# Practising with care in mind: Learning from professionals and Unaccompanied Asylum-Seeking Children

**Training 2: Thinking about ‘care’ and ‘childhood’**

<https://www.open.edu/openlearncreate/course/view.php?id=9170>

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# **About this course**

The materials in this downloadable resource are designed to be used by trainers of social work and/or other social care professionals and practitioners. You can either follow the activities directly or lift particular exercises and adapt them for your own purposes. The materials contained here are part of an 8-hour online course which has been broken down into manageable parts.

## What is the broader aim of this course?

The purpose of this course is to help qualified and differently qualified practitioners and professionals to think about their reflexive practice in relation to care with Unaccompanied Asylum-Seeking Children (UASC) and separated/lone migrant young people. The capacity to reflect is a core part of professional competence and helps social care professionals think about their own practice, their approach to their work and to learn from the process.

The course recognises that working in any kind of social care capacity with vulnerable young people is extremely tough, dynamic, and an often emotionally draining job, so it is useful to think about what shapes practice and why. The attendees of this course will be introduced to the thoughts and opinions of practitioners and professionals who work with UASC and young people who are themselves, unaccompanied migrant young people.

This training will enable social care professionals to better understand their own and others’ perspectives on young people’s care relationships – including, their care of each other.

## The aim of this exemplar session

The activities in this session explore what it means to ‘care’. The activities can be used as a standalone or may be useful to ‘warm-up’ or ‘introductory’ activities to further sessions.

As the trainer, you may also find it useful to mix and match the activities in this exemplar session with activities from other available training sessions (see also sessions 1, 3 and 4).

PowerPoint slides associated with these activities have been made available to you to adapt and re-use.

## Who is this training for?

This course is aimed at social workers, senior practitioners, personal advisors and other social care professionals and practitioners working with UASC.

If your attendees are qualified social workers you can remind them to add this course to their CPD record to meet the requirements for registration. By the end of this course they will be able to answer the two key requirements: describe what they have learnt; then state how the CPD has had a positive impact in their practice on the people they work with. If you are delivering this course to differently qualified professionals, this course will enhance their reflexive practice skills.

## How long will the course take to deliver?

Between 1 and 2 hours

Notes to Trainers: You can pick and choose which activities to deliver as part of this course. Some activities are very short and others are designed to stimulate discussion and reflection, and therefore, may require more time.

## Learning outcomes

By the end of this course you will:

* Have been introduced to evidenced-based training and the Children Caring on the Move project
* Have reflected on meanings of ‘care’ in relation to working with UASC and unaccompanied young people
* Understand how different perspectives on ‘childhood’ influence our views of the care of UASC.

# **Using evidence-based training**

A core feature of this course is that it is evidence-informed – in other words, the core content is based on research findings as opposed to anecdotes or opinion.

In this training you will be drawing on both academic literature and data evidence from a research project called [Children Caring on the Move](https://www.ccomstudy.com/).

The data provided comes from what young people, professionals and social care practitioners have told us about their lives, their working practices and a key element of our study: young people’s care of each other. We have provided you with both young people’s and adults’ data so that you can explore some of the synergies and differences in their perspectives.

**At times your attendances may agree or disagree with what the young people and adults say in our study. That is ok! A key component of the course is to encourage your participants to reflect on where your own views relate or diverge and why that might be the case.**

## The Children Caring on the Move project

**You may find it useful to ‘set-the-scene’ of this evidenced-based training by introducing your attendances to some key bits of information about the Children Caring on the Move project.**

The Children Caring on the Move project set out to examine Unaccompanied Asylum-Seeking Children’s (UASC) experiences of care, and caring for others, as they navigated asylum and welfare systems in England.

* We started with the premise that care is not necessarily limited to what adults (or the state) provide for young people.
* Our work has shown that young people provide a lot of care for each other, but we wanted to understand what that care looks like. We also wanted to explore how professionals and practitioners who work with UASC and other separated child migrants thought about young people’s care of each other.
* On the one hand, the duty to care is a central tenet of any practice when working with vulnerable children such as UASC and other separated child migrants. On the other hand, stringent immigration practices, policies, bureaucracy and structural challenges undoubtedly present personal tensions and professional constraints for those whose role is meant to foreground ‘care.’

## Who took part in our study?

*Collecting data from young people:*

The way in which we wanted to gather data from our young people was quite unique compared to many research projects. First, we recruited a group of enthusiastic unaccompanied young people to work with us collaboratively as Young Researchers. We trained them in social research skills that students might learn at school or University when conducting their own research projects, such as interviewing skills. The Young Researchers then conducted interviews with other UASC with the support of the University researchers.

We carried out a total of 75 interviews with 38 unaccompanied young people in two major cities. Each young person was invited to 2-3 interviews over a 6-12 month period. These included (i) object-based interviews where participants were asked to bring an object that represents care; (ii) photo elicitation focused on a ‘day in the life’ of the participant; and (iii) walking interviews to see places of (un)caring.

*Collecting data from adults:*

We conducted 64 semi-structured interviews with adult participants about their understandings and perspectives on care.

For ethical reasons we have developed a broad set of descriptions for the range of adult stakeholders that we interviewed. They include:

* Project Coordinators (in Education/Charity) who oversee multiple projects in their settings.
* Project Managers (in Education/Charity, State Social Work, Arts in Charity, NGO sectors) who tend to line mange those who work directly with young people.
* ‘Direct workers’ (e.g., Charity advocates, state and independent social workers, foster carers, educators, paediatricians and educators), who are those who have direct and regular contact with young people.
* Other stakeholders covered areas such as mental health/therapy (working in NGO settings), interpreters, immigration lawyers and border force.

Our interview questions focused on examining the interviewee’s background, their broad experience of caring for separated child migrants and their role in their lives; the interviewee’s own understandings of care, care relationships and caring practices; how care changes over time; their views on the wider economic, social and political priorities and challenges that influences their ‘care’ and support practices.

# Training 2 – Thinking about ‘care’ and ‘childhood;

## **Activity 1 – Warm-up exercise [approx. 15 minutes)**

This activity may be useful to help start a dialogue amongst your attendees.

## Background

The Children Caring on the Move project sits against a backdrop of rising numbers of children who have been separated from primary care givers during migration. According to the International Data Alliance for Children on the Move, 2020 saw a record number of international child migrants at an estimated 35.5 million. The Covid-19 pandemic, war and unrest countries like Afghanistan and Ukraine, and reoccurring natural disasters all suggest that this picture is unlikely to change and may get worse.

**The Activity**

Let’s take a look at some of the key data about child migrants – as your attendees to work in pairs or as a group to choose the right answers.

|  |  |  |
| --- | --- | --- |
| Question 1 | In 2020 there were an estimated 35.5 million international child migrants. How many of these are thought to be refugees and asylum seekers? | 3.5 million11.5 million18.5 million26.5 million |
| Question 2 | In 2021, how many unaccompanied children are reported to have claimed asylum in the UK? | 1,4582,8203,7625,105 |
| Question 3 | Between January and June 2020, which of the following countries had the highest percentage of children arrive as unaccompanied (as compared with children who were accompanied)? | GreeceSpainItalyMaltaBulgariaCyprus |
| Question 4 | In the first half of 2020, which was the most common country of origin amongst child asylum seekers to Europe? | AfghanistanSyrian Arab RepublicIraqVenezuelaColombiaEritrea |
| Question 5 | In 2019 the grant rate for asylum or other forms of leave for separated children was? | 56%69%79%82%94% |

Answer Key:

|  |  |
| --- | --- |
| Question 1 | **Correct answer:****11.5 million** |
| Question 2 | **Correct answer:****3,762** |
| Question 3 | **Correct answer:****Malta (93%)**Greece (12%)Spain (38%)Italy (84%)Bulgaria (48%)Cyprus (30%) |
| Question 4 | **Correct answer:** **Syrian Arab Republic (22%)**Afghanistan (13%)Iraq (6%)Venezuela (4%)Colombia (4%)Eritrea (4%) |
| Question 5 | **Correct answer:****79%** |

Data sources:

https://data.unicef.org/resources/international-data-alliance-for-children-on-the-move/

https://www.gov.uk/government/statistics/immigration-statistics-year-ending-december-2021/list-of-tables

<https://www.unicef.org/eca/emergencies/latest-statistics-and-graphics-refugee-and-migrant-children>

<https://separatedchild.org/our-work/refugee-facts>

## **Activity 2 – Thinking about childhood [approx. 30 mins]**

This training program focuses on the care of children and young people, and more specifically, Unaccompanied Asylum-Seeking Children (UASC). When it comes to thinking about ‘care’, the CCoM project argues that it is also important to think about ‘childhood’. These concepts are highly related to each other and help us reflect on our assumptions about the children and young people we work with. First, it might be a useful exercise to think about what childhood means to you.

## Background

Society’s views about how children should be treated, governed and talked about have changed considerably over the centuries (Cox, 2002). Ariès (1973), a history scholar, studied the way children were represented over time through paintings, poems and iconography. Take a look at some paintings and photos of children from different times and circumstances.



Portraits of children. Left: Portrait of a child by Cornelis de Vos (1584−1651), hanging in Chatsworth House, Derbyshire, England. Right: Portrait of the Infanta Margarita, aged 5, 1656, by Diego Velázquez.

You might ask your trainees to discuss and answer the following questions:

* What do you notice about the way the children are depicted?
* What do these illustrations tell you about their lives?
* What can they tell you about how childhoods have changed over time?

Your trainees might comment on the ways in which children of wealthy families, such as those depicted above, were once dressed like ‘miniature adults’. Ariès argues that ‘childhood’, as separate from adulthood, only emerged at the end of the Middle Ages in Europe. Even so, children in poorer circumstances entered into the world of work at an early age, a practice that still occurs in many countries around the world.

From the late nineteenth century onwards, an unprecedented level of attention was paid to the study of children and childhood. This was especially true in the field of child psychology where a child’s maturation towards adulthood was considered to occur in a series of steps or stages, as shown in Figure 3.2 (Crafter et al., 2019). This model of childhood is deeply ingrained in Western society’s notion of what an ‘ideal’ or ‘normal’ childhood should look like. It is a model that promotes the expectation for the ‘ideal’ childhood as a time of innocence, play and socialising (Kessen, 1962, 1979). The ‘normal’ child should be dependent on adults for their care, and kept innocently free from the burdens of everyday life (Burman, 2016). In other words, the argument suggests that ‘childhood’ is a socially constructed notion that changes across space and time. This poses a challenge for children and young people whose life experiences sit outside of these ‘normative’ parameters.

**The Activity**

Ask your attendees to write down 5 words that come to mind when they think about ‘childhood’. Ask them to share their words with the group and discuss it.

When the team do this activity with our students studying child psychology they often use words like ‘innocence’ ‘vulnerable’ ‘play’ ‘love’ ‘friendship’ ‘socialising’ ‘education’. As a practitioner, it will be interesting to see if your attendees come up with similar or different words.

The socially constructed child also presents a challenge for practitioners working with children and young people. Working with Unaccompanied Asylum-Seeking Children (UASC) and migrant children shines a spotlight on how diverse and different children’s experiences of growing up may be. The notion of a child travelling alone and ‘seeking asylum’ does in itself transgress what we feel are the ideal parameters for how childhood should be experienced (Crawley, 2011). This can have concrete implications for the decisions that are made about young people’s lives. For example, whether they are believed to be under 18 years of age in an age assessment, if they should be placed in foster care or semi-independent accommodation, or whether they are considered to be overly ‘mature’ either because of physical appearance, actions or behaviours.

## **Activity 3 – Thinking about childhood and care [45-60 mins]**

For this activity, you will ask your attendees to think about how dominant ideas about what childhood should look like, also influence how particular care relationships are framed.

## Background

When we think about the care of children and young people, the focus is often on the role of adults caring for dependent children. For example, the care a mother and father give a child. As a social care practitioner, you may think about the duty of care the State provides in loco parentis (i.e., being responsible for a child while their parent is absent). In this formulation of ‘care’, the adult care is done *by* adults *for* children and young people.

However, care comes in many complex forms and an often-neglected form of care is that provided *by* young people. Research within the wider field of migration has shown that young people often have significant caring roles and responsibilities within the family, such as pitching-in with domestic work (Rogoff et al., 2014), helping to support the family finances (Heidbrink, 2014) or acting as a young translator or interpreter (Crafter and Iqbal, 2022). Of course, there is also a large body of research outside the field of migration that focuses on the role of young carers and the adult-like roles they sometimes engage with for family members (O’Dell et al., 2010).

The Children Caring on the Move project though, was keen to explore another aspect of ‘care,’ which was young people’s care of each other. If young people were no longer being cared for by their immediate kin, what caring practices and care relationships were they engaged in?

**The Activity – Part 1**

Ask your attendees tolist as many ways you can think of in which UASC care for each other.

**The Activity – Part 2**

For the second part of this activity, ask your attendees to read the following quote from Sara (not her real name), who brought along a picture of her friend to her care object interview. She was asked to describe her relationship with her friend. As you read her quote, ask your participants to think about how this might be framed as a caring relationship. They might discuss this in pairs or groups. They might underline:

* Caring words
* Caring relationships
* Care actions

*‘Okay. First, we know each other in Belgium for one year there because we stayed there to try to come here for one year…And when we try we came here by the lorry, the truck, the pickup. And when we need to go there, for example, sometimes if I am not feeling well, my friend doesn’t leave me and try to come to here. She stay with me. And she stay with me and try to the next day with anything like when we are tired, because we are tired we have to work for long hours. So she was always with me. Yeah.  And she’s still with me now.’*

INTERVIEWER: Can I ask one more thing? And please, only answer if you feel comfortable to, Sara, okay? Can you maybe tell us a bit about that support that you’ve given each other? So what did it look like, you know, when you were moving together to the UK? How did you support each other?

*‘Everybody have like two people in Belgium when they are travelling. But when you go to try and to find the truck, first you need to go along journey from the place you stay. And then there is like walking in the like jungle. And we always go in the night-time. And if you are just by yourself, it’s scary. And we are always together and we go there. And even sometimes they will say like… the people say, “Come,” just one of us. If there is not enough space, they call one of us and then to try to the truck in her, the truck. And she never leave me. She always wanted to stay with me because she didn’t think just for herself. She think about me as well. Yeah, a lot of times she did like that.’*

**Potential Answers/explanation**

Sara repeatedly describes moments of feeling ‘cared about’ through the attentiveness of her friend such as when she says ‘…*if I am not feeling well, my friend doesn’t leave…’*. Sara predominantly frames herself as the ‘care receiver’ and responds by recognising the empathetic concern shown by her friend, ‘*She always wanted to stay with me because she didn’t think just for herself.’* It is hard to know how much this was reciprocated by her friend because we only have Sara’s narrative, but there is a sense of solidarity amongst the two friends which has endured as a care relationships over time.

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