NAVIGATING IRREGULARITY: THE IMPACT OF GROWING UP UNDOCUMENTED IN EUROPE

PICUM
PLATFORM FOR INTERNATIONAL COOPERATION ON UNDOCUMENTED MIGRANTS
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Undocumented children are part of our communities and share the hopes and dreams of any other children. Yet, due to their irregular residence status, their lives and the lives of their families are characterized by uncertainty and instability across many different areas. This paper focuses on six areas impacted by their irregular residence status: housing, access to services, income and socio-economic status, residence procedures and immigration enforcement (including detention), school life, and family life. These are the areas in which children are either most invisible, or the areas central to children’s lives.

There is no reliable estimate of the number of undocumented children in Europe, although national-level estimates exist and some EU-wide data on subsets exist. While there are many undocumented children who are “unaccompanied”, most live with their parent(s). Many were born or have lived in Europe for several years: 68 percent of undocumented children whose parents were surveyed in Ireland, were born there, for instance.¹

**Housing**

Where children live affects their present and future, but a child’s housing situation depends to a large extent on their parents’ or other people’s abilities to secure quality, safe and secure housing. While undocumented parents do their utmost to provide stable, quality housing to their children, they are often unable to offer them the same housing conditions as other parents.² They often lack income or face discrimination on the housing market. Homeowners who rent to undocumented migrants may be criminalised and homeless shelters may exclude undocumented migrants because of their irregular status. For many undocumented parents, the only option is paying high rents to live in inadequate, unsafe, housing.³

Inadequate housing harms a child’s health, both on the short and long term, because children’s bodies are constantly developing during childhood and adolescence, and because they typically spend more time indoors and closer to the floor than adults.⁴ Children’s risk of ill-health and disability increases by up to 25 percent during childhood and early adulthood when they experience multiple housing problems.⁵ Mental health problems are also more prevalent among homeless children than among their non-homeless peers. Nearly half of the homeless migrant children surveyed in Paris said they “don’t feel safe” or “don’t feel safe at all.”⁶ A child’s housing situation impacts their education: homeless children have lower levels of academic achievement that cannot be explained by differences in ability.⁷ A child’s housing situation also impacts their social life and their ability to make lasting friendships and maintain social networks.⁸

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¹ Migrant Rights Centre Ireland, 2020, “We live here, we work here. We belong here.” A survey of over 1,000 undocumented people in Ireland.
³ This has been observed numerous times in numerous countries. E.g. Harrison M., Law I., and Phillips D., 2005, Migrants, Minorities and Housing: Exclusion, Discrimination and Anti-Discrimination in 15 Member States of the European Union, European Monitoring Centre on Racism and Xenophobia; DW, 29 January 2020, Migrants face housing discrimination in Germany [checked on 26 March 2020]; RTE, 15 August 2019, Migrants face discrimination in rental housing market – Charity [checked on 26 March 2020].
⁵ Such as bad housing conditions, overcrowding, etc. Harker L., 2006, Chance of a lifetime: The impact of bad housing on children’s lives, Shelter.
Access to services

Although child rights are applicable to all children, irrespective of their residence status, undocumented children have limited access to social services. This includes access to education, access to health care, early childhood education and care and protection when they are a victim of crime. When service providers report undocumented migrants’ personal data to immigration enforcement agencies (in the absence of “firewalls” that would prevent such reporting of irregular status), or when a family has mixed migration statuses, undocumented children and parents hesitate to reach out and seek (necessary) help.

Income and socio-economic status

There is little to no data on the income of undocumented households and the risk, or the level, of poverty they face. However, migrants overall face poverty and social exclusion at a higher level than citizens, and irregular migration status relegates undocumented workers to the informal economy, where they are systematically underpaid and exploited. One 2011 survey of 170 undocumented persons in Belgium showed that half had an income of less than 145 euros per month.

Undocumented workers that were apprehended in Spain in the fall of 2020 earned two euro per hour, one third of the mandatory minimum wage.

Income is a key social determinant of health and inextricably linked to children’s well-being and life chances: it affects the community in which they live, the quality of life, the food available to them, the type of housing they live in and the sense of security they experience. Undocumented children living in poverty often go hungry or eat a poor diet and families face challenges in offering decent shoes and clothing, necessary school supplies, internet at home, toys or even essentials like shower gel and shampoo. Yet unlike other families that live in poverty, undocumented parents are not eligible for support such as unemployment assistance or minimum income in any of the EU member states.

Many undocumented children and young people grow up in a context where there is chronic or toxic stress due to an accumulation of problems such as poverty, debt, social isolation and uncertainty about the future. Experiencing chronic or toxic stress as a child can lead to high risk of cardiovascular disease, cancers, asthma, and depression when they are adults, and even a temporary drop in cognitive functioning.

References

10 PICUM, 2020, Data Protection and the “Firewall”: Advancing the right to health for people in an irregular situation. PICUM, n.d., Why a Firewall?
11 EUROSTAT data from 2019 confirms that there is a 39 per cent risk among migrants to find themselves in conditions of poverty or social exclusion, compared to a 19.5 per cent risk among EU natives. See: European Commission, 2020, Action Plan on Integration and Inclusion 2021-2027.
12 For more on undocumented workers, see a.o. PICUM, 2020, A Worker is a Worker: How to ensure that undocumented migrant workers can access justice; PICUM, 2020, PICUM key messages and recommendations on human trafficking.
13 Schockaert I., I. Nicaise I., 2011, De leefomstandigheden van dak – En thuislozen en van mensen zonder wettelijke verblijfsvergunning: eerste resultaten, HIVA.
14 BBC, 12 December 2020, Spanish police rescue 21 ‘exploited’ migrant workers from warehouse [checked on 18 January 2021]; EuroWeekly News, 4 February 2020, Minimum wage in Spain is officially increased to €950 per month [checked on 29 December 2020].
16 PICUM, forthcoming, Designing labour migration policies to promote decent work.
17 The term ‘chronic’ stress comes from the medical world and denotes “a constant stress experienced over a prolonged period of time, [which] can contribute to long-term problems for heart and blood vessels.” The term ‘toxic stress’ comes from the Adverse Childhood Experiences research and “alters the developing brain and gives rise to diseases, both physical and mental. Stress hormones such as cortisol and adrenaline shut down areas of the brain as a defence against uncontrollable feelings related to fear. Toxic stress is of a different order to ordinary stress in that it is persistent and systemic, the child has no control over their situation and nothing they can do will make a difference, they are powerless to change the situation and it is a more or less permanent situation.” Source: Cunnane D., 13 March 2018, Toxic stress vs chronic stress – what is the difference? Our Time’s views. For more about the Adverse Childhood Experiences research, see www.cdc.gov/violenceprevention/aces/.
Formal and informal support networks are important to bridge gaps and take care of basic needs, including food banks and informal food parcel systems.

Residence procedures and immigration enforcement, including detention

Thousands of children – both accompanied and unaccompanied – across Europe are involved in residence procedures. While the interaction between unaccompanied children and immigration authorities is often recognized by policy makers and civil society, there is less awareness and understanding of the degree to which undocumented children in families interact with immigration authorities. When no interpreter is available and parents do not know the country’s language, but their school-age children do, children are tasked with translating letters for their parents or accompanying them during residence permit interviews, visits to the family’s lawyer or social and health services.

Being the family’s guide or interpreter can empower the child, but it can also harm them when too much is asked of them, when they hear their parents’ traumatic experiences or witness them in distress, or when they are forced to be the messenger of very difficult news: a negative decision concerning a request for protection or other status or an order to leave the territory.

Going through residence procedures is a nerve-wracking experience, for adults and children alike, and telling the story over and over can retraumatize them. And, when the residence application is denied, the person’s mental health greatly deteriorates. Sometimes, children simply give up. Swedish medical professionals have documented cases of resignation syndrome where undocumented children end up in an unresponsive state. Immigrant detention also has shown to be harmful. Studies have documented that detained adults and children have higher levels of mental health problems than people who are not detained. The longer they were detained, the more they suffered. One reason for the harm of detention is the lack of agency: being able to do something and protect oneself helps prevent a horrible experience from having long-lasting psychological scars. International human rights and child rights bodies have all recommended children never be detained for migration purposes.

Many undocumented children, including those who are very young, fear the police because they fear being arrested, detained and deported.

School life and feeling supported

A child’s school experience is formative beyond the purely educational. The school environment functions as a mediating factor in their life, providing a social safety net or ‘protective layer’ around them, while they navigate other challenges in their day-to-day. Enabling undocumented children access to education, including early childhood education and care, extracurricular activities and internships, is therefore key to nurturing a child’s resilience and a safe and secure future.

However, the often implicit rather than explicit inclusion of undocumented children in countries’ education-related laws, causes undocumented

For EU-wide data on children in asylum and migration procedures, see Eurostat dataset “Children in migration (mci)”.


children to be excluded from (part of) the education system. They may not be able to enrol or not be able to participate fully.

They may also start on an unequal footing. Children raised in poverty, as many undocumented children are, are likely to have a disadvantage in the formal education system before even starting school. School holidays come with additional challenges for them as well: meals and leisure activities that are usually covered at school need to be covered by the parents on top of the usual household expenses, and a child’s mental health may worsen due to the increased financial pressure on the family. Economically-precarious children may also be more likely to experience ‘learning loss’ over the holidays than their peers.

Residence procedures also impact undocumented children’s education, for example when they (have to) attend interviews or go to the immigration authorities for other procedural reasons. This also happens when interpreters are unavailable and parents do not speak the country’s language well, but their school-age children do.

**Family life and secure attachment**

Children who grow up in a warm, loving family, with secure attachment to their primary caregiver, will be able to use this experience as a strong foundation for success and resilience later in life. Experiencing love and safety protects the child’s mental health, as social support is the most effective protection mechanism against trauma and stress. Reversely, long-term deprivation of a child from their primary caregiver (because part of the family is detained, for example) is likely to cause cognitive, emotional and social damage.

For undocumented parents, managing the day-to-day difficulties caused by their residence status and/or experiencing discrimination can force them to be less available for interaction with their children than they would want, or their children need. This in turn can cause stress to the child since their primary source of comfort and consolation feels absent. Growing up in a chronically-stressed family can result in higher cortisol levels, which can cause the development of physical and behavioural problems like anxiety and depression.

In some families, a change in parent-child role relations occurs, with children taking up roles that are usually filled by parents. This ‘parentification’ of the child can adversely affect their socio-emotional development and mental health if the demands placed on them exceed their capacity to comply. However, shouldering family responsibilities that are within their developmental capacities may lead to more self-reliance and competence.

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Conclusion: navigating irregularity and finding durable solutions

While no undocumented child is alike, many have lived through several potentially traumatic events. The significance of experiencing trauma cannot be understated: it divides the world into those who experienced the trauma and can understand them, and those who did not, cannot understand them and cannot be trusted. 34 That includes service providers, immigration officials and others who may want to help them.

An important mitigating factor when experiencing potentially traumatic events is agency – being able to do something about the situation. But because they are children, and because as migrants they are mostly dependent on decisions made by others, 35 their agency is more limited.

An irregular residence status does not provide children with the safe and secure foundation they need to thrive as children and as adults. The fact that many undocumented children grow up to be intelligent and responsible young people and adults who want to contribute to the communities they live in speaks to their own resilience and their parents’ parenting skills.

All children can reach their potential and be resourceful and adaptable once they are given the resources and environment needed to thrive and self-actualise in. However, undocumented children and young people cannot reach their full potential until they have a secure residence status. This is why it is important for governments to develop and integrate best interests procedures that result in a durable solution that is in the best interests of the child in national law, foresee in-country residence procedures based on child rights, and ensure full access to services for undocumented children.

35 For instance, immigration officials, but also landlords, social service providers, etc.
INTRODUCTION

Undocumented children are part of our communities. They have the same dreams for a fulfilling future their peers have. Yet due to their irregular residence status, their lives and the lives of their families are characterized by uncertainty and instability across many different areas, including in housing, employment, and their physical and emotional well-being.\(^\text{36}\)

While previous PICUM publications have collected the voices of undocumented youth themselves,\(^\text{37}\) looked at the rights undocumented children have in different countries\(^\text{38}\) and outlined positive policies and practices rolled out by local, regional, national and European governments,\(^\text{39}\) this report takes a different approach. The aim of this report is to take step back and analyse how undocumented children’s daily lives are impacted by their residence status, how that impacts their well-being and development, and which policy changes might therefore be necessary.

While there are many different facets of a child’s life and environment that are impacted by their residence status, this paper focuses on the following areas: housing, access to services, income and socio-economic status, residence procedures and immigration enforcement (including detention), school life, and family life. The report concludes with recommendations to local, national, regional and global policy makers.

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\(^{37}\) PICUM, 2016, *Hear our Voices: Undocumented Children and Young People Share their Stories*.


INVISIBLE CHILDREN

Undocumented children do not have a secure residence status in the country they live in. They may have been born in that country to undocumented parents, come to the country with (or without) their parents or caregivers and either never had a residence status or lost it at some point, or been born stateless. Children with an insecure residence status, i.e. a temporary residence status, are at risk of becoming undocumented unless that residence status becomes a durable one.

A plethora of experiences

There are as many different experiences as there are undocumented children. Yet, we can identify some groups of children who share some similarities.

Most undocumented children live with their parent(s) and live relatively settled lives. A 2020 survey of 1,000 undocumented people living in Ireland found that 75.5 percent had lived in Ireland for more than five years. Of the 185 children whose parents were surveyed, 68 percent were born in Ireland. Similarly, of 29 undocumented children interviewed in The Netherlands, 26 had been in the country for more than four years and 16 were born there.

Undocumented children living with their families may not know they are undocumented, as their parents may want to protect them from the worries, stress and uncertainty of being undocumented. Others are acutely aware of their situation, as their parents may have told them at an early age or may rely on them to navigate migration procedures and social services. Other children become acutely aware of their status when they or their parent(s) are apprehended or detained.

Once the child understands that they are undocumented, they realise they will not have the same chances or future as their citizen classmates and friends. Although they often keep it secret from friends and teachers, being undocumented – and becoming documented – becomes a central aspect of their life and identity. As a twelve-year-old boy says, “Sometimes I think about what it would be like to have a residence permit. I think about that every day.”

While most undocumented children live with their parents, some live without any (adult) family members (termed “an unaccompanied child”) or are living with family members who are not their legal guardians (a so-called “separated child”). This distinction between unaccompanied and separated children is not a legal one, but shows the different situations children can face.
find themselves in. A guardian should be appointed to them by the government to assist and support them, safeguard their best interests and well-being and help secure a durable solution.\(^\text{48}\)

Unaccompanied or separated children may live in a state institution with other unaccompanied children, in a foster family or be homeless, depending on the country they live in and their individual situation. While being in state care does award a certain level of protection, the least of which is being housed, it does not mean the child has a secure residence status. A 2019 investigation by El País, for example, unearthed that nearly 10,000 of the 12,300 unaccompanied children in state care at the time did not have a residence status, even though the law entitled it to them.\(^\text{49}\)

A dearth of data

There is no reliable estimate of the number of undocumented children in Europe (likewise, there is no current reliable estimate of undocumented migrants in the EU\(^\text{50}\)). Some national level attempts have been made to give a credible estimate to the numbers of undocumented children on the national level. For instance, between 190,000 and 241,000 undocumented children are estimated to live in the UK, with most of them based in London.\(^\text{51}\)

The only official, EU-wide data on undocumented people concerns either arrests, the issuing of orders to leave the territory or (forced) returns.\(^\text{52}\) All of these give an incomplete image, and most are not age disaggregated. However, over the past decade, around ten percent of the people EU Member States reported to Eurostat to have been found irregularly present on their territory were children (see table 1).\(^\text{53}\) Even though this number only represents people who were apprehended, and thus cannot give a real indication of how many undocumented people or children live in the EU, it does show that several tens of thousands of undocumented children come into contact with state officials, especially police, each year.

| TABLE 1. Number and proportion of children found to be irregularly present on the territory (EU28) [migre-EIPRE] |
|---|---|---|---|---|---|---|---|---|---|
| 508,850 | 474,690 | 443,425 | 452,270 | 672,215 | 2,155,485 | 983,935 | 618,730 | 600,025 | 650,175 |
| Children (under 18) found irregularly present - EU 28 | 41,755 | 35,505 | 38,700 | 42,235 | 89,875 | 230,520 | 161,400 | 79,335 | 57,275 | 59,005 |

A durable solution is a living situation that protects the long-term best interests and welfare of the child and is sustainable and secure from that perspective. The outcome should include a secure residence status and ensure that the child is able to develop into adulthood, in an environment which will meet their needs and fulfill their rights as defined by the Convention on the Rights of the Child and will not put the child at risk of persecution or serious harm. A durable solution may involve integration in the country of residence, or resettlement or reunification with family members in the country of origin or in a third country. For more information about durable solutions, visit www.picum.org/durable-solutions.

El País, 19 Nov 2019, *España mantiene sin papeles a casi 10.000 menores inmigrantes tutelados* [checked on 22 December 2020].

In 2008, between 1.9 and 3.8 million irregular migrants were estimated to reside in the EU; most arrived through regular channels – with a permit to study or work, to seek family reunification or to seek asylum – and later lost that status. Source: European Commission, 2009, *Clandestino Project Final Report*.


See Eurostat datasets on Asylum and Managed Migration. Please note that the dataset on voluntary returns (migre_eirt_vol) does not include the people who leave on their own accord/outside of assisted voluntary return programmes.

Eurostat, *Third country nationals found to be illegally present - annual data (rounded)* [migre_eipre] [checked on 1 December 2020].

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48 A durable solution is a living situation that protects the long-term best interests and welfare of the child and is sustainable and secure from that perspective. The outcome should include a secure residence status and ensure that the child is able to develop into adulthood, in an environment which will meet their needs and fulfill their rights as defined by the Convention on the Rights of the Child and will not put the child at risk of persecution or serious harm. A durable solution may involve integration in the country of residence, or resettlement or reunification with family members in the country of origin or in a third country. For more information about durable solutions, visit www.picum.org/durable-solutions.

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53 Eurostat, *Third country nationals found to be illegally present - annual data (rounded)* [migre_eipre] [checked on 1 December 2020].
AREAS IMPACTED BY A CHILD’S RESIDENCE STATUS

While numerous areas of a child’s life and environment are impacted by their irregular residence status, our focus is on those in which children are most often invisible, such as housing and residence procedures, or that are central aspects of their lives, such as the family unit and education.

Several aspects are often impacted at the same time. For instance, one study on undocumented children in Amsterdam, The Netherlands, found that eleven percent of the undocumented children included in the study did not attend school, 17 percent were not vaccinated, 83 percent did not have a general practitioner, and 30 percent did not have a permanent place of residence (i.e. were homeless). 54

No undocumented child or family is alike, and other aspects of their lives also interact with factors not covered in this report, such as their age or stage of development, gender identity or sexual orientation, prevalent gender roles, intergenerational trauma transfer, the city or country they live in, and language proficiency, to name a few.

The insights on the following sections are from researchers, practitioners, parents, children and young people themselves, or – quite often – surveys filled in when accessing health care services provided by NGOs. There is little to no quantitative research that looks at the aspects of undocumented children’s lives that are impacted by their status. Where appropriate we have extrapolated research findings that were not exclusively focused on undocumented children, but that did cover them implicitly (for instance, on the impact of inadequate housing).

BOX 1 Notes on resilience

The detrimental effects of insecure residence status on mental and physical health will be mentioned throughout this publication. However, it is crucial to underline the potential, resourcefulness and adaptability of all children, once they are given the resources and environment needed to thrive and self-actualise in.

Undocumented children and young people can be remarkably resilient and capable of amazing achievements – not the least of which is navigating life without a secure residence status. However, resilience 55 is not innate to one child and absent in another. It is an ordinary adaptation to adversity or potentially traumatic events given the right resources.

Resilience is based on interactions between the child and their environment. That environment can include both risk, protective and mediating factors. A risk factor could be stress resulting from the threat of deportation; a mediating factor could be the family’s resources and socio-economic status. Protective factors could be a warm parent-child relationship or supportive friendships. Moreover, individual children may be resilient to some risks, but not to others, and risk and protective factors do not have the same effects in all conditions in everyone.

Undocumented children are not irrevocably limited or marked by their experiences, but they are harmed in both the immediate and long-term by current policies and practices. If governments and society at large provide these children with the start they need, they are able to live fulfilling lives and contribute to society when they reach adulthood.


Housing, inadequate housing and homelessness

Where children live affects their present and future. But whereas an adult usually does have some agency over their living situation, a child’s housing situation depends to a very large extent on their parents’ or other people’s abilities to secure quality, safe and secure housing. This is invariably the case for undocumented children, teenagers and young people who depend on their parents, family members or the government’s will and capacity to provide housing or shelter.

A definition of homelessness

The European Typology on Homelessness and housing exclusion, ETHOS, defines the notion of “home” as comprising three domains – the physical, social and legal – the absence of which can be taken to delineate homelessness. ETHOS states that “having a home can be understood as: having an adequate dwelling (or space) over which a person and his/her family can exercise exclusive possession (physical domain); being able to maintain privacy and enjoy relations (social domain) and having a legal title to occupation (legal domain).” This leads to the four main concepts of rooflessness, houselessness, insecure housing and inadequate housing, all of which indicate the absence of a home.

Undocumented children’s experience with housing and homelessness illustrates this continuum: some are roofless, others sleep inside, either with friends, in squats or temporary shelters, and yet others, more often those living with their parent(s), live in a relatively stable house or apartment, but one that is too small or inadequate in some other way.

Against the odds

While undocumented parents do their utmost to provide stable, quality housing to their children, they’re often unable to offer them the same as their documented counterparts could. Undocumented families tend to move frequently and often live in crowded conditions, with all or several family members sharing one room or by living with another family.

Because of their irregular residence status, their options are limited: if they work, undocumented parents may experience exploitation and abuse in the workplace, which often leads to underpayment, late payments or no payments at all as workers. If parents are unable to work, they mostly rely on material and financial support from friends and

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56 Amongst others, but not only, when they are unaccompanied.
57 European Federation of National Associations Working with the Homeless (FEANTSA), n.d., ETHOS – European Typology of Homelessness and housing exclusion.
58 Rooflessness includes people living rough or in emergency accommodation.
59 Houselessness includes people living in accommodation for homeless people, in women’s shelters, in accommodation for migrants (reception centres, for instance), and people who are soon to be released from an institution (e.g. prison).
60 Insecure housing includes longer-term housing designed for homeless people, living with friends or friends, without legal (sub)tenancy, or occupying land, living under threat of eviction or violence.
61 Inadequate housing includes living in temporary or non-conventional structures, in unfit housing or in situations of extreme over-crowding.
family to sustain themselves.64 Due to their irregular status, undocumented parents are not eligible for allowances, such as unemployment assistance or minimum income, throughout the EU.

The country they live in may criminalise landlords who rent to undocumented people. Migrants also generally have a tougher time finding quality rental properties65 due to discrimination.66 Undocumented tenants are often unable to access existing complaint mechanisms to hold landlords to account and undocumented parents/children may be excluded from emergency accommodation, shelter and social housing schemes.67 For many, the only option is paying high rents for properties in poor, unhealthy and unsafe condition.68

The impact of housing

There are at least four areas in which housing conditions influence children's lives and well-being: their physical health, their mental health, their education and their social life.

Health needs are common among children experiencing homelessness and vary according to the living situation. As Swedish researchers69 explain:

“[C]hildren’s health is especially vulnerable to poor housing conditions for several reasons. Not only is children’s exposure usually higher in terms of time spent indoors, but children have much higher respiratory rates relative to their body weight than adults, and their behaviour differs with more time spent on the floor and placing objects in their mouths. Moreover, their immune systems and metabolic capacities are less developed and they have fewer opportunities to actively influence their environment. The home environment during early life is thus an important source of exposure to chemical, biological, and physical agents.”

A child’s risk of ill-health and disability increases by up to 25 percent during childhood and early adulthood when they experience multiple housing problems.70 There is a correlation, for instance, between dampness and asthma, mould and headaches;71 mould and diarrhoea, headaches and fever72 and between overcrowding and respiratory ill-health, infectious diseases and slow growth.73 These, in turn, can lead to sleep loss, restrictions on children’s daily activities, and absence from school, which have long-term consequences for a child's development.74

Although children experiencing poor mental health cannot be attributed to housing conditions alone,
mental health problems are more prevalent among homeless children compared to their non-homeless peers. For instance, children who have been in temporary accommodation for more than a year are over three times more likely to demonstrate mental health problems such as anxiety and depression. Unaccompanied children in France, for example, testified of the fear and fatigue caused by homelessness: “I wanted to go to sleep at Gare du Nord [train station in Paris], but there are people who drink alcohol or take drugs. So I’m afraid to stay there, that’s why I sleep at République [metro station], near the canal.” Of the 58 homeless migrant children surveyed by Refugee Rights Europe in Paris in January 2018, 44.8 percent said they “don’t feel safe” or “don’t feel safe at all.” Two of them had seen another migrant die while in Paris.

A child’s housing situation also impacts their education: homeless children have lower levels of academic achievement that cannot be explained by differences in ability. One key factor seems to be frequent moves: unstable living situations often lead to children changing schools or even stopping school altogether for short periods, which inevitably

**BOX 2 Homeless in France**

Although no residence requirements apply to children in France, and thus children cannot technically be undocumented in France, they can and do find themselves in situations which equate to being undocumented. One way this happens is by carrying out low-quality age assessments of unaccompanied children which deem applicants are adults for arbitrary reasons.

**Fallen between the gaps**

Even though unaccompanied children in France should be taken care of by child protective services, countless find themselves homeless and without any help, either because the relevant department says there is no room, or because the child is determined to be an adult by an often-arbitrary age assessment.

In the latter case, they find themselves in a “neither-nor-situation”: they can neither access the housing, support and legal guardian they are entitled to as children, nor can they access services as adults when they have either lost or been deprived of their identity documents or because the documents state they are children and (adult-only) services refuse them assistance.

These children find themselves in a state of acute precarity: more than half of the unaccompanied children Médecins du Monde France assists are homeless and have no way of supporting themselves. A similar number (51 percent homeless) is seen by Médecins Sans Frontières in their centres in Pantin and Neuilly Plaisance (Île de France). These children are extremely vulnerable to violence and exploitation: 20 percent of the children seen by the centre in Pantin had experienced violence, torture or maltreatment since their arrival in France.

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79 For more information, see PICUM, 2018, *Manual on regularisations for children, young people and families*.
81 Those declaring to be unaccompanied children and who must undergo a (departmental) age assessment should receive at least five days of housing by that department. Source: République Française, Code de l'action sociale et des familles *Conditions d'évaluation de la situation des mineurs privés temporairement ou définitivement de la protection de leur famille* (Articles R221-11 à R221-12).
82 Both under the “aide sociale à l’enfance” legislation (République Française, *Code de l'action sociale et des familles*: Chapitre Ier : Service de l'aide sociale à l'enfance (Articles L221-1 à L221-89) and under the law on the protection of childhood (République Française, LO nº 2007-292 du 5 mars 2007 réformant la protection de l’enfance).
83 The 100 departments of France are each responsible for the unaccompanied children living on their territory, making for a checkered map, and compiling data difficult if not impossible.
84 Médecins du Monde, n.d., *Notre action pour les mineurs non accompagnés*.
86 Ibid.
has an impact on their school achievements and development.\textsuperscript{87} Another is privacy and simply having the space – and the internet – to do required homework (see chapter on \textit{Income and socio-economic status}).

Finally, like many parents, undocumented parents plan their \textit{social lives} around their (young) children.\textsuperscript{88} But living in a shelter, in temporary accommodation or in low-quality housing can impact their and their children’s social life. Friends or family might not be invited over for playdates or birthdays – either out of shame of the living situation, or because they are not allowed by the shelter/accommodation. Parents might also be afraid to venture outside with their children, for fear of having their residence status verified and being apprehended, detained and deported.

There is also evidence that children in families that constantly move around from one living situation to the next – e.g. from temporary accommodation to friends to hostels – find it harder to make lasting friendships and maintain social networks.\textsuperscript{89}

Thirty-one percent of migrant children interviewed by Refugee Rights Europe in early 2018 reported having experienced police violence while living homeless in Paris. Of these, 83.3 percent said they were tear gassed, while 27.8 percent reported verbal abuse and 22.2 percent physical abuse. Seven percent had experienced violence by individual citizens, mainly verbal abuse, and one child experienced physical violence.\textsuperscript{90}

Their physical and mental health invariably suffers: 34 percent of the children seen by psychologists in the Pantin centre suffered from psycho-traumatic syndromes,\textsuperscript{91} which are exacerbated by the situation they were in. Their most-noted medical needs and conditions identified by Médecins du Monde in Paris in 2019 were Hepatitis B, incomplete vaccinations, serious dental problems and mental health issues (including anxiety, depression and post-traumatic stress).\textsuperscript{92}

\textbf{Children in informal settlements}

One must sleep somewhere and create a semblance of stability, so many homeless people who cannot access support squat houses or build makeshift, temporary shacks or set up tents to protect themselves from the elements and other hazards. These are often extremely temporary solutions, as French police regularly rase down informal settlements and evict the inhabitants, often violently and without offering any alternative place to stay.\textsuperscript{93}

Such encampments are often inhabited by (undocumented) migrants, including children. Of the 1,079 evictions that happened between 1 November 2019 and 31 October 2020, 93 percent of the encampment was inhabited partly or solely by third country nationals, and children were present in 90 percent of the evicted informal settlements.\textsuperscript{94}

\begin{itemize}
\item European Federation of National Organisations Working with the Homeless (FEANTSA), 2007, \textit{Child Homelessness in Europe - an Overview of Emerging Trends}.
\item Refugee Rights Europe, 2018, \textit{Still on the Streets: Documenting the situation for refugees and displaced people in Paris, France}.
\item Often “adjustment disorders” according to Médecins Sans Frontières. “Adjustment disorder is a mental illness that manifests itself when faced with a stressful situation that can affect active or emotional life. The most common symptoms are sadness, crying spells, suicidal thoughts, sleep disturbances, difficulty concentrating and violent behaviour.” Quote taken from Médecins sans Frontières, 2019, \textit{Les mineurs non-accompagnés: symbole d’une politique maîtrisante}, p. 24, own translation from French.
\item Médecins du Monde, 2020, \textit{Programme Mineurs Non Accompagnés (MNA) Paris}.
\item Project Play, n.d., \textit{Evictions. Practices that violate children’s rights on the Franco-British border}.
\item Médecins du Monde, 2020, \textit{Observatoire des expulsions le lieu de vie informels 2020: Note d’analyse détaillée}.
\end{itemize}

\textsuperscript{89} European Federation of National Organisations Working with the Homeless (FEANTSA), 2007, \textit{Child Homelessness in Europe - an Overview of Emerging Trends}.
\textsuperscript{90} Refugee Rights Europe, 2018, \textit{Still on the Streets: Documenting the situation for refugees and displaced people in Paris, France}.
\textsuperscript{91} Often “adjustment disorders” according to Médecins Sans Frontières. “Adjustment disorder is a mental illness that manifests itself when faced with a stressful situation that can affect active or emotional life. The most common symptoms are sadness, crying spells, suicidal thoughts, sleep disturbances, difficulty concentrating and violent behaviour.” Quote taken from Médecins sans Frontières, 2019, \textit{Les mineurs non-accompagnés: symbole d’une politique maîtrisante}, p. 24, own translation from French.
\textsuperscript{92} Médecins du Monde, 2020, \textit{Programme Mineurs Non Accompagnés (MNA) Paris}.
\textsuperscript{93} Project Play, n.d., \textit{Evictions. Practices that violate children’s rights on the Franco-British border}.
\textsuperscript{94} Médecins du Monde, 2020, \textit{Observatoire des expulsions le lieu de vie informels 2020: Note d’analyse détaillée}.
### Access to services

Although child rights are applicable to all children, irrespective of their residence status, undocumented children have limited access to many of the social services that children are legally entitled to throughout the EU. This includes access to education, access to health care and protection as a victim of crime.

While a full overview of legal and practical barriers to these services goes far beyond the scope of this publication, it is important to note some key points.

In all EU member states, it is compulsory for children to attend school for at least nine years.\(^95\) In many countries, the legislation and policy governing compulsory education refers to “all children”\(^96\) which could also then include undocumented children. Depending on the country, the implicit, rather than explicit, inclusion of undocumented children results in limitations within the education system. Undocumented children may not be able to enrol when documentation is required,\(^97\) or they may not be able to take official exams, receive certification for studies completed or undertake vocational training courses. They may also not be able to benefit from school-related financial support meant to bridge any socio-economic divide because of their residence status.

Undocumented children are also not specifically mentioned in the majority of EU member states in terms of access to (free) early childhood education and care\(^98\) – the phase before primary school – even though it is considered crucial to balance out socio-economic disparities.\(^99\) In 2010, Italian municipalities made sure undocumented children would benefit by publicly announcing they had a right to attend nursery school.\(^100\)

Laws regarding access to health care for undocumented children at the national level vary enormously across Europe.\(^101\) In the majority of EU member states, undocumented children receive health care under the same conditions as undocumented adults, with no additional protection for their situation as children.\(^102\)

While, in theory, emergency health care cannot be denied in any EU country,\(^103\) undocumented migrants might have to pay a small fee.\(^104\) And they are often excluded from more extensive health care unless they can pay the full amount. As a result, undocumented persons often do not seek emergency care, since they cannot afford it.\(^105\)

Additionally, in countries where children’s access depends on whether the care is considered ‘urgent’ or ‘essential’ and these terms are inadequately defined

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\(^95\) Some EU member states go further and require a minimum of 12 years of compulsory education. See: European Commission, 2019, *Compulsory Education in Europe*.


\(^97\) Ibid.

\(^98\) Early childhood education and care consists of two aspects: (i) Care (or childcare) services mainly intended to enable parents to work while the child’s safety and care is ensured, and (ii) early childhood education to support child development and prepare them for primary education.


\(^103\) Spencer S., Hughes V., 2015, *Outside and In: Legal entitlement to health care and education for migrants with irregular status in Europe*, COMPAS, University of Oxford.

\(^104\) For instance, in Cyprus. Written communication with PICUM member KISA (8 January 2021).

or are decided by administrative staff rather than medical professionals, their access might depend on local discretion rather than a legal entitlement.\textsuperscript{106}

This means that undocumented children’s mental and physical health may suffer due to a lack of continuous care or lack of access to specialist care, amongst others. In addition, access to free or affordable mental health care is often absent or problematic, even though children’s and parents’ mental health can greatly suffer because of the daily challenges they face as undocumented migrants.

However, some countries’ laws grant undocumented children the same level of health care as citizen children, including Cyprus, Estonia, France, Italy, Spain and Sweden.\textsuperscript{107} However, practical, financial and other barriers often exist.

Undocumented children and their parents face a myriad risks of violence by different actors, both in transit and in the communities in which they live. Being undocumented, or having a dependent status, increases the likelihood of victimisation and reduces the likelihood that victims will seek help or report abuse because of fear of immigration consequences. Undocumented people, including children, are “easy targets” for exploitation and violence, because of their residence status and, often, social isolation.

Even though they should be protected from violence, social stigma as a victim, their residence status or lacking awareness of existing procedures often prevents them from seeking protection and help. And although several countries provide residence statuses for victims of domestic violence, trafficking or labour exploitation, most countries’ approaches do not reflect a protection-oriented approach.\textsuperscript{108}

Furthermore, undocumented children and families often hesitate to reach out to service providers, including medical professionals and local police, due to fear that the immigration authorities would be informed about their presence if they seek help.\textsuperscript{109} Such practices are not allowed by the EU General Data Protection Regulation,\textsuperscript{110} and “firewalls” should be put in place to separate service provision and immigration enforcement measures.\textsuperscript{111}

Research\textsuperscript{112} in the United States on mixed-status families showed that undocumented parents are less likely to apply for social services on behalf of their (citizen) children for fear of their immigration status being uncovered. And, reversely, children were more likely to receive social services (in the research, a nutritional programme) once their undocumented mothers became eligible for the Deferred Action for Childhood Arrivals (DACA) programme, a U.S. regularisation programme.\textsuperscript{113}

**BOX 3 Promising policies and practices**

Across Europe there are governments choosing to protect the rights of undocumented children by implementing legal changes, policies and practices that are in undocumented children’s best interest. Our 2015 publication “Protecting undocumented children: Promising policies and practices from governments,” updated in 2018, groups several of these in the areas of education, health care, protection from violence and non-detention, alongside relevant policy documents at EU level.

\textsuperscript{106} See for instance Belgian Health Care Knowledge Centre, 2015, *What health care for undocumented migrants in Belgium?*

\textsuperscript{107} PICUM, 2018[2015], *Protecting undocumented children: Promising policies and practices from governments.*

\textsuperscript{108} Notable exceptions are Greece, Italy and Spain whose laws are more expansive in the crimes covered. For an overview of residence permits for victims of crime in Belgium, France, Germany, Greece, Italy, The Netherlands, Poland, Spain, Switzerland and the United Kingdom see PICUM, 2020, *Insecure Justice? Residence permits for victims of crime in Europe.*

\textsuperscript{109} In Cyprus, for instance, there have been cases of families and children being (threatened with) arrested and deported after seeking police protection or accessing health services, despite their legal entitlement to seeking out this support. Kossiva A., 2017, *National Report on Hate Crime Monitoring*, KISA – Action for Equality, Support, Antiracism.

\textsuperscript{110} PICUM, 2020, *Data Protection and the “Firewall”: Advancing the right to health for people in an irregular situation.*

\textsuperscript{111} PICUM, 2020, *Creating safe spaces, addressing health inequalities: PICUM, n.d., Why a Firewall?*


Income and socio-economic status

Children in migration are at particularly high risk of poverty and social exclusion. Even more so when they or their parents have a residence status that limits parents’ access to the labour market or when they are undocumented. However, there is little to no data on the income of undocumented households and the risk, or the level, of poverty they face. A Belgian study from 2011 amongst 170 undocumented persons showed that half had an income of less than 145 euros/month, their household income mainly came from labour and financial support from friends or family.

In another study carried out amongst undocumented families interviewed in the Netherlands, one third were completely dependent on goodwill. As a result of their irregular status, undocumented parents are not eligible for financial allowances, such as unemployment assistance or minimum income, across the EU.

Undocumented migrants who are employed experience systemic exploitation in the workplace. Due to their irregular status, undocumented migrants are hesitant to report exploitation or abuse to labour inspectors, out of fear of losing their job and having their personal data transmitted to immigration authorities. To illustrate, 21 migrant workers who were found working in a Spanish clothing warehouse in the fall of 2020 were paid two euro per hour. If they would have worked 40 hours per week – the legal maximum in Spain – that would equate to 320 euros per month, far below the monthly minimum income for ‘general workers’ of 950 euros and the newly introduced minimum income scheme of 700 euros for vulnerable families.

Income is a key social determinant of health and inextricably linked to children’s well-being and life chances: it affects the community in which they live, the quality of life, the food available to them, type of housing they live in and the sense of security they experience. For instance, in a survey of undocumented children living in The Netherlands, the children said...
they had a repetitive diet and rarely ate fruit, and could not or rarely afford decent shoes, clothing, school supplies, toys, a bike, shampoo and shower gel, or internet at home.\textsuperscript{121}

The consequences of poverty on a child’s mental health have been continuously reaffirmed.\textsuperscript{122} A child’s mental health can be affected by pressure their parents may experience (see chapter on Family life and secure attachment). This is an important concern for undocumented children and young people since they face chronic or toxic stress\textsuperscript{123} linked to growing up in an environment with poverty, debt, social isolation and uncertainty about the future.\textsuperscript{124} Furthermore, research (2019) has shown that limited parental involvement is likely to result in low self-esteem of the child, due to poor social capital that the parents have to offer. In turn, a child’s low self-esteem creates a risk factor to develop mental illness or poor academic development. Growing up in poverty, especially very early on in life, is likely to have a life-long impact on the child.\textsuperscript{125}

Experiences of toxic stress on children can lead to high risk of cardiovascular disease, cancers, asthma, and depression when they are adults.\textsuperscript{126} Being constantly preoccupied with financial problems\textsuperscript{127} can cause a drop in cognitive function, comparable to the loss of a night’s sleep.\textsuperscript{128} Research (2017) has confirmed that growing up in poverty, or experiencing poverty later on in life, influences the way people make decisions. People that live in poverty are likely to focus on their short-term (pressing) circumstances and make their decisions based on these conditions, which at times can be at the expense of long-term goals.\textsuperscript{129}

\textsuperscript{121} Kromhout M., Reijersen van Buuren A., Kloppenburg R., van Doorn L. & van Os C., 2014, Kinderen buiten beeld. Een onderszoek naar de wonen- en leefsituatie van ongedocumenteerde kinderen, Hogeschool van Utrecht, Defence for Children and Stichting LOS.

\textsuperscript{122} Vostanis P., 17 July 2015, Greek austerity may be an economic table but children are the human cost, The Conversation [checked n 18 January 2021].

\textsuperscript{123} The term ‘chronic’ stress comes from the medical world and denotes “a constant stress experienced over a prolonged period of time, (which) can contribute to long-term problems for heart and blood vessels.” The term ‘toxic stress’ comes from the Adverse Childhood Experiences research and ‘alters the developing brain and gives rise to diseases, both physical and mental. Stress hormones such as cortisol and adrenaline shut down areas of the brain as a defence against uncontrollable feelings related to fear. Toxic stress is of a different order to ordinary stress in that it is persistent and systemic, the child has no control over their situation and nothing they can do will make a difference, they are powerless to change the situation and it is a more or less permanent situation.” Source: Cunnane D., 13 March 2018, Toxic stress vs chronic stress – what is the difference?, Our Time’s views. For more information on the Adverse Childhood Experiences research, see https://www.cdc.gov/violenceprevention/aces/.

\textsuperscript{124} Low income, belonging to an ethnic minority group, single parenthood, having/being an adolescent mother and low education are considered socio-economic risk indicators in several studies. (a.o. in Cyr C., Euser E.M., Bakermans-Kranenburg M.J., Van IJzendoorn M.H., 2010, Attachment security and disorganization in maltreating and high-risk families: A series of meta analyses, Development and Psychopathology, 22, 87-108).


\textsuperscript{127} This experiment was conducted among persons facing financial problems more specifically, as opposed to other forms of poverty such as scarcity of social connections or nutrition.


BOX 4 Access to food during the COVID-19 pandemic in Spain

The COVID-19 crisis has exacerbated food insecurity for undocumented families, with many being unable to leave their homes due to lockdown measures and losing sources of income in the informal economy. The International Labour Organisation estimated that in March 2020 alone, the income of informal workers dropped by 60 per cent globally, with many making no income at all and struggling to provide for themselves. In this context, food banks constitute a crucial safety net to combat food insecurity and guarantee adequate nutrition for undocumented children.

During the first lockdown, in spring 2020, Spain saw increased policing of public space, and law enforcement levied fines and sanctions for violations of lockdown measures. Rights International Spain and Afrodescendientes gathered testimonies from undocumented residents, who described being threatened with arrest by police and told not to leave their homes under any circumstances. An undocumented person from Guinea Conakry was stopped by police, for example, while they were on their way to a food pick-up location of a local Madrilene association. Consequently, undocumented people avoided public spaces and were reluctant to request services from food banks, which were often pick-up-only.

In response to this situation, a number of self-organised volunteer-run grassroots initiatives emerged across Spain. Just days after the state of alarm was declared, the Sindicato Popular de Vendedores Ambulantes (Street Vendors Union) and the Compra Antirracista started gathering donations and distributing food items in and around the city of Barcelona to undocumented families who were confined to their homes. The Street Vendors Union was founded as a mutual support network of undocumented and formerly undocumented street vendors. In March 2020, they began gathering food donations and distributing directly to undocumented families’ homes. In the absence of government services available to undocumented families, the Street Vendors Union reached more than 300 families through door-to-door food deliveries in the cities of Barcelona, Sabadell, Terrassa and Badalona. In parallel, the project Compra Antirracista provided food parcels to 3,000 undocumented persons across the country, 20 percent of which were children and 10 percent of which were unaccompanied children who had recently turned 18 years old.

Residence procedures and immigration enforcement, including detention

A child’s or family’s residence status not only impacts the services they can access and the life choices available to them; lack of a secure residence status also means that they interact with the migration management system on a regular basis. Migration procedures and migration enforcement tools, like detention, are part of their lives, if not their fears. As the migration management system deals heavily with children, families and young people, it is important to look at how their interaction with this system affects them.

130 International Labour Organisation, 2020, ILO: As job losses escalate, nearly half of global workforce at risk of losing livelihoods.
132 La Vanguardia, 17 March 2020, El (aún más) duro confinamiento de las personas sin papeles [checked on 14 December 2020].
133 Sindicato Popular de Vendedores Ambulantes de Barcelona.
134 Compra Antirracista.
137 Figures were gathered during an interview conducted by PICUM with Safia Elaaddam, Founder of the food distribution project, on 12 December 2020. Written confirmation on 15 December 2020.
Long, complex and potentially traumatic procedures

Unaccompanied children have a high level of interaction with immigration authorities. Assisted by their guardian and lawyer, unaccompanied children are interviewed in the frame of residence procedures and should be directly informed of any procedural steps and decisions taken in ongoing residence procedures. The many government guidelines on interviewing, interacting and protecting unaccompanied minors reflects this high degree of contact with immigration authorities (as well as their situation of vulnerability).¹³⁹

However, the degree to which some children in families interact with immigration authorities should not be underestimated. When parents do not know the country’s language, but their school-age children do, the children are tasked with translating letters for their parents or accompanying them during residence permit interviews, visits to the family’s lawyer, social and health services etc. Such scenarios are also commonplace when the family does not have a trusted social worker to assist them or when interpreters are unavailable.

Being the family’s guide or interpreter can make a child feel like they contribute to their family’s survival, but it can also put them in harm’s way. They may hear their parents testify of their traumatic experiences, witness their parents in distress and/or be forced to be the messenger of very difficult news: a negative decision concerning a request for protection or other status or an order to leave the territory.

It can also create a role reversal within families, with children taking on responsibility that is usually a parent’s role. Role reversal is not unique to undocumented families, or even migrant families, and has been seen across the globe,¹⁴⁰ but it can have detrimental effects if too much is expected of a child (see chapter on Family life and secure attachment).

Migration procedures themselves can be traumatic experiences. Continued exposure to past traumatic events, including recounting them, can retraumatize¹⁴¹ people, and undocumented people may have no choice but to recount past experiences in order to regularize their residence status. This is the case in asylum applications, regularization procedures on medical or humanitarian grounds, procedures for victims of trafficking or crime and the related appeals procedures. While decisions in migration procedures need to be based on facts and people need to be heard, it is also crucial to determine how detrimental effects on mental health can be mitigated.

Going through residence procedures is a nerve-wracking experience. As Nishta, a young undocumented woman put it, “Someone somewhere is making a decision about my life right now. And it scares me to death knowing the decision could be negative.”¹⁴² It is a time of stress, hope and anticipation. It is also an in-between time, when plans cannot truly be made

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“When something reminds traumatized people of the past, their right brain reacts as if the traumatic event were happening in the present. But because their left brain is not working very well [has been overpowered by the emotions] they may not be aware that they are re-experiencing and re-enacting the past – they are just furious, terrified, enraged, ashamed, or frozen. After the emotional storm passes, they may look for something or somebody to blame for it.” (p.45).

¹４２ PICUM, 2016, Hear our Voices: Undocumented Children and Young People Share their Stories.
and the future cannot really be imagined or built. The longer the in-between time of instability endures, the heavier the weight for children and adults alike.

The immediate mental health impact of a negative decision is significant. An analysis of 16,095 migrants, including refugees, asylum seekers, unaccompanied children and undocumented migrants, who underwent a health check by the French organisation Comede\(^{143}\), between 2007 and 2016, found people’s mental health greatly deteriorated the moment they became undocumented. According to the data, undocumented migrants most often suffered from psycho-traumatic disorders, depression, concentration, attention and/or memory problems, and suicidal ideation.\(^{144}\)

**BOX 5  Children with resignation syndrome in Sweden**

Children’s reaction to seeing their residence permit request denied can be extreme, exemplified by uppgivenhetssyndrom, also called resignation syndrome or traumatic withdrawal syndrome. The syndrome, which was first observed in the 1990s in Sweden, is thought to be an extreme and life-threatening stress reaction to two traumas: harassment in the children’s country of origin, and the dread, after acclimating to Swedish society, of returning following a negative residence application.

While the children who suffer from resignation syndrome have no underlying physical or neurological disease, they progressively withdraw from their surroundings until they become completely apathetic, sometimes for years. They are totally passive, immobile, lack muscle tonus, are withdrawn, mute, unable to eat and drink, incontinent and do not react to physical stimuli or pain. They need to be fed through tubes to be kept alive.\(^{145}\) “It is a form of protection, this coma they are in,” a doctor told The New Yorker.\(^{146}\)

A secure residence status is thought to be key to resolving resignation syndrome: a 2013 guide for treating uppgivenhetssyndrom by Sweden’s National Board of Health and Welfare advised that a patient would not recover until their family has permission to live in Sweden.\(^{147}\)

By 2005, more than four hundred cases of uppgivenhetssyndrom, mostly children between the ages of eight and fifteen, had been recorded.\(^{148}\) In 2014, the government started registering cases under a dedicated diagnostic code, creating more transparency. Between 2014 and 2016, nearly 300 children with resignation syndrome were cared for, according to the National Board of Health and Welfare.\(^{149}\)

Although there seems to be a concentration of cases in Sweden, resignation syndrome has also been observed elsewhere, including recently in Australia’s detention centre on Nauru.\(^{150}\)

**Impact of immigration detention**

Immigration detention is a migration management tool that harms the adults and children it affects.\(^{151}\) One study of formerly detained children in the UK, for example, reported symptoms of depression and anxiety, sleep problems, somatic complaints, poor appetite, emotional symptoms, and behavioural difficulties, all of which seemed to have appeared since the detention began.\(^{152}\) These findings are no exception: a systematic review of 26 studies on the

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143 COMEDE, n.d. *Présentation*.
146 The New Yorker, 27 March 2017, *The Trauma of Facing Deportation* [checked on 29 December 2020].
147 Mentioned in The New Yorker, 27 March 2017, *The Trauma of Facing Deportation* [checked on 29 December 2020].
148 The New Yorker, 27 March 2017, *The Trauma of Facing Deportation* [checked on 29 December 2020].
149 Socialstyrelsen, n.d., *Uppgivenhetssyndrom bland asylsökande barn*.
150 The Economist, 24 October 2018, *What is resignation syndrome?* [checked on 29 December 2020].

mental health consequences of immigration detention indicated that detained adults, adolescents and children experienced higher levels of mental health problems than their non-detained peers, with anxiety, depression and post-traumatic stress disorder being most reported both during and following detention. The longer they were detained, the more they suffered.153

In addition to the distress associated with detention, children in immigration detention in many EU countries lack access to formal education, child-specific care and support and appropriate health services, and face restrictions on their enjoyment of family life and play – all of which are important to a child’s development.154

A central reason for the harm of detention is the lack of agency the children and their parents have. Detention is, in its most simple form, depriving someone of their mobility and freedom by forcibly keeping them in one place, in this case a detention centre, hotspot or police station. This is very likely traumatic in itself because “being able to move and do something to protect oneself is a critical factor in determining whether or not a horrible experience will have long-lasting scars.”155 Immobilization is at the root of many traumas, and it is the essence of immigration detention.

This is why the UN Committees on the Rights of the Child and on the Protection of the Rights of All Migrant Workers and Members of Their Families, as well as other experts,156 have repeatedly stated that detention of any child because of their or their parents’ migration status constitutes a child rights violation, contravenes the principle of the best interests of the child and that children should never be detained for reasons related to their or their parents’ migration status.157

**Fear of the police and the spill-over effect of repressive policies**

Undocumented children and young adults worry about their status and are afraid of being found out. They are, very often, afraid of the police because they fear they might be detained and deported. It affects their everyday life, as two young people attest:

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156 Among others: Health Professionals Against Immigration Detention, 2016, *Open letter from health professionals against immigration detention*, The Lancet, 388 (10059), 2473-2474 and in by the EU Court on Human Rights (Popov v. France App no 39472/07 and 39474/07 (ECHR, 19 January 2012); Muskhadzhieva and Others v. Belgium App no 41442/07 (ECHR 19 January 2010); Kanagaratnam and Others v. Belgium App no 15297/09 (ECHR 13 December 2011)). For more information on child detention see PICUM, 2019, *Child Immigration Detention in the EU*.

157 UN Committee on the Protection of the Rights of All Migrant Workers and Members of their Families, 2017, *Joint general comment No. 4 (2017) of the Committee on the Protection of the Rights of All Migrant Workers and Members of Their Families and No. 23 (2017) of the Committee on the Rights of the Child on State obligations regarding the human rights of children in the context of international migration in countries of origin, transit, destination and return*, paragraph 5 and following.


“I often think about the police. When I walk down the street. When I am at my internship. Even when I am at home. Maybe the police will just come in, you can’t know. When I see the police walking by, I get scared. I usually start shaking. Then I try to walk fast. Then I think... ‘if they look at me they will catch me’. So I try to walk as fast as possible.” – young woman, The Netherlands. 162

“We hardly go out (…) I don’t want to take the risk to go out. I stay at home basically... Here... If you get lost, you won’t be able to ask the police for help; you can’t tell them what’s happening.” – young man, UK 163

Extremely young children are affected as well. Research in the U.S. has shown that migrant children as young as three are acutely aware of anti-immigrant sentiment and policies, irrespective of their own residence status.164 For instance, one Trump-era study found that children feared that parents would be taken away and that the children showed disturbing new behaviour, including increased aggression, separation anxiety, and withdrawal from their environment. And “(…) because young children can’t understand the details of immigration policy—and may not even know their parent’s immigration status— (…) children feared the worst based on what they hear around them.”165 Obama-era research166 came to the same conclusion: interviews with 80 Mexican immigrant families showed that regardless of their residence status or their family members’ involvement with immigration authorities, the children described fear about their family stability (fearing that the family might be torn apart by having part of it detained or deported). They also confused immigration with illegality, irrespective of their own residence status.167

Although migration enforcement policies do not have to go hand in hand with anti-immigrant rhetoric, we do see a rise in such rhetoric in some European countries,168 which can lead to fear and confusion within migrant communities.

**School life and feeling supported**

For undocumented children, their school life can be of huge importance to ensure strong social relations with their community and a social safety net in case the children themselves, or even their family, face difficulties. While integration in their school environment comes with challenges, such as language barriers and cultural differences, the required social skills to overcome such barriers are valuable life skills that are developed by both the undocumented child as well as their peers and teachers.169

**The role of school life**

A child’s school experience170 is formative beyond the purely educational, because schools serve both as social microcosms of the broader society and reciprocally influence the people and communities around them.171 For undocumented parents and their children, school is most often the place where they can be without the fear and social stigma associated to their status and where children can be children first.

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165 Ibid., p.3
168 Infomigrants, 1 February 2019, UN warns of increased anti-immigrant rhetoric. [checked on 18 January 2021].
169 A study conducted by Manzoni and Rolfe (2019), which explores ways in which UK schools try to integrate EU as well as non-EU migrant children into their school community, addresses both the challenges and opportunities in this context. For example, teacher and school principles that were enrolled in the research emphasized the positive contribution that migrant children and their families make to the school community, thereby referring to the facilitated exposure to different languages and cultures. See Manzoni C., Rolfe H., 2019, How schools are integrating new migrant pupils and their families.
170 As a reminder, undocumented children have access to formal education in most if not all European countries, because they are explicitly or implicitly included in the relevant legal framework. Sources: European Union Agency for Fundamental Rights, 2011, Fundamental rights of migrants in an irregular situation in the European Union and PICUM, 2018 (2015), Protecting undocumented children: Promising policies and practices from governments.
It should be noted, however, that research conducted in the United States suggests that if migrant children observe or experience discriminatory behaviour in their school environment, this is likely to enhance their stress levels and affect their academic behaviour.¹⁷²

Schools should be a safe haven but they may not be. There are reports of arrests of undocumented families at schools in Cyprus, for instance, sometimes after school staff had informed the police about the child’s enrolment.¹⁷³ It should be noted however, that other countries, like Belgium, protect children from exactly this practice by issuing guidelines for schools to enable children to register regardless of their irregular migration status and to police to ensure no arrest can happen on or close to schools.¹⁷⁴

The school environment can be particularly supportive for undocumented children and can function as a mediator for children to find their way in a new social and cultural environment, where they are likely to be surrounded by a different language than at home. Undocumented children have individualised social and emotional needs, for example due to experiences during migration. Furthermore, even when children are accompanied by their parents, they too are likely to have social and emotional needs and may feel overwhelmed by their circumstances. Hence, where parents are unable to fully address the social and emotional needs of their children, school can play a particularly important part in fulfilling this role.¹⁷⁵

The school life of undocumented children can provide a social safety net, which functions as a protective layer throughout their childhood and adolescence. Social connections with classmates and school staff can be of great support to an undocumented child.¹⁷⁶

A Dutch study (2014) confirms that the majority of undocumented children involved in the study greatly appreciated the support of their teachers. Teachers would support them with their school work and other school-related issues, like bullying, but would also be involved, for example, when household finances prohibited undocumented children from participating in school activities.¹⁷⁷ However, if undocumented children do not find this support in their school environment, possibly due to a lack of integration programmes or supporting mechanisms, children may actually drop out of school.¹⁷⁸

**Transitioning in and out of school life**

When addressing the issue of school life in an undocumented child’s life, it is important that this includes all school-related aspects until the age of 18. For instance, access to early childhood education and care precedes the formal education system and is very important for a child’s development. This was found to be particularly the case for children from socially and economically disadvantaged backgrounds to address inequality and challenges through early intervention. However, undocumented families often experience legal, financial and administrative difficulties in accessing early years education for their children.

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¹⁷³ Written communication with PICUM member KISA (8 January 2021).


¹⁷⁶ In the Netherlands there have been various instances where schools would be involved in a petition or protest to stop the return of an undocumented child from their school community. See among others Omroep Brabant, 20 January 2015, *Protestmars leerlingen Het Baken Werkendam tegen uitzetting 7-jarig klasgenootje Steve* [checked on 18 January 2021]; NH Media, 24 February 2012, *School Alkmaar strijdt tegen uitzetting leerling* [checked on 18 January 2021] and Petites NL, n.d., *Lily en Howick mogen niet worden uitgezet* [checked on 18 January 2021].


Similarly, towards the end of a child's schooling, gaining work experience through internships poses challenges as well. Internships and vocational training may be part of the secondary education an undocumented child has chosen, but impossible to do because of their residence status. They may be required to provide identity documents or a social security number, and will have no right to work due to their irregular status.179

**A false start**

Before a child even starts their formal education, various predetermined factors will arguably already influence a child’s performance. Children raised in poverty are likely to already have a disadvantage in the formal education system when starting their education.180 And as we saw previously, unstable or insecure housing conditions can also affect a child’s school performance with homeless children having lower levels of academic achievement than their peers that cannot be explained by differences in ability.181

As undocumented children are more likely to be raised in poverty (see chapter on *income and socio-economic status*), this false start should be considered when analysing the impact of a child’s undocumented status on their education experience and the role of school during their childhood development. A 2018 study on living circumstances of undocumented children in Amsterdam, The Netherlands, confirmed that not all undocumented children attend school. Based on a questionnaire distributed in a local primary care clinic for undocumented persons, 11 percent of the children of the undocumented adult patients that visited the clinic did not attend school at that moment.182 Furthermore, a German study (2015) found that in 62 percent of the primary schools investigated, enrolment of undocumented children was found to be impossible.183

**Considerations about undocumented school-going children**

A study which explores ways in which schools in the UK try to integrate EU as well as non-EU migrant children into their school community, addresses both the challenges and opportunities in this context.184 For example, teacher and school principals enrolled in the research emphasized the positive contribution that migrant children and their families make to the school community, thereby referring to the facilitated exposure to different languages and cultures.

However, the study also addressed the particular challenges that migrant children face, including language barriers and obligations linked to residence procedures. For example, a teacher addressed the fact that children would be absent due to visa renewals.185 A primary school teacher explained that “if they’ve got to go away and renew visas there’s nothing we can do about it because they’ve got to do that and some of our parents have to do it every six months because of their government and to make sure they can study.”186 Hence, in these circumstances, ignoring such an obligation would result in an irregular migration status while compliance causes absences from obligatory classes and learning opportunities.

Undocumented parents who are trying to regularise their stay face the same conundrum, with school-age children often having to accompany their parents to

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179 For example, see The New York Times, 22 June 2011, *My Life as an Undocumented Immigrant* [checked on 18 January 2021]. Some countries, like France, have developed policies that enable all children to do internships or vocational training. See PICUM, 2018[2015], *Protecting undocumented children: Promising policies and practices from governments.*


185 Manzoni C., Rolfe H., 2019, *How schools are integrating new migrant pupils and their families,* National Institute of Economic and Social Research.

186 Ibid., p. 22.
lawyers or interviews if the parents do not speak the language fluently and cannot be accompanied by a social worker, interpreter or trusted family friend.

A different school-related factor that is easily overlooked is the financial pressure on families with limited income (including undocumented families) during school holidays, and particularly during the summer break. Holidays come with additional costs because lunch meals and leisure activities that are usually covered at school now need to be covered by the parents on top of the usual household expenses. A child’s mental health may worsen due to the increased financial pressure experienced by their family, also due to less positive experiences during the holiday period. Additionally, economically-precarious children may also be more likely to experience “learning loss” over the holidays, meaning that they will need more time to catch up when reconvening school.

Moreover, when early childhood education and care, like day care facilities, is inaccessible to undocumented parents and children, children may be required to stay home alone during the holiday, possibly to take care of younger siblings or be taken care of by unlicensed child minders while their parents work. This can especially be the case if they belong to a single-parent household.

The school environment functions as a mediating factor in their life, while children try to navigate other challenging elements in their day-to-day life. Enabling undocumented children access to education, including early childhood education and care as well as extracurricular activities and internships, is therefore key to address the child’s resilience to work towards a safe and secure future.

### Family life and secure attachment

Children who grow up in a warm, loving family, with secure attachment to their primary caregiver, will be able to use this experience as a strong foundation for success and resilience later in life. Especially for undocumented children, such an experience while growing up can arguably mitigate the impact of other elements in their life.

### Life-time benefits of a strong parent-child relationship

Psychiatrist John Bowlby introduced his attachment theory back in the 1960s, arguing that children are born with a natural need to attach to one main caregiver, especially during their first two years of life. Among children, this attachment will present itself for example in seeking proximity to their close figure (i.e. a parent, guardian or other family member) when feeling upset or threatened, expressed through signals such as crying. It should be noted that Bowlby’s attachment theory is based on the idea of reliance on the nuclear family only, while migrant families may live across borders, whereby extended family may be involved to fulfil the role of caregiver, as is the case for separated children.

Subsequent research confirmed similar findings to Bowlby’s work, stating that a deeper attachment between the child and the caregiver is likely to let the

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187 Morgan K., Moore G., 4 April 2019, Poorer children’s summer holiday experiences linked with worse mental well-being. The Conversation [checked on 18 January 2021].


190 This study surveyed 283 children between the ages of 14 and 17 years old. See Refugee Rights Europe, 2018, Still on the streets – documenting the situation for refugees and displaced people in Paris, France.


child develop healthy coping mechanisms. However, a child will become attached to whomever is their primary caregiver, so the quality and nature of that attachment will greatly influence the course of a child’s life.\(^{193}\) If a child feels loved and safe, their brain will train itself in exploration, play and cooperation skills.\(^{194}\) Experiencing love and safety also protects the child's mental health, as social support has been proven to be the most effective protection mechanism against trauma and stress.\(^{195}\)

**Impact of undocumented status on family dynamics**

The challenges that parents are faced with when migrating to another country come with a set of external demands that are likely to undermine their parental role. These so-called 'acculturative stressors' are known to interfere with family unity.\(^{196}\) Parents may be occupied by urgent problems and challenges such as trying to secure income, to manage day-to-day activities with an irregular status or experiencing discrimination, making themselves less available for interaction with their children. In turn, the withdrawal of attention can cause stress with the child since their primary source of comfort and consolation feels absent. Exposure to such situations of chronic stress can cause the development of attachment disorders among children, at a rate that is comparable to the development of attachment disorders among children that become victims of abuse.\(^{197}\)

Most parents try their very best for their children, but children in chronically stressed families may be more likely to experience less warmth from their parents because the latter are preoccupied by their family’s survival or more harsh treatment,\(^{198}\) resulting in higher levels of cortisol,\(^{199}\) which can cause the development of physical and behavioural problems like anxiety and depression.\(^{200}\)
**Impact of family separation**

Family separation can happen in undocumented families due to migration law enforcement measures (e.g. immigration detention) or as a result of their decision to migrate separately. In the context of immigration detention, family separation can occur if one or both parents are detained while the children are put in alternative care facilities, or if the children continue to live in the community with the non-detained parent. Whatever the reason for the separation, Bowlby argued that long-term deprivation of a child from their primary caregiver is likely to cause cognitive, emotional and social damages, such as depression and aggression.\(^{201}\)

A study conducted in 2002 assessed the impact of family separation on immigrant families in the United States. Children who had been separated from their parents were more likely to report symptoms of depression than children who were not separated.\(^{202}\)

**Role reversal**

In some families, a change in parent-child role relations occurs, with children taking up roles that are usually filled by parents. This role reversal, or parentification, is not unique to undocumented families or immigrant families, but it has often been seen in some degree or another in migrant families, including those living in reception facilities.

Role reversal stems, amongst others, from the fact that parents lose some of their agency to take up the six parenting roles of "nurturer (responding to a child's physiological needs), protector (keeping the child safe), lover in a filial sense (having intense affection for the child), guide and teacher (teaching a child about how the world works), designer (designing and mediating the child's environment), and spiritual model (offering an example of spirituality)."\(^{203}\) For undocumented parents, role reversal can be caused by the new, unknown cultural norms, not knowing the local language well enough or at all, financial difficulties, previous trauma, living in an institution or detention centre where others create the structure and make decisions for them, etc.

This change in parent-child role relations does not have to be detrimental, but it can be. It can adversely affect the child’s socio-emotional development if the demands placed on them exceed their capacity to comply and increase the risk of mental health disorders. However, shouldering family responsibilities that are within the developmental capacities of the child may lead to increased self-efficacy and competence.\(^{204}\)

Whether the child can handle the tasks they are given, it is essential for service providers, case workers and social workers to support (undocumented) parents in their role as parents.

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CONCLUSION: NAVIGATING IRREGULARITY AND FINDING DURABLE SOLUTIONS

While every undocumented child’s experience and life is unique, many have lived through several potentially traumatic events. These can include living in a family that might not be able to make ends meet, moving often and thus having to change schools, being homeless or inadequately housed, going through long and complicated migration procedures, as well as losing nurturing relationships with the ones around them.

An important mitigating factor when experiencing potentially traumatic events is agency: “being able to move and do something to protect oneself is a critical factor in determining whether or not a horrible experience will leave long-lasting scars.” But because they are children, and because as migrants they are mostly dependent on decisions made by others, their agency is more limited.

The significance of experiencing trauma cannot be understated: “After trauma the world becomes sharply divided between those who know and those who don’t. People who have not shared the traumatic experience cannot be trusted, because they can’t understand it.” That may include service providers who want to help undocumented children, immigration officials who may interview them during residence procedures and anyone they encounter.

While undocumented children and young people are remarkably resilient given enough protective and mediating factors, society stacks the odds against them. Irregular or insecure residence status does not provide children with the safe and secure foundation they need. As one teenager put it, “Undocumented people do not live happy lives.” The fact that many undocumented children grow up to be intelligent and responsible young people and adults who want to contribute to the communities they live in speaks to their own resilience and their parents’ parenting skills.

However, a life without secure residence status remains a life of constraints and limitations. Undocumented children and young people cannot reach their full potential until they regularise their residence status. This is why it’s important for national governments to develop and integrate best interests procedures in their migration law that result in a durable solution that is in the best interests of the child (see box 7). However, children and young people should also have full access to services and support as well as to in-country residence procedures and regularisation mechanisms based on child’s rights.

206 For instance, immigration officials, but also landlords, social service providers, etc.
When decisions concerning migrant children's futures are made, the focus should be on creating the environment for them to have their rights as children protected and to reach their full potential. This may mean one of three durable solutions:

- integration in the country where they have been living,
- integration in the country of (their parent's) origin or
- integration in a third country, for instance to reunite an unaccompanied child with their parents.

A secure residence status is the basis of all three solutions.

Nonetheless, the majority of migration decisions are currently made without duly considering the impacts of the decisions on the child concerned, nor whether the decisions are made in that child's best interests. This puts the child’s well-being and future at risk and violates their rights as children.

Together with Unicef, IOM, UN Human Rights, Save the Children, ECRE and Child Circle, PICUM developed guidance on what a best interests procedure should look like, how a durable solution can be found and what safeguards should be in place when a return is deemed in the child's best interest. Please visit [www.picum.org/durable-solutions](http://www.picum.org/durable-solutions) for all resources.
RECOMMENDATIONS

The following recommendations are to governments who develop policies impacting undocumented children on the local, national, regional as well as global levels:

1. **Residence procedures, including best interests procedures:**
   - Develop and integrate best interests procedures in national migration law that result in a durable solution that is in the best interests of the child.
   - As long as best interests procedures are not fully implemented at the national level, ensure that children and young people have access to in-country residence procedures and regularisation mechanisms based on child rights.

2. **Integration and access to services, including education:**
   - Ensure that children have full access to services irrespective of residence status including free or affordable preventive healthcare and mental health care.
   - Analyse and mitigate the practical, financial and administrative barriers that prevent undocumented children and families from accessing services.
   - Ensure a firewall (a clear separation of roles) is in place between service providers and migration authorities so that undocumented children and their parents do not fear accessing the support they need.

3. **Poverty reduction:**
   - Ensure that initiatives and services aimed at combating poverty take into account and target undocumented children and parents.
   - Protect working parents from exploitation, including low pay, by addressing gaps in labour law coverage and making explicit the social inclusion of all workers, regardless of status.

4. **Participation:**
   - Consult (formerly) undocumented children, young people and parents when developing new policies and practices, including migration procedures, that will impact undocumented children.
   - Actively seek to understand how policies and practices impact undocumented children and families.

5. **Protection from violence:**
   - Evaluate and reform policies and practices that might harm undocumented children and their families, including immigration detention, family separation, forced homelessness, malnutrition, and social isolation.
   - Do not criminalize humanitarian assistance to undocumented children and adults.
   - Inform undocumented adults and children, and raise awareness with service providers, of the rights of undocumented migrants and existing child protection policies, adapting the form to the relevant target audience.
   - For local governments, support the formal and informal support networks that surround undocumented children and families, as these can help mitigate the negative consequences of their undocumented status.