Precarious care and (dis)connections: Adults working with separated child migrants in England and their understandings of care

Keywords: unaccompanied minors, separated child migrants, children’s services, care, care relationships

Abstract

Adult stakeholders who work with separated child migrants face a substantial challenge to their capacity or remit to care amid increasingly hostile immigration environments. This paper explores a diverse range of adult stakeholders’ understandings of the care of separated child migrants, filling an important gap in understanding how care is conceptualised by those working in often complex and contradictory positions. Drawing on the care literature, this study focuses on fifteen qualitative semi-structured interviews with state and non-state adult stakeholders in England (e.g. social work, law, police, NGO workers). We argue that stringent immigration practices, policies, bureaucracy and structural challenges undoubtedly present personal tensions and professional constraints for those whose role is meant to foreground ‘care.’ Importantly, when taking into account a range of different perspectives, roles and responsibilities across professions and sectors, our respondents were constrained in varying ways or had varying room to manoeuvre within their institutional contexts. Our analysis suggests that amid a hostile immigration environment, care connections with and between separated child migrants are treated with mistrust and are unstable over space and time. We argue that how care is conceptualised and experienced is mutually constituted by hostile policies and procedures, adult stakeholders’ roles within or out-with those systems, and their personal values and perspectives. It is within this space where constraints, enablers and resistances play out.
Care is subjectively experienced and care relationships are open to potential (dis)connection across space and time.

**Short impact statement in plain English**
The aim of this study was to explore understandings of care relationships and caring practices with a range of adult stakeholders who encounter separated child migrants, either directly or indirectly, as part of their work or volunteer role. We explored their views on care, including children’s care for each other. Our study aligned with United Nations sustainable goals of promoting wellbeing of all ages and reducing inequality. Our findings suggest that adults working in these roles are constrained in various way by working within a hostile immigration environment. However, our respondents were constrained in varying ways or had varying room to manoeuvre within the system.

1.1 Introduction

The aim of this study was to explore understandings of care relationships and caring practices with a range of adult stakeholders who encounter separated child migrants, either directly or indirectly, as part of their work or volunteer role. We follow Bhabha and Young (1999) in defining separated child migrants (SCM) as children (under 18 years of age), who have migrated internationally without their parents or primary adult guardian. They include children who have travelled on their own or who been accompanied by non-kin adults and other children. In legal and policy contexts these children are usually referred to as unaccompanied minors. Adult stakeholders who work with separated child migrants face a substantial challenge to their capacity or remit to care in an increasingly hostile immigration environment and vulnerable children are being failed by a system that has an obligation to ‘care’ (Gupta, 2019; Humphris & Sigona, 2019; Stalford, 2018). If separated child migrants make themselves known to the authorities, they encounter a wide range of professional adults and frontline staff, such as social workers, border force and other law enforcement, immigration lawyers, foster carers, government officials, health care professionals and education staff. It has been well-documented, usually from the perspective of social workers, how challenging it is for adult stakeholders to deliver caring practices within the wider context of a hostile immigrant environment
However, less work has been done to explore the perspectives of a range of diverse adult stakeholders with a view to exploring how they understand care in relation to their own practice. This is important because statutory care responsibilities are provided through a host of policy measures by state and non-state actors. Its successes and failures cannot be understood without attention to this complex terrain. This paper reports on a small qualitative case study analysis of a range of stakeholders’ perspectives (e.g. law, border force, social work) of the care of separated child migrants living in England, filling an important gap in understandings of how care is conceptualised by those working in often complex and contradictory positions. Care, as an intervention delivered by the State, has been described as a delicate balance between providing support and maintaining control over resources (Wright, 2014). Some stakeholders operate under the pressure of stringent immigration regimes, procedures and practices (Clayton & Willis, 2019). ‘Care’ is ambiguous in this context because children may receive care because of their ‘child’ status or be excluded from provision because of their ‘migrant’ status (De Graeve, 2015).

1.2 Care in a hostile environment

By the end of 2015 it was estimated that 31 million children were living outside their country of birth and of that number, 11 million were child refugees or asylum-seekers (Unicef, 2016). By the end of 2018 this was said to have increased to 13 million child refugees displaced by war or conflict (You et al., 2020). Some of the most vulnerable children are those migrating without primary carers. Whilst children are protected under the United Nations Convention of the Rights of the Children (UN General Assembly Convention on the Rights of the Child, 1989) there are still significant barriers to separated child migrants in terms of entering into the UK and then seeking to access welfare and asylum systems. As we report elsewhere, England has taken-in very few separated child migrants AUTHORS (Online first) and there are limited safe, legalised routes through which separated children can come to the UK, and so they continue to risk their lives doing so.
It has been persuasively argued that when separated child migrants enter the UK they do so under an increasingly ‘hostile environment’ engendered through the England’s immigration regime. Yeo (2018) explains that the ‘hostile environment’ is a package of measures that are made to make life difficult for migrants to seek to enter and stay in the England. Built on legislature, administrative strategies and political discourse developed by the Immigration Act of 2014 and 2016, the origins of the phrase ‘hostile environment’ began in an interview with Teresa May (2012) for The Telegraph, wherein she is quoted as saying ”The aim is to create here in Britain a really hostile environment for illegal migration”. In effect, the ‘hostile environment’ seeks to reduce migrant entitlements and reduce the purported pull factors that might encourage migrants to come to the England, through cuts to legal aid, housing, work and mixed relationships. Importantly, practices of brokering within the hostile environment having been increasingly passed over to ordinary citizens (e.g. health workers, landlords) and professionals working with young people (e.g. social workers, foster carers). The hostile environment was famously emblematised by the ‘Go Home’ vans telling illegal immigrants to leave the country, which were driven around London in areas of highly immigration and reportedly approved by Teresa May (Elgot, 2018). Though largely aimed at adult refugees, children are not exempt from these hostilities. More importantly, we argue in this paper that migration and care are tightly interwoven (Williams, 2010).

For separated child migrants, these immigration hostilities have led to tightened control through stringent age assessments, adversarial approaches to assessing children’s migration history (Stalford, 2018) and increases in surveillance of young people through data monitoring and sharing between the Department for Education and the Home Office⁴, enabling the Home Office to have access to

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⁴ The Department for Education is a ministerial department who claims to be responsible for ensuring ‘world-class education, training and care for everyone, whatever their background’. The Home Office is the ministerial department seeks to keep citizens safe and the country secure, including securing UK border and controlling immigration.
data about children for the purposes of removal (Brittle, 2020). Research also highlights how a framing of separated child migrants as an expensive ‘burden’ and less deserving than citizen children, takes precedence over care principles. Children become a point of contention, rather than care, as some Local Authority’s attempt to restrict the numbers of children on their books by moving them out-of-county, thereby disrupting consistency in care (Humphris & Sigona, 2019). More recently, the current Home Secretary, Priti Patel, was accused of targeting child asylum seekers in a letter urging Local Authorities to contest the age of unaccompanied asylum-seeking children whenever possible, even extending an offer to cover legal fees if age assessments are disputed. The Home Office was also criticised for releasing a video which labelled immigration lawyers as ‘activists’, arguably a political discourse that creates a tension between professionals, the Home Office and migrant children.

This wider context arguably makes it harder for a diverse range of adult stakeholders to undertake their day-to-day care practices. Care professionals are increasingly being drawn into acting as border guards rather than agents of care (Kohli, 2006). Whilst separated child migrants should be afforded the same protections and humanitarian assistance as ‘citizen’ children who are looked after by the state, in practice, evidence suggests that separated child migrants’ needs are often reframed in ‘othered’ ways. For example, separated child migrants in many countries are framed as being more ‘mature’ because of their immigration experiences (Crawley, 2011) or disbelieved about their age (Aynsley-Green et al., 2012; Crawley, 2007) and in turn, given less support for their complex medical and mental health needs (Elaine Chase, Rezaie, & Zada, 2019; Derluyn, 2018). They repeatedly encounter a ‘culture of disbelief’ surrounding their pre-migration circumstances (S. Pearce, 2014) and so care practices, such as sending family remittances, may be treated with suspicion (Heidbrink, 2014; AUTHORS Online first). Professionals may also be influenced by media representations of asylum-seekers which paint separated child migrants in a stigmatising light (AUTHORS 2018). Certainly, migrant children who travel alone have detailed in previous research that they feel
categorised as ‘undeserving’ (De Graeve, 2015). Importantly, teams that are dedicated to working with asylum seekers report feeling stigmatised by others in their profession (Sales & Hek, 2004).

1.3 Exploring the concept of ‘care’ in the context of lone child migration

In the previous section we have argued that care is a complex, situated and multifaceted phenomena, particularly when looking at the lives of separated child migrants. In expanding on the conceptualisation of care here, we argue that much can be gained in psychology by making explicit what is meant by ‘care’ and developing deeper conceptualisations of care. With respect to this study, there are several key facets of the care literature that are pertinent. The first is that care is best thought of as a practice that involves thought and action (Tronto, 1993) as well as an emotional connection (Milligan & Wiles, 2010). In the case of adult stakeholders caring for separated child migrants, there is evidence that care actions are constrained because of the complex limitations laid down by wider immigration regimes, policies and procedures and the roles and personal values of individuals who work within and out-of official systems. Yet it is also argued, that emotional commitment is a core feature of the care practices that work well, particularly for foster carers (Sirriyeh & Ní Raghallaigh, 2018).

Another area where the care literature provides significant insight is in the proposition that care relationships and practices are not static, but subject to change across space and time (Bowlby, 2012), as well as classed and racialised imaginaries (Bowlby, 2012; De Graeve, 2015; Raghuram, Madge, & Noxolo, 2009; Sarah Scuzzarello, 2015). For example, theorisations of care concerning children, particularly within psychology, are usually familial (for example, as a strong thread through attachment theory) or that care relationships between adults and children will be of long duration (e.g. spanning across a lifetime or even generations) (see Hollway, 2007). Travelling without kin is a
key characteristic of the migration journey for separated child migrants and children’s care of each other might take precedence over the care received from adults (AUTHORS online first).

It has been well documented that separated child migrants simultaneously spend long periods of times waiting for asylum assessments, where the ebb and flow of care relationships are open to potential connection and disconnection. Simultaneously, separated child migrants live with a sense of finiteness, conscious that asylum claims may be turned down when the young people turn eighteen years of age (Allsopp, Chase, & Mitchell, 2014; Kenny & Loughry, 2018; Kohli & Kaukko, 2017; Wade, 2019). In this paper we emphasise the point that this instability also has implications for those who encounter separated child migrants as part of their working practices, in complex and fluid ways. This complexity varies depending on the professional sector. For example, emergency first responders (such as police and immigration enforcement) have a finite time to spend with separated child migrants, whilst other relationships (such as foster carers) may be built across a longer time period. High turnover of staff, particularly within social work practice, makes maintaining care with consistency challenging (Humphris & Sigona, 2019). Theoretically, care frameworks address the need to examine time and space as an important dimension but because the focus is often on family relationships or older age, precarity is not part of that discussion.

When viewed through a feminist lens, care involves both the giving and receiving of care at the level of the person, a ‘family’, a community, a political system, immigration regimes and even economic systems (Scuzzarello, 2015; Tronto, 1993). From this approach, care is subjectively experienced by those connected through relational encounters and importantly, involves power inequalities (Hollway, 2007; S. Scuzzarello, 2009; Tronto, 1993). For example, in one study, foster carers’ relationships with separated child migrants followed three broad models: ‘like-family’, ‘guest’ or ‘lodger’ and these approaches were deeply intertwined with the kinds of caring practices undertaken (Ala. Sirriyeh, 2013). In another study in the UK, young people narrated experiences of
being in private foster carer\(^2\), where some endured exploitation and harm rather than care (Connolly, 2014). Separated child migrants are increasingly being moved out of foster care at sixteen years of age to be housed in privatised, cheaper and unregulated accommodation. These accommodations are funded by Local Authorities using a grant from the Home Office. In one study, support staff reported feeling powerless to stop Home Office staff from coming onto the premises for deportations (Humphris & Sigona, 2019). School is cited as a significant arena for socialisation which opens up much potential for important care encounters and practices, both by teachers and other pupils. That said, young people can feel excluded by ‘citizen’ children in schools, and teachers have reported feeling ill-equipped to manage mental health problems, instead ignoring specific issues that might be faced by separated child migrants (Pastoor, 2013, 2015).

Overall, there is more that needs to be understood about care and caring practices delivered by a range of diverse stakeholders who encounter separated child migrants as part of their work. This paper asks ‘how do professional talk about and navigate the ambiguity of their care practices of separated child migrants amidst hostile immigration regimes and practices?’

2 Method

This research used an exploratory case study approach which seeks to explore a particular issue or problem (Creswell, 2013). In this instance, the aim was to explore the understandings of care relationships and caring practices with a range of adult stakeholders who encounter separated child migrants, either directly or indirectly, as part of their work role.

\(^2\) Broadly defined as foster care arrangements made privately, without the involvement of the local authority for children under the age of 16 years.
2.1 Participants

In total, fifteen adult stakeholders were interviewed for this study (see Table 1.). Two of these interviews were conducted in pairs. Tanak and Richard both worked for the same organisation and asked to do the interview together. For the second pair, the interview was organised with David and he brought along a colleague who was interested to take part in the study. Although paired interviewing was not part of our original design, in taking an ethically-informed approach to all stages of the data collection, it was important that interviewees felt as comfortable as possible taking part in this study. Both pairs worked within the same professional sector. In the table below we have been deliberately vague about the descriptions of interviewees professions in order to protect their anonymity.

Table 1. List of interviewees by name and job role

<table>
<thead>
<tr>
<th>Name</th>
<th>Job role</th>
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</thead>
<tbody>
<tr>
<td>Amelia</td>
<td>Lawyer working for a charity organisation</td>
</tr>
<tr>
<td>Michelle</td>
<td>National advocacy organisation</td>
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<tr>
<td>Steph</td>
<td>Social worker (State)</td>
</tr>
<tr>
<td>Rose</td>
<td>Social worker (State)</td>
</tr>
<tr>
<td>Mike</td>
<td>Head of policy, development and research at a charity</td>
</tr>
<tr>
<td>Elaine</td>
<td>Border enforcement</td>
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<tr>
<td>Olivia</td>
<td>Lawyer practitioner</td>
</tr>
<tr>
<td>David</td>
<td>Law enforcement</td>
</tr>
<tr>
<td>Jane</td>
<td>Law enforcement</td>
</tr>
<tr>
<td>Zoe</td>
<td>Social Worker (non-State)</td>
</tr>
<tr>
<td>Richard</td>
<td>Private Foster Care</td>
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<tr>
<td>Tanak</td>
<td>Private Foster Care</td>
</tr>
<tr>
<td>Anna</td>
<td>Lawyer practitioner</td>
</tr>
<tr>
<td>Emma</td>
<td>Unaccompanied services manager for Home Office</td>
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<tr>
<td>Sofia</td>
<td>Project manager for charity-based migrant youth group</td>
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</table>

2.2 Process for recruitment

We began by mapping key sites of connection between separated child migrants and adult stakeholders and these broadly fell under the categories of immigration law, third-sector (NGO/charity), social work, foster care, police and immigration border enforcement. As discussed
above, separated child migrants can encounter a significant array of adults as they navigate welfare and asylum in England. Given the exploratory focus of our case study these categories are not an exhaustive list, nor a representative sample. However, the data enables the study of a wider set of emerging concerns about care from multiple professional perspectives and the conditions under which those concerns are produced (Yin, 2009). Initially, we used convenience sampling drawing on connections made by the authors through working relationships, volunteering or activism within the community, or connections made on previous research projects. From there, further recruitment was supported by snowballing techniques as interviewees provided us with links to colleagues.

2.3 The interview process
Semi-structured interviews were conducted by all three authors of this paper. Interviewees were informed that they would be asked about their own work with separated child migrants and their general views on separated child migrant’s experiences of care. For the interview, we chose to use the term unaccompanied minors, as this is the common terminology understood by stakeholders working in this arena. The interview schedule covered interviewee’s own role and background (i.e. Can you tell me about your role? Can you tell me specifically about your work involving unaccompanied minors?); their experiences of working with separated children (i.e. Can you give me an example of something / a time that you are proud of in your work with unaccompanied minors? What sort of challenges do you face in trying to do this work?); participant’s understandings and reflections on separated children’s experiences of care and caring (i.e. Who is involved in caring for the unaccompanied children you meet in your work? Are the unaccompanied children you work with involved in caring for others? Who and in what ways?); and their perspectives on policy and practice approaches to separated child migrants in the UK (i.e. What is your understanding of how the UK currently deals with unaccompanied minors? How do you think the UK should be dealing with unaccompanied minors?). Interviewees were also invited to provide us with any further information not covered by the interview questions. All of the interviews took
place in the south of England, partly because of the proximity to London where there are higher numbers of separated child migrants reside and partly because of the recruitment strategy.

2.4 Ethics
For all interviews, the authors followed ethical guidelines and the study was approved by the ethics committee at the Institute of Education, University College London (REC 901; data protection registration number Z6364106/2017/03/132). Alongside the standard ethical procedures for research there were some additional ethical considerations particular to this study. We made it clear that we were interested in eliciting generalised responses about perspectives on the care of separated child migrants and did not seek details of specific cases. Any references to real people or places were pseudonymised or redacted from the transcript prior to analysis.

2.5 The analytic process
Our analysis adopted a theoretically-informed analytic lens to focus on features of care and caring practices that reflected an understanding of care as socio-politically and subjectively driven, embedded with power inequalities and changing across space and times (Bowlby, 2012; Hollway, 2007; Tronto, 1993). Following transcription, all three team members coded the transcripts looking for instances that explicitly identified features of care at the personal, at the relational and within a wider context of a hostile immigration context. The coding categories were then cross-checked for high similarities and agreement amongst all the team members. Where individuals developed unique codes, the team compared them with other codes for similarities and either added them to the coding list or abandoned them. Codes which shared related meanings were placed into identified themes that represent conceptualisations of care that are situated within concrete experiential professional work roles and situations. This paper reports on 3 themes: 1) Care within the context of a hostile environment, 2) Care (dis)connections and 3) The (In)stability of care.
3. Analysis and discussion

3.1 Care within the context of a hostile environment

In this section we argue that a range of adult stakeholders’ care practices are deeply influenced by the hostile immigration context that currently prevails in England\(^3\). The bureaucratic and structural challenges undoubtedly present personal tensions and professional constraints for those whose role is meant to foreground ‘care’, ‘protection’ and working ‘with the best interests of the child’ (Dunkerley, Scourfield, Maegusuku-Hewett, & Smalley, 2005). A number of our respondents talked about the conflicts in their values as professionals, against a backdrop of the ‘horrors of the system’, as Mike (Head of policy, research and development for a charity) put it. However, we take this argument further by suggesting that when taking into account a range of different professional perspectives, roles and responsibilities across professions and sectors, our respondents had varying room to manoeuvre. As such, the hostile environment (i) enabled and constrained individuals’ capacity to care to a greater or lesser extent depending on their role and that, (ii) individuals pushed the boundaries of their roles to varying degrees and in ways that could be dependent on their personal values and perspectives on the meanings of care.

Emma, whose role working for the Home Office required her to closely follow immigration procedure, talks about a check and balance approach between a set of institutional policies and procedures on the one hand, and an independent relationship with a charitable organisation on the other. Emma positions her role as the representative or enactor of policy and procedure and the charitable organisation as the moral ‘voice’ of the situation, whose role it is to challenge those procedures:

\(^3\) There are variations in the policy and practices for the treatment of separated child migrants across the four nations of the United Kingdom: England, Scotland, Wales and Northern Ireland. This study takes place within the context of England
Well the challenge or difficulty is not so much... I think it’s about perspectives around asylum, perspectives around how we should manage asylum or whether our age assessments are right or wrong. But no, I think most young people have...the organisation that does most of the action taken for young people would be the Refugee Council⁴. So, it’s about building relationships there and being clear about what we do. And I think we are very clear about what we do. And the Refugee Council may agree or disagree, but at least they are quite clear about how we manage our system and procedures are open to scrutiny. And they’re very much part of it because they are the ones that are there for the age assessments. (Emma, Unaccompanied services manager for Home Office)

Emma’s role in the Home Office is managerial and leaves little room to step outside the fortifications of procedures. She alludes to ambiguities in the ‘perspectives’ surrounding asylum claims, which suggests that she is aware of the criticisms levelled at the Home Office for playing an increasingly invasive role in the work with separated child migrants through the policing of asylum claims, age assessments and the distribution of resources to Local Authorities (Humphris & Sigona, 2019). However, the ‘action taken for young people’ is passed to a third party, a charitable organisation, and she describes her role as ‘building relationships there’ rather than with any young people directly. Emma’s use of the pronouns ‘we’ and ‘our’ suggests that she aligns her personal views with her workplace and therefore foregrounds the clarity and ‘scrutiny’ of systems and procedures as the main part of her role. It may be contested however, whether systems are ‘quite clear’, as Emma proposes in her quote. Others have argued that Home Office procedures around asylum claims and associated age assessments can, in practice, play out in highly ambiguous ways (Stalford, 2018).

Faced with intractable ways of delivering caring practices, some interviewees reflected on their own capacity to care (Hollway, 2007) and engaged in caring practices within the increasingly tight

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⁴ The Refugee Council are a national charity in the United Kingdom who provide support services for refugees
boundaries of immigration policy and procedure. Elaine had worked in border enforcement for many years but continued to have direct contact with people arriving to the UK:

*I think we are just too focused on the immigration rules. We do forget that actually where children are involved we’re supposed to actually think about the children and what’s best for the child, regardless of what the quota system is and everything like that. But I think...some people are too hardened by that. So, in a way, in your day-to-day life it’s easy to get caught up with the paperwork, with the paperwork and, that’s the thing. It’s...I think this is probably what some of the people in the Home Office are actually guilty of; it’s just a name. They’re not actually seeing the person. It’s very much now focused on obviously...dealing with as many cases as you can. But people do actually forget they’re dealing with people and children (Elaine, border force)*

Whilst Elaine was also deeply embedded in the policies and procedures ascribed by institutional immigration regimes, she personally reflects on ‘actually seeing the person’. There were costs to her pushing the boundaries of her own role beyond one of control to one of support though (Wright, 2014). In one incidence, a temporary foster placement had been organised by a social worker. However, it was clear the social worker would not be able to pick up the child from immigration border force officials for a number of hours, so Elaine drove the child to the placement herself. Following heavy criticism for this action, she resigned from the safeguarding and trafficking team saying ‘you’re damned if you do, and damned if you don’t’, a statement that echoes the ethical dilemmas reported by frontline staff in other studies (Dunkerley et al., 2005; Humphris & Sigona, 2019).

The contradiction between care and control was more generally acknowledged by some of our respondents, especially those working in the charity sector. Mike worked for a charity involved in
helping professionals who work in adoption and fostering, including specialist support for working with separated child migrants. His reflections, therefore, encompassed a some of the generalised challenges facing frontline staff (e.g. social workers):

*I think the first thing is the issue about...your primary focus is meant to be on the welfare and needs of young people, but there's the kind of challenge of the immigration issue and how you navigate this suspicion that they shouldn't be here at all...or this belief that they shouldn't be here at all, the suspicion that they're not here legally. So, there's all of that, and having to comply with all the protocols about immigration and asylum claims.* (Mike, Head of policy, development and research at a charity)

Mike makes a link between two elements of concern. The first is that frontline staff are susceptible to a general ‘culture of disbelief’ about separated child migrants claims for asylum. The second concern, immediately discussed on the back of the first, is an implied link with immigration and asylum protocols which govern these thoughts. Mike also added that the negative media surrounding separated child migrants and the closure of the Calais refugee camp in France, coupled with the suspicions listed in the quote above, played out in everyday practices, *‘And I see it...I see it just worked out on a day-by-day basis’*. It has been reported elsewhere that social workers who are sceptical about the stories separated child migrants told about their lives also tended to be more suspicious and cynical, ultimately leading to rudimentary forms of help (Kohli, 2009). Taking a similar stance to Mike, another charity sector worker, Sofia, benefited from working directly with young people but did not work directly for the state. This gave her more room to manoeuvre in terms of her own critique and broad reflections of the care given to separated child migrants within the system:
How do we deal with unaccompanied asylum-seeking children? Well...a lot of the time not very well I don’t think. I don’t think they’re seen separately from children in care and they’re like a separate little entity of...where sometimes they don’t really have to consider their welfare and their needs. I think there’s definitely a culture of not believing these young people, not believing their age or not believing their identity and not necessarily giving them the support that they really need. And not taking into account what they’ve been through. (Sofia, Project manager for a migrant charity.)

In Sofia’s quote, the ‘culture of disbelief’, which was present in the discussions of many of our respondents, is linked to the poor provision of psychosocial and health support. The children’s ‘othered’ status as a ‘separate little entity’ provides a space for hostile policies and procedures to take a stronghold in practice (Cook, 2015). One of our respondents went further, suggesting that practitioners who challenged the system or offered resistances were ‘got rid of from social work. We’ve been replaced quite deliberately by people who are a lot more compliant and who are motivated by different aims’ (Rose, state social worker). Anna used her role in public law to defend NGOs and campaign organisations in cases against Government. She used her role to take the existing immigration rules and figure out ‘how you can fit within them and promote the things that you believe in’.

3.2 The (in)stability of care

Separated child migrants spend considerable time waiting for decisions about their asylum claim. Time is simultaneously experienced as sudden episodes of activity (e.g. around assessment appointments or meetings with immigration lawyers) followed by long periods of liminality, as young people wait to see if they will have their asylum status rejected as they head towards their 18th birthday (Kohli & Kaukko, 2017). Even then, many young people are given a time-limited status to
remain in the UK as they transition to adulthood (York & Warren, 2019). In previous academic literature, the precarity of time and space has largely focused on the effects of those receiving care (i.e. separated child migrants). Yet, the precarity of time and space also has an impact on frontline staffs’ ability to deliver stability of care within the boundaries laid down by policy and procedures.

David was part of a police taskforce working under the auspices of immigration crime and migration programme. At the time of interview, he was developing a multi-agency project aimed at helping trafficked or unaccompanied minors who go missing. One key concern was about how little time the police have with the separated child migrants once they arrive in the UK via illegal means, even if they suspect the child might go missing within the next 24 hours. He begins by talking about the ‘lorry drop’, a situation where a group of refugees are found by the police in the back of a lorry or another form of transport. For those thought to be children, the police are obliged to hand the young person over to social services within a time limit of between half an hour and eight hours:

...I mean I’ll term to it as a lorry drop, but we’re talking any clandestine event. So, lorry drop and social services, the general position was always to hand the child over to social services as quick as possible. But there’s more morally and professionally police and all law enforcement can do in that space. And if we can start talking to the child right at that point then there is a perception that we can already start turning them away from the traffickers: “So your accommodation is free, you won’t have to work for anything, you’re not going to prison, we will try and get you education. Don’t go looking for your other family because we will help you find them”... So once we then hand the child over to social services we say, look, from our professional curiosity we believe, because of the nationality, the age of the child, they said they know someone in the UK, they are likely to go missing in 24 hours. You need to speak to your foster carer to start reinforcing the messages we’re sending to hopefully stop this child running straight away. (David, Police)
Unlike the immigration enforcement agencies, the police are unable to collect any information about the child during this time period, which means they are subsequently unable to trace the children if they go missing (Simon, Setter, & Holmes, 2016). Notwithstanding some serious concerns separated migrant children might have over handing their personal details to the police (and their unlikely willingness or ability to do so), from David’s perspective, this is a constraint to delivering a stable form of care either in the short term (when the children are picked up by the police) or the longer term (if they subsequently go missing and are not traceable).

Michelle worked in an advocacy organisation supporting separated child migrants. She had also previously worked in the Calais refugee camp in France before its closure. Michelle was very conscious of how the slippage of time created a barrier to adults providing caring practices to separated child migrants. Equally though, Michelle talked about how young people’s uncertainty about their future dominated their lives and their conversations with the adults who care for them:

*Even when I’m just having a chat with one of them and I say, how are you doing; [They say]*

“All I can think about is my papers. I won’t be able to study properly until my papers; I won’t be able to sleep until my papers”…just the ability to...engage with stuff outside of your own really stressful situation if you’re a teenager who’s got something that worrying going on.”

*(Michelle, Advocacy organisation)*

Some adult stakeholders working with separated child migrants are constrained by preparing them for variable realities of adulthood: resettlement, local integration, deportation (Wade, 2019; L. Williams, 2019; Wright, 2014). Sadly, permanent settlement is by no means guaranteed and many enter into temporary settlement situations as they become adults, which prolongs experiences of
instability. Regardless, those given permanent or settled status are cut adrift from any protections their child status provided them before they were 18 years of age (Allsopp & Chase, 2019).

All too often, the spaces that separated child migrants occupy (i.e. foster home, bed and breakfasts, semi-independent accommodation and children’s residential units) are temporary, unstable and precarious. One of our respondents told us that during the immediate demolition of the refugee camp in Calais, children who had relatives they could live with in the United Kingdom found they were sent to different cities from their family members because the Local Authorities had not been able to screen their families quickly enough. Some of those children were put into emergency foster care but ended staying for longer. Michelle, who worked as an advocate for a charity organisation involved in these cases told us ‘We don’t necessarily know about every single case. I’m sure there are lots of anomalies; it was a very chaotic period’. Some children were picked up by relatives whilst other relatives were told they were not allowed to take the children home because the family had not been screened.

Spaces of care are put to the greatest test in places near ports and other regular sites where children are most likely to arrive into the country. Rose, a social worker who had worked both for the state and as an independent social worker at different points in her career, described her feelings when she arrived in Dover⁵ and looked at the accommodation provided to separated child migrants:

So, when I first got there and took over from somebody who …had left…I was absolutely appalled, I mean really, deeply shocked at the placing of these children and young people on the seafront at literally the ribbon of bed and breakfast accommodation, hotels by the port of Dover. They’re still there I’m sure if you go down. I went there and I was truly horrified. I

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⁵ Dover is a town and major ferry port in Kent, the South East of England. If separated child migrants arrive hidden in vehicles, they most usually come through Dover. They may, or may not, be detected whilst at the port.
mean they were a magnet for every unsavoury character you could imagine. The rooms had ten beds in, and you could hardly walk between the beds. This was emergency accommodation, but was, you can’t put children here. I just couldn’t believe my eyes. (Rose, social worker for the State)

Rose went on to explain that she worked to set up a humanitarian reception centre to receive the children with rooms for four children to share and a doctor on-site for medical assistance, but in doing so ‘ultimately put my job on the line’. Ultimately, time and space, in the lives of separated child migrants, is a controlling feature dominated by age markers, legal statuses and bureaucratic processes (Allsopp et al., 2014; Kohli & Kaukko, 2017).

3.3 Care (dis)connections

The adult stakeholders in this study occupied a variety of different positions within asylum, immigration and care systems. Some sat firmly within state institutions, either doing direct contact work or acting in a managerial capacity, whilst others positioned themselves as critics of the system or were in some way trying to change it. This had implications for the way they viewed the children’s care connections between other adults (i.e. foster carers), the children’s care for each other, and the distal care connections with either families in home countries or people they had met on transnational migration journeys. Care connections and relationships among separated child migrants were viewed as important but only in as much as they fit with adults’ versions of what were appropriate relationships depending on their role or position in their work. For some adult stakeholders, children’s care connections were treated with suspicion, as discussed above, which added to the culture of disbelief.
The children’s use of technology to maintain both distal and proximal relationships was a good case in point. Technology was recognised as important by some and treated with suspicion by others. Steph, a social worker for the state who supports foster carers with their placements told us:

Yeah, they're here in the UK. But they're linked to other family members elsewhere, because one of them was saying, “I think your parents need to know that you are safe now. So, is there anybody that you can...somehow pass them a message?” He said, “they haven't got telephone numbers and I don’t know anyone who can pass on a message”. “Well, a friend of a friend knows your cousin is on Facebook, so if they pass on the message to your family, that will be good”. So, I think it’s useful also in terms of locating lost family members who are on Facebook. And on WhatsApp also. (Steph, Social worker for the State)

Technologies offered a range of possibilities for care connections to be made or maintained. However, even when they were seen in a positive light, there is a sense that this is an activity that takes place outside of adult intervention. Steph does not place herself as a contributor or enabler of these care connections, rather, this is a conversation she has overheard and allowed to happen. Emma, a social work manager for the Home Office, framed these links more negatively, especially when they involved money or remittances to family, she remarked:

Most of the young people are Skyping or talking to their relatives by phone. Probably some of them are sending some of their pocket money home or as well...they have to have Instagram. I’m sure they have more information than I have about young people and young people’s progressing money to their relatives.

The list of things the children have, ‘Skype’, ‘Instagram’ ‘a phone’ and ‘money’ are all mechanisms through which separated child migrants have connections with others in their lives. Rather than
seeing this as a vehicle for care, it is positioned by Emma as a vehicle for ‘information’ which the children trade in, but which the Home Office is excluded from, and as such, is treated with suspicion.

Institutional regimes often made it difficult for stakeholders to maintain care connections for the separated child migrants, even when they knew it was in the best interests of the child. In 2016 the British Government introduced the National Transfer Scheme, designed to distribute caring responsibilities around the country in order to take pressure away from places like London, where higher numbers of children claim asylum. Commentators argued though, that the scheme was driven by budget saving and economic forces, rather than what is in the best interests of the child (J. J. Pearce, 2011), thereby shifting the discourse surrounding separated migrant children from being in need of care to being a burden of care (Humphris & Sigona, 2019; AUTHORS Online first). As Steph, a social worker commented:

*I think the other challenge also is this...I can’t remember what they call it, dispersal scheme by the Home Office, where young people come and then they have to go to a different local authority. That is affecting the plans we make for young people as well because you have a young person coming in...actually, I had my foster carer once had a placement; the young person stayed with the foster carer for about three months and then off he went to Wales. And he just couldn’t settle there as well, and he ended up running away. So as much as it makes sense in the paperwork, I think to the young people it’s confusing. You know you come in, you want safety, you bond with the foster carer; three months and...you’re moved somewhere else outside of London where I think the chances of reintegrating are less because London is more diverse...I think it’s called dispersal. They say it’s very inhumane, which is true* (Steph, Social Worker for the State)
The transfer of children to other parts of the nation led to significant disconnections of care for the children, leading to ‘horrible stories where you’ve got young people who just aren’t really accessing anything’ (Amelia, lawyer for a charity). For example, schools and colleges were reluctant to take new pupils who were soon going to be moved to another area of the country, leaving the young person in limbo. Aside from the troubling ramifications that geographic and bureaucratic borders create problems for young people accessing legal, educational, and mental health provision (Humphris & Sigona, 2019), there were also significant problems for the making and breaking of care connections. Children were sometimes moved from established foster carers regardless of whether they had developed positive care relationships. The National Transfer Scheme creates deeply troubling corollaries for young people’s care relationships for each other, such as children who had travelled together through their journey being ‘dragged apart, screaming’ (Michelle, a staff member at an advocacy organisation) following Home Office assessments carried out in the aftermath of the close of the Calais Refugee Camp (see AUTHORS Online first for more detail).

4. In summary

Building on the care literature, we have examined the way in which stakeholders who work directly or indirectly with separated child migrants understand care and caring practices in the context of their own practice. It should be made clear that not all of the stakeholders who took part in this study would frame their role in terms of ‘care’. Rather, our respondents were all asked to reflect on the care given to separated child migrants by adults who work with them, and the care children provide to each other. Previous research has shown how stakeholders can become driven by harsh hostile immigration regimes, and that this is not something unique to the UK (Heidbrink, 2014; Wright, 2014). In our analysis, we have illustrated that the hostile immigration regime, adult stakeholders’ institutional roles, and their personal values and perspectives mutually constitute constraints and enablers to care.
Our work sheds light on the ways in which some stakeholders described a consistency of alignment between procedure, their role (usually within the system) and their personal values. For example, when a role foregrounds hostile procedures towards separated child migrants, or were unquestionably situated within a ‘culture of disbelief’, this rendered individuals less attentive to ‘care’ (Tomko Dennler, 2018). Equally, when personal values contradicted the dictates of the system and/or their role, they did offer resistances. Such resistances can come at a personal cost (Allsopp & Chase, 2019; Humphries, 2004; Humphris & Sigona, 2019). For Elaine (border force) this meant resigning from her job working with children and young people. For Rose, it meant being edged out of social work on behalf of the state and into independent social work. Our respondents who worked in roles outside of those provided by the state (e.g. in the charity sector), were able to reflect more broadly on what was happening to other professionals located within the system and had more room to manoeuvre in challenging the hostile environment.

When reflecting more deeply on conceptualisations of care, in the case of adult stakeholders ‘caring for’ separated child migrants, there is clear evidence both from our study and others, that actions are constrained and there are complex limitations laid down by wider immigration regimes, policies and procedures and the roles and personal values of individuals. In this paper we emphasise that this instability also has implications for those who encounter separated child migrants as part of their working practices, in complex and fluid ways. This complexity varies depending on the professional sector. For example, emergency first responders (such as police and border control) have a finite time to spend with separated child migrants, whilst other relationships (such as foster carers) may be built across a longer time period. Theoretically, care frameworks address the need to examine time and space as an important dimension but more can be explored in terms of what this might mean for encounters between separated child migrants and adult stakeholders.
Finally, this paper has evidenced the importance of space as part of theorisations of care of separated child migrants. Geographical space was raised as important for children’s care of each other, especially when children who had travelled together during migration were separated under the National Transfer Scheme. Distal care connections, often made possible through technology, meant that care connections could be sustained with friends or relatives. Official or state actors, such as the Home Office and some social workers, treated some care connections with suspicion. Perhaps because these connections seemed to take place outside of adult intervention or maybe because this was an area in which children exercised their capacity for agency.

There were some limitations to our study. This was a small case study design that would benefit from being significantly expanded in terms of the scope of the range of adult stakeholders who encounter separated child migrants to examine in greater depth the caring practices of those within and out-with statutory control. We suggest that a larger sample would allow for a fine-grained analysis between those whose work directly with young people and those who manage or oversee those roles.

Ultimately, we argue that our study adds to the current literature by proposing that it is useful to examine with more depth the kinds of conflicts facing a range of adult stakeholders who are situated in a range of complex roles and responsibilities within contexts that shape capacities to care in different ways. Some stakeholders worked directly with children, either within or outside of state intervention and therefore found varying room to manoeuvre within their respective contexts but also, seemingly, reflecting personal values that might or might not align with institutional perspectives. Others worked with other professionals (e.g. foster carers, social workers) providing training and support and therefore to some extent, statutory obligations to care do not always translate into practice, because care is constituted by contradictory policy terrain, diverse value sets, and professional roles with relatively different room for manoeuvre. To ensure that separated child
migrants receive the care they are entitled requires more comprehensive educational, contextual, and social change and cannot rely simply on assumptions of legal duties.

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