say to myself I'm not going to cry anymore, but I can't; it's impossible. (Dalina, young parent)*

*I can't really deal with it. I don't like talking too much with people. I keep myself isolated. (Selvi, young person)*

Skehan et al. (2017) noted that living with undocumented status could put strain on young people's social relationships, as they were forced to rely more heavily on their friends for practical and emotional support than they might usually wish to do. Both young people and parents relied on friends and family to help them cope, particularly at moments of crisis:

*Sometimes you get depressed and you have to cope. I'm not the type that needs to phone for help, I don't like phoning people. But now I have to develop calling just to get out of the depression and make you talk more, even when it's something you don't want to talk about. (Constance, parent)*

*When I'm with friends I'm happy, but when I'm alone I feel lonely. I just feel sad and worried and think too much. I think bad things, I don't think good things. Having people around is better, because I feel safe. When I'm on my own I feel scared, but when I'm with people my soul is open. (Mihal, young person)*

Many of the participants said that the majority of their friends were also undocumented, or had gone through the asylum system, which made it easier to trust and empathise with one another:

*My best friend, I met her in Croydon, we keep in contact with each other. She is older than me and has a son, but she had been a refugee before. Before, we didn't talk [about immigration status] because, when you first meet someone, you don't know if you can trust them or not. But after, when I know her better, we talk. That makes me like I have something, because when you speak with someone, you feel better. (Agnesa, young person)*

Faith was an important source of resilience for several of the people we spoke to as well as a source of practical support:

*Sometimes when I feel very, very bad, I go to mosque to pray and that helps. It calms me down and makes me forget about everything. (Emin, young person)*

*I go to church sometimes, so you meet people. The church wrote support letters for me, and some of them would help me buy uniform for my children, and just little things. (Florence, parent)*

Maintaining hope and focusing on the future was another way that participants sought to sustain their emotional wellbeing:

*At some point, I decided to put things behind me and just made up my mind that, okay, my son will be ten one day, and that's what counts. Next year I will be sorted. My son will be ten and maybe when he's ten probably he's British. So I just console myself. I'm really not a sad person to be honest. It's just once in a while it hits me. (Florence, parent)*

### **Access to support**

Participants talked about their experiences of support organisations, including both statutory agencies and specialist services working with undocumented children and families. The young people's experiences of local authority support had varied depending on the local authority, accommodation providers, individual social workers and personal advisors. Opinions on local authority support were mixed, with some participants grateful for any support that was provided while others struggled with the limitations of the support offered, if it was available at all. Inaccessibility or unreliability of workers was a key issue which impacted on wellbeing for several young people:

*I have some friends here who are with social services, and they keep calling them and they don't answer the phone. My social worker does the same, to be honest – she never picks up. And that is stressful as well, if you keep calling her and she doesn't pick up. The lawyers are the same – you keep calling them, they never pick up and you get worried that something bad might have happened. (Emin, young person)*

Support around the legal process was particularly important to participants, who were seeking to navigate a complex immigration system and were unaware of their rights and options:

*The most difficult situation was when I got the response from the judge when he refused my case. That was very stressful. I didn't know what to do, where to go. I was thinking about running away, but that wouldn't help at all. Basically [support organisation] helped me through that. I just phoned them straight away when I got the letter and they said, 'Come into the office and we'll explain everything'. So I went to the office and they did explain everything to me. It was still a worry, but I was not worried so much. They said, 'It happens that they refuse you once, maybe twice but you might get lucky the third time'. So it's worth trying more and more. (Emin, young person)*

When asked who had helped them to understand their rights and status, participants mentioned key individuals and organisations such as foster carers, social workers, legal professionals, teachers and college staff, and voluntary sector organisations with a particular focus on work with young people, asylum and other immigration issues. For some, not knowing what services were available, or not being able to get to them because of travel costs, were significant barriers.

*Sometimes I call my [former] foster carer – they said to me if I need any help, just ring us. (Mihal, young person)*

Some participants particularly valued culturally-specific organisations where they were able to socialise with people from the same country as them and share experiences:

*I first came [to organisation] two years ago and it's good – they help me. I like it because I know they've got delicious food. Every Monday I come here and I could take my mind off things for two hours. (Selvi, young person)*

*I heard about this organisation when some friends took me here. They're really helpful, and it feels like home. (Emin, young person)*

When asked about changes that would have helped them in the past or which could help in future, several participants were clear that immigration policy and decision-making were the main cause of their difficulties that needed to change:

*I don't know how the government in this country works, you understand? Because when they came to my house they saw everything. They saw that this girl has been working – I never received any benefits, no criminal record, nothing. They've got no need to delay people from working all this time. They really need to sort that because there are a lot of people like me out there who really want these papers just to go out and work and better their family. Give them what they need. It's really, really sad. (Constance, parent)*

However, participants were also drawing on their personal strengths, social networks and the resources around them to find ways to function within the system. When asked what advice they would give to others in a similar situation to them, they emphasised in particular the emotional resilience that would be needed to get through difficult circumstances:

*It's really hard to stop thinking about the past, but they have to see what they are doing and how well they are doing, so just leave the past and just see the future. That's what I try to do, but I know it's really hard. (Agnesa, young person)*

*I would recommend [support organisation] for them because they do help with your feelings, with your case, with your college, with you – they help with everything. And then I would just tell them, 'Do not give up'. (Emin, young person)*

### Key findings

- Undocumented children, young people and families face a range of issues that affect their emotional health and wellbeing, including past experiences of trauma, separation and loss, and the current impact of housing instability, lack of financial support and social exclusion
- Living with uncertainty over immigration status, housing, meeting basic needs, education provision and access to services makes it difficult for children and young people to engage with emotional support and to make plans for their future.
- Children and young people can face exclusion and isolation among their peers, which also impacts on their emotional wellbeing. The cost of school activities can limit the participation of undocumented children, and children and parents both have to make choices about whether to disclose their status to others.
- Many young people and families have a limited understanding of the immigration system and have struggled to access good quality legal advice to regularise their status.

- Children and families face barriers when seeking to access support, both in relation to their immigration status and due to practicalities such as service location and transport costs.

## Conclusions

The findings set out in this report highlight the breadth of challenges faced by undocumented children and the impact these have on their emotional health and wellbeing. The lack of a clear understanding of the number and location of undocumented children and young people in London poses difficulties for the provision of appropriate and accessible support services. This report has sought to present a reliable estimate of prevalence, but it remains the case that any attempt to estimate these figures will always be impacted by the hidden nature of this population and the fluidity between types of immigration status.

The emotional health and wellbeing needs of undocumented children and young people are multifaceted and interrelated. Issues such as uncertainty of status and instability of education provision can affect emotional wellbeing, but equally, poor emotional wellbeing can impact on the extent to which children and young people can engage with legal processes and participate in learning. Homelessness and lack of access to mental health support were particularly urgent issues for some young people, but even for those whose basic needs were met, the emotional impact of uncertainty cast a shadow over all areas of their lives and prevented them from making plans for the future and following their aspirations.

From speaking to parents as well as young people for this research, it became clear that many parents' status difficulties began when they were themselves children or young people. For some, it was not until they had their own children that they realised the significance of their status and the impact it would have on their family. Even for those families where the children had been granted status, the uncertainty of their parents' position caused emotional difficulties for both the parents and children.

Both the young people and parents we spoke to demonstrated resilience, strength and resourcefulness. They developed their own support networks, developed coping strategies and supported each other to get through the challenges they were facing. Where they felt able to think about the future, they described aspirations to work, study and build a life for themselves. For many, this included moving on from the trauma of their past experiences and having secure status in the UK. For those who had been granted status after a period of being undocumented, they were already taking steps to follow their aspirations, engage with the support available to them and move forward with hope for the future.

### Recommendations

The research set out above has led us to make the following recommendations at the service delivery, policy and research levels:

#### Recommendations for service delivery

- **Promoting a rights-based approach:** Our participants had experienced varying quality of legal advice, and many had initially had a lack of awareness of their rights and entitlements, and of the potential future impact of their undocumented status. Having an understanding of rights, entitlements and routes to regularisation is a key area of need

for many children and young people, particularly when they are new to the immigration system.

- **Building trust:** A range of factors impacted on participants' abilities to build trust with service providers, including a history of trauma and abuse, negative past experiences with support services, and the impact of the 'hostile environment', where participants feared accessing services could lead to immigration enforcement action being taken against them.
- **Ensuring stable accommodation:** Some participants had positive experiences of support services, but were unable to access them when their status changed or they had to move to a different area and could not afford to travel. Poor, insecure or temporary housing had an exacerbating effect on the other areas of wellbeing.
- **Early intervention:** Young people face particular vulnerabilities at points of transition, especially for unaccompanied asylum seeking children who are refused asylum. Those we spoke to reported being unprepared for this transition by the professionals they were working with. Providing support pre-emptively around legal status, accommodation and emotional wellbeing could help young people be better prepared at these times.
- **Providing holistic support:** Many of the people we spoke to had a range of intersecting needs that could not be resolved in isolation or which were exacerbated by the impact of other consequences of being undocumented; for example, being unable to access mental health support, moving away from support provision, and exclusion from peer groups. Combining emotional support with practical, legal and social support recognises how these needs impact on each other, and enables children and young people to access support in one place and build trusting relationships with consistent staff. This also enables children and young people who may not initially feel comfortable discussing their emotional needs to work up to this over time.
- **Creating accessible services:** In addition to barriers such as language and eligibility, there were practical issues preventing young people from accessing services, particularly when they had to move between different areas of London and could not afford travel costs. For some young people, the services they needed were available, but could not cover their travel fares. While there are key areas of London with high populations of undocumented children and families, as identified in this report, support needs can be greater in lower-prevalence areas where children and families may be more isolated. Travel support and outreach could help meet these access needs for children and families.
- **Partnership working:** Participants identified a number of existing services providing high-quality and compassionate support. Collaborating with other organisations to fill gaps in current provision or create additional pathways to existing support could enable this level of support to be available to a wider range of children and young people.

#### Recommendations for policy

- **Statutory guidance:** Due to the complex interaction between child welfare and immigration enforcement, there were examples where children were not able to access essential support to safeguard and promote their health and wellbeing, or when support was provided it was inadequate to maintain a reasonable standard of health or development. Statutory guidance, based on the rights of the child, irrespective of

immigration status, would assist local authorities in meeting their duties to undocumented children in their area, and discourage poor practice such as the 'robust front door' which seek to prevent undocumented migrant children accessing support.

- **Funding:** Undocumented children disproportionately live in boroughs with high levels of deprivation. Without a central funding allocation for the care and support of undocumented children, boroughs which are least able to afford it are most likely to face the financial burden of support. A more equitable funding settlement is urgently needed.
- **Legal aid:** The removal of legal aid and high costs of applications for regularisation of immigration status left children and young people in precarious situations for longer, which impacted on their wellbeing, and ultimately on the long term cost to the state of care and support. Legal aid should be restored for non-asylum immigration cases.
- **Welfare conditionality:** The NRPF rule and lack of the right to work had a direct impact on the ability of parents to provide for their children, and had the indirect impact of shifting the cost of welfare provision away from central government to the local level. Allowing access to social security benefits and giving parents the right to support their own families rather than relying on charitable and local authority support would be cost effective and improve the wellbeing of undocumented children.

#### Recommendations for research

- **Models of service delivery:** There are very few good practice models for holistic projects to support the emotional health and wellbeing needs of undocumented children and young people. There is a need for research and evaluation which explores what works, why, and in what circumstances when supporting the emotional health and wellbeing of undocumented children.
- **Longitudinal research:** Many undocumented children and families are living without secure immigration status over long periods of time. Further research is needed to understand the cumulative impact of undocumented status on the emotional wellbeing needs of children and families over time.

## References

- Aggarwal, N. K. (2017) 'Challenges in Treating Undocumented Immigrants', *American Journal of Psychiatry*, 174 (9): 833-837, doi:10.1176/appi.ajp.2017.17020168
- Allsopp, J., Chase, E. and Mitchell, M. (2015) 'The Tactics of Time and Status: Young people's experiences of building futures while subject to immigration control in Britain', *Journal of Refugee Studies*, 28 (2): 163-182, doi: 10.1093/jrs/feu031
- Apland, K. and Yarrow, E. (2017) *Children's Voices: A review of evidence on the subjective wellbeing of children subject to immigration control in England*. London: Children's Commissioner for England
- Barnardo's (2017) *Research Brief: Undocumented children in London and their emotional health and wellbeing*. Provided via email.
- Beck, T. L., Le, T., Henry-Okafor, Q. and Shah, M. K. (2017) 'Medical Care for Undocumented Immigrants: National and International Issues', *Primary Care*, 44 (1): e1-e13, doi: 10.1016/j.pop.2016.09.005
- Bloch, A. and McKay, S. (2017) *Living on the Margins: Undocumented migrants in a global city*. Bristol: Policy Press
- Bloch, A., Sigona, N. and Zetter, R. (2009) *No Right to Dream: The social and economic lives of young undocumented migrants*. London: Paul Hamlyn Foundation
- Chase, E., Knight, A. and Statham, J. (2008) *The Emotional Wellbeing of Unaccompanied Young People seeking Asylum in the UK*. London: British Association for Adoption and Fostering (BAAF)
- Chauvin, P., Simonnot, N. and Vanbiervliet, F. (2013) *Access to Healthcare in Europe in Times of Crisis and Rising Xenophobia: An overview of the situation of people excluded from healthcare systems*. Paris: Doctors of the World
- The Children's Society (2018) *Distress Signals: Unaccompanied young people's struggle for mental health care*. London: The Children's Society
- Connolly, H., Crellin, R. and Parhar, R. (2017) *Cut off from Justice: The impact of excluding separated migrant children from legal aid*. London: The Children's Society
- Crawford, E. and Arnold, N. W. (2017) "'We don't talk about undocumented status...we talk about helping children': How school leaders shape school climate for undocumented immigrants', *International Journal of Educational Leadership and Management*, 5 (2): 116-147, doi: 10.17583/ijelm.2017.2840
- Dalkey, N. and Helmer, O. (1963) 'An experimental application of the use of the Delphi method to the use of experts', *Management Science*, 9: 458-467.

De Vito, E., De Waure, C., Specchia, M. L., Parente, P., Azzolini, E., Frisicale, E. M., Favale, M., Telesman, A. A. and Ricciardi, W. (2016) 'Are undocumented migrants' entitlements and barriers to healthcare a public health challenge for the European Union?', *Public Health Reviews*, 37 (13) , doi: 10.1186/s40985-016-0026-3

Dexter, Z., Capron, L. and Gregg, L. (2016) *Making Life Impossible: How the needs of destitute migrant children are going unmet*. London: The Children's Society

Dorling, K. (2013) *Growing Up in a Hostile Environment: The rights of undocumented migrant children in the UK*. London: Coram Children's Legal Centre

Dorling, K., Hurrell, A., Lagrue, M., and Trevena, F. (2017) '*This is my home*': *Securing permanent status for long-term resident children and young people in the UK*. London: Coram Children's Legal Centre

Edward, J. (2014) 'Undocumented immigrants and access to health care: Making a case for policy reform', *Policy, Politics and Nursing Practice*, 15 (1-2): 5-14, doi: 10.1177/1527154414532694

Enriquez, L. E. (2015) 'Multigenerational punishment: Shared experiences of undocumented immigration status within mixed-status families', *Journal of Marriage and Family*, 77 (4): 939-953 doi: 10.1111/jomf.12196

European Agency for Fundamental Rights (FRA) (2015) *Cost of Exclusion from Healthcare: The case of migrants in an irregular situation*. Vienna: FRA

Farmer, N. J. (2017) "'No Recourse to Public Funds", insecure immigration status and destitution: the role of social work?', *Critical and Radical Social Work*, 5 (3): 357-367, doi: 10.1332/204986017X15029697778471

Goodman, C. M. (1987) 'The Delphi Technique: A Critique', *Journal of Advanced Nursing*, 12: 729-734

Gordon, I., Scanlon, K., Travers, T. and Whitehead, C. (2009) *Economic impact on the London and UK economy of an earned regularisation of irregular migrants to the UK*. London: LSE

Home Affairs Committee (2018) *Immigration policy: Basis for building consensus*. Second Report of Session 2017-19. London: House of Commons. Available at: [publications.parliament.uk/pa/cm201719/cmselect/cmhaff/500/500.pdf](https://publications.parliament.uk/pa/cm201719/cmselect/cmhaff/500/500.pdf)

Hsu, C. and Sandford, B. (2007) The Delphi Technique: Making Sense Of Consensus *Practical Assessment, Research & Evaluation*, 12 (10)

ISTAT (1991) *Gli immigrati presenti in Italia, una stima per l'anno 1989, Note e relazioni No.1*. Rome: Istituto nazionale di statistica

Jolly, A. (2018a) "'You Just Have to Work with What You've Got'" Practitioner Research with Precarious Migrant Families', *Practice*, 30 (2): 99-116

Jolly, A. (2018b) 'No recourse to social work? Statutory neglect, social exclusion and undocumented migrant families in the UK', *Social Inclusion*, 6 (3): 190-200

Jolly, A. (2019). Consulting the oracle: using the Delphi method in research with undocumented migrant children. *Social Research Practice*. 8: Autumn 2019. Available at: <https://the-sra.org.uk/common/Uploaded%20files/Social%20Research%20Practice%20Journal/social-research-practice-journal-issue-08-autumn-2019.pdf#page=28>

Jolly, A., Thomas, S. and Stanyer, J. (2020) *London's children and young people who are not British citizens: A profile*. London: Greater London Authority. Available at: [https://www.london.gov.uk/sites/default/files/final\\_londons\\_children\\_and\\_young\\_people\\_who\\_are\\_not\\_british\\_citizens.pdf](https://www.london.gov.uk/sites/default/files/final_londons_children_and_young_people_who_are_not_british_citizens.pdf)

Lewisham Borough Council (2015) *Overview and Scrutiny: No Recourse to Public Funds Review, Public Accounts Select Committee (February 2015)*. Available at: [councilmeetings.lewisham.gov.uk/documents/s33873/No%20Recourse%20to%20Public%20Funds%20Review.pdf](http://councilmeetings.lewisham.gov.uk/documents/s33873/No%20Recourse%20to%20Public%20Funds%20Review.pdf)

Lind, J. (2018) 'Sacrificing parents on the altar of children's rights: Intergenerational struggles and rights in deportability', *Emotion, Space and Society*, doi: 10.1016/j.emospa.2018.07.001

Migration Watch (2010) *The Illegal Migrant Population in the UK*. Briefing Paper 11.22. Available at: [migrationwatchuk.org/pdfs/BP11\\_22.pdf](http://migrationwatchuk.org/pdfs/BP11_22.pdf)

North East London Migrant Action (NELMA) (2018) *Left out at lunch: The Facts*. Available at: <https://nelmacampaigns.files.wordpress.com/2018/09/nelma-free-school-meals-factsheet.pdf>

Palmer, A. and Wood, D. (2017) 'The Politics of Fantasy: Immigration policy in the UK after Brexit', *Civitas*. Available at: <http://www.civitas.org.uk/publications/the-politics-of-fantasy/>

Piguet, E. and Losa, S. (2002) *Travailleurs de l'ombre? Demande de main-d'oeuvre du domaine de l'asile et ampleur de l'emploi d'étrangers non déclarés en Suisse*. Zurich: Seisomo

Pinkerton, C., McLaughlan, G. and Salt, J. (2004) *Sizing the Illegally Resident Population in the UK*. Home Office Online Report 58/04. London: Home Office. Available at: <http://webarchive.nationalarchives.gov.uk/20110218141426/http://rds.homeoffice.gov.uk/rds/pdfs/04/rdsolr5804.pdf>

Pinter, I. (2011) *'I Don't Feel Human': Experiences of Destitution among Young Refugees and Migrants*. London: The Children's Society

Pinter, I. (2018) 'A New Hope for Migrant Children', *The Children's Society Blog*. Available at: [https://www.childrensociety.org.uk/news-and-blogs/our-blog/a-new-hope-for-migrant-children?utm\\_source=twitter&utm\\_medium=social&utm\\_campaign=twittersocial\\_legalaid\\_legalaid\\_blog\\_12july2018](https://www.childrensociety.org.uk/news-and-blogs/our-blog/a-new-hope-for-migrant-children?utm_source=twitter&utm_medium=social&utm_campaign=twittersocial_legalaid_legalaid_blog_12july2018)

Price, J. and Spencer, S. (2015) *Safeguarding children from destitution: Local authority responses to families with 'no recourse to public funds'*. Oxford: COMPAS

Priest, N., Paradies, Y., Trenerry, B., Truong, M., Karlsen, S. and Kelly, Y. (2013) 'A systematic review of studies examining the relationship between reported racism and health and wellbeing for children and young people', *Social Science and Medicine*, 95: 115-127, doi: 10.1016/j.socscimed.2012.11.031

Research Institute for Labour and Social Affairs (RILSA) (1997) *Illegal Employment of Foreigners on the Czech Labour Market* (unpublished). Prague: RILSA

Rosen, D. (2014) 'Affordable Access to Care for the Undocumented', *Hastings Center Report*, 44 (5): inside back cover, doi: 10.1002/hast.360

Sigona, N. and Hughes, V. (2012) *No way out, no way in: Irregular migrant children and families in the UK*. Oxford: COMPAS

Skehan, A., Sandhu, B., Payne, L. and Wake Smith, E. (2017) *Precarious Citizenship: Unseen, Settled and Alone – The Legal Needs of 'Undocumented' Children and Young People in England and Wales*. London: MiCLU

Smith, A. W. (2018) "'Hiding in Plain Sight": Daily strategies and fear management among undocumented refugee children in Sweden', *Journal of Refugee Studies*, doi: 10.1093/jrs/fex046

Threipland, C. (2015) *A Place to Call Home: A report into the standard of housing provided to children in need in London*. London: Hackney Community Law Centre/Hackney Migrant Centre

Vollmer, B. (2008) *Undocumented Migration: Counting the Uncountable. Data and Trends Across Europe*. Country Report: UK. CLANDESTINO Project. Available at: [compas.ox.ac.uk/media/PR-2008-Clandestino\\_UK.pdf](https://compas.ox.ac.uk/media/PR-2008-Clandestino_UK.pdf)

Winters, M., Rechel, B., De Jong, L. and Pavlova, M. (2018) 'A systematic review on the use of healthcare services by undocumented migrants in Europe', *BMC Health Services Research*, 18 (1): 30-39, doi: 10.1186/s12913-018-2838-y

Woodbridge, J. (2005) *Sizing the unauthorised (illegal) migrant population in the United Kingdom in 2001*. London: Home Office

Zandvliet, C. and Gravesteijn-Ligthelm, J. H. (1994) *Illegale arbeid, omvang en effecten*. Den Haag: Ministerie van Sociale Zaken en Werkgelegenheid