PERCEPTIONS AND EXPERIENCES OF FORMER UNACCOMPANIED REFUGEE CHILDREN AND SOCIAL WORKERS AT A CARE HOME IN SWEDEN

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Abstract

This study was carried out to investigate the experiences of former unaccompanied refugee children and the perceptions of the social workers at a care home in Sweden. Method of investigation is qualitative, semi-structured interviewing. The sample consists of 3 formerly unaccompanied refugee children and 2 social workers working at a HVB (Hem för vård och boende) home. The respondents are over 18 years old during the time of the interview but at the time they arrived in Sweden they were unaccompanied refugee children. The interviews focused on the time they spent in the care homes when they were still minors. Results from the interviews found that these children suffer from lack of contact with their families, a long time waiting for the migration decision to get residence permit which causes distress, religions and culture problems in terms of lack of places of worship in the nearby area, lack of parental love which cause the feeling of isolation and loneliness in the new environment as well as lack of family connections and networks.

Key words: unaccompanied refugee children, care homes, wellbeing, social support
Preamble

I want to show appreciation to my supervisor for the patience that she has had with me during the time of doing my study. At one time I had to postpone the work due to life situations and she persevered with me when I lagged behind. Thank you once again. I also want to thank all participants that shared their perceptions and experiences with me. Lastly I thank all other people, including my family who supported me whenever I was down and needed support.
List of Abbreviation

BBIC Barn Behov i Centrum
CRC Convention Rights of the Child
HVB Hem för vård eller Boende (Care Homes)
PCS Person/Psychological Culture Structure
PSTD Post Traumatic Stress Syndrome, Disorder
UASRC unaccompanied asylum seeking refugee children
UNHCR United Nations High Commissioner for Refugees
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1. INTRODUCTION

The past decade many children have left their home counties to seek refuge in European countries. Reasons for migrating are many and different. Among the many reasons is fear of persecution or serious harm (UNHCR / Council of Europe report, 2014, pg.14). In Sweden UASRC (Unaccompanied Asylum Seeking and Refugee Children) began arriving in the late 80’s. Many of these children are teenage boys who had been called up or risked being called up for military service in a war from their home country. Some fled their homeland for political reasons. These children/youths have undergone traumatic experiences such as war or torture, painful separation from family, relatives and friends (Wallin & Ahlström, 2005).

According to (Thomas and Gideon, 2013) ontological security which is the sense of order, stability, routine and predictability give meaning to life. Ontological security helps foster a robust autonomous identity; enabling us to socially interact with others without having that identity threatened (ibid, p. 94). This is related to having sustenance of our biological narrative, (history of our being) the confidence of who we are, where we originate from and where we are headed to in life. Ontological insecurity is a situation of being overwhelmed by generalized anxieties, where one has lost trust in ones capabilities, and not being able to maintain an orderly life story. It is the opposite of ontological security the maintenance of ontological security requires a combination of biological material, economic, psychosocial and political resources, integral in rights. Establishing and maintaining this security becomes a problem when people striving for it have limited resources, through their lack of citizenship to fundamental rights (ibid, p. 95).

All children have several basic needs in life, for them to develop as healthy adults. Threat to children’s’ emotional wellbeing increases upon lengthy disruption between the child and its primary care giver or family (Morris, 1996). These children’s emotional and intellectual development may be seriously affected by long stay in unnatural environments such as refugee camps, or places where normal life activities are impossible (ibid, p 9). Unaccompanied refugee children’s security threat, originates from many sources beyond upheaval and trauma the label asylum seeker, carries an inherent stigma that is present in many young people’s accounts of their lives in the UK and relationship with others (ibid, p. 6). Of concern to the unaccompanied young asylum seekers, is how they are treated within the various systems within which they
engage, especially, through social care services which are a gateway to other provisions such as education, housing and care placements. It is upon the social care workers to make decision on whether the young asylum seeker deserves support or not. The decisions from social care workers can have positive or negative impact on the young person’s life. If good decisions are made the young person can turn out to be good citizen, but if decisions made are not good the young person’s life might be drastic where they can end up with psychosocial disorders (Morris, 1996).

Considerable challenges are faced by unaccompanied refugee children regardless of their ethnicity, cultural, religious and linguistic background (Kelly, Emma et al, 2012). Even though few overcome these challenges to successfully manage the barriers; the unaccompanied young asylum seekers have experienced a lot of traumas before arriving to new destinations. The earlier difficulties that led their migration coupled with the new challenges they meet overwhelm them especially in the absence of parental care. These children run high risks of psychological difficulties (Kelly, et al, 2012)

Unaccompanied asylum refugee children risk PSTD (Post Traumatic Stress Disorder), depression, and anxiety even if they do not show these behavioral difficulties as does the migrant population (ibid). The most vulnerable are girls as opposed to boys. However, evidence show that as they UASRC (Unaccompanied Asylum-Seeking and Refugee Children) approach majority age of 18 the risk of mental health becomes greater. This age related risk is attributed to immigration, determination process where many fear being deported upon attaining maturity age (ibid).

Upon attaining maturity age there is a strong effect on psychological wellbeing of UASRC (UNHCR and Council of Europe, 2014). Mostly affected are asylum seeking children or those granted international protection, mainly because of their vulnerability and psychological needs; Psychologists allege that fear and uncertainty of attaining majority age prevent the young (UASRC) from settling and integrating but it rather starts a mourning process resulting in traumatization that add to the old traumas previously experienced while living in forced displacement (ibid). Even though unaccompanied or refugee children experience insomnia or violent nightmares as well, the symptoms increase significantly during the time of passage to adulthood (ibid). Upon attaining majority age the psychological impact on UASRC becomes great as they lose their guardian, caretaker or the social worker with whom they had created a strong emotional bond. This is because the age of 18 which is common in countries like UK or
21 (as is the case in Sweden for the UASRC) the young people move out of care facilities and lose that important link (ibid).

1.1 Aim

The aim of this study is to investigate the perceptions and experiences of former unaccompanied refugee children and social workers at a care home in Sweden. The research questions are:

• How do unaccompanied refugee children perceive and experience living in a care home?
• What are the perceptions and experiences of social work personnel towards working with unaccompanied refugee children in care homes?

1.2 Disposition

This thesis first introduces the reader to how life is experienced by unaccompanied children. Objectives hoped to be achieved are illustrated in the aim followed by concepts to clarify some terms used in the study. Early research found on the same topic precede the applied theory, the author then takes on methodology, followed by results analysis and finally discussion.

2. CONCEPTS

2.1 Care homes

This concept refers to residential institutions where people live and are taken care of by employees. These are not a person’s family home, but are a substitute for those who do not live at home with their natural families they are temporary homes that the young unaccompanied live in for a time while under care of social or care workers.

2.2 Well being

While having no specific consensus about it, well-being is alleged to include the presence of positive emotions and moods such as contentment, happiness, satisfaction with life, fulfillment and positive functioning; other attributes are the absence of negative emotions like depression and anxiety. Well-being can be described as judging
life positively and feeling good. For health purposes, physical well-being such as feeling healthy and full of energy is also viewed as critical to overall well-being (Dodge, et al, 2012).

A new definition of wellbeing is given as the balance point between an individual’s resource pool and the challenges faced (ibid).

2.3 Social support

Social support is the perception of being cared for, having assistance from other people, and supportive social network which can be emotional financial assistance, informational like getting advice or companionship a sense of belonging etc. Social support can also be needed and received assistance in reality or the extent to which a person is integrated in a social network. Support can come from many sources, such as family, friends’ organizations, etc. (Thommessen, Corcoran, and Todd, 2015).

2.4 Unaccompanied refugee children

The term unaccompanied refugee children refers to those separated from both parents and are not being cared for by an adult who, by law or custom, is responsible for their care (Morris, 1996). These youth are in flight from their own homes and have travelled to foreign countries where some are seeking asylum or are living in refuge away from their own counties of origin, culture and family.
3. EARLIER RESEARCH

The author went under search guide, to the social work at the university web from where the earlier research was retrieved. Googled Libris, Ecobhost, soci index and even google scholar. Search words were unaccompanied refugee children, Asylum seeking children, living in acre as unaccompanied child, unaccompanied children and wellbeing, the chosen earlier research were taken because of their relativity to point of study.

3.1 Experiences of Life Situation and Well-being

In their research Wallin and Alström (2005) found that quite a number of unaccompanied youth that arrived in Sweden fared well and were content with their lives. A group though within the same study expressed despondency and depression reporting a small network and limited social support (p. 2). In the report a participant shows symptoms of PTSD (Post-traumatic stress disorder) even after 11 years in Sweden (ibid).

Individual life events are engraved in the mind as memories. But massive traumatic events give a psychologic shield, denial and a feeling of unreality. Susceptibility to developing PTSD is greater for those who lack or have insufficient aid (ibid). Social support, which is having good social networks, is considered important for successfully dealing with physical and mental health in stressful events. For a healthy emotional adaptation refugees either need access to emotional support from their fellow countrymen or need to share experiences with people who speak their language. The unaccompanied children have many worries and fears, if they do not mix easily with the citizens of asylum country this learning becomes hard as found by Wallin and Ahlström (2005).

3.2 Psychological stress and mental health

Sanchez, et al (2012) found that unaccompanied asylum seeking refugee children are at a higher risk of developing mental health problems as opposed to their accompanied peers. The primary reason is because these children are prone to high levels of post traumatic anxiety and depressive symptoms. Evidence from the research show that greater harm is as a result of accumulation of multiple psychological risk factors in childhood (Sanchez, et al, 2012, p.2) some of the difficulties faced are violence, forced migration and forceful resettlement in unfamiliar environments. Severity of
psychological distress and behavioral problems are important predictions in these UASRC as opposed to migrant children, accompanied refugee children or even children of minority ethnicity (Sanchez et al, 2012) Children suffering mental health problems, do not access MHS (Mental Health Services) those who suffer greater risks, are refugee children, believed to have mental problems. Reasons for not accessing the MHS are language barriers, or difficulties, problems with registering with general practitioners who are referees to the services in the UK as in other countries, lack of available services or lack of knowledge on how to access services and finally is the mobile status of the UASRC. Which interfere with their started care, Social workers may underestimate the UASRC difficulties including mental health needs (ibid).

Derluyn & Broekaert (2007) found that girls were more susceptible than boys to traumas. While internalizing problems was common in UASRC as compared to the accompanied refugee children of the gender sexes, girls were most internalizing. Reason attributed to, girls having undergone more traumas in home countries than boys i.e. forced to sexual abuse or early marriages. Fear is that, even in the host countries the girls could still be facing traumatizing events of rape or forced prostitution (ibid).

3.3 Psychological violence

The worries that weigh down the UASRC are many as found by Thommessen, et al (2015), even though the children have moved from danger in their homeland they still face worries when they are in limbo about the outcome of their asylum status, if it will be granted or not. The waiting process is long and gradual causing worry, distress, uncertainty, loneliness, isolation, anxiety, loss of culture and loss of social support (ibid).

It is critical for social worker professionals to provide social support and clarify processes. The Swedish mentors were appreciated by the research though sometimes they did not live up to the expectation of helping the young adapt. The existing gap of not knowing the status of their separated family is also a cause of anxiety for the UASRC which highlighted the importance of social connections. It is not enough to concentrate on the young; we must help them reconnect with their family or relatives (Thommessen, et al. 2015).

Development of close meaningful relationships in the host countries facilitates adaptation and wellbeing of the unaccompanied asylum seeking children, the lack of social support increases mental health difficulties (ibid). In the UK the unaccompanied
asylum seeking children who lived ‘in independent accommodation without this social support had greater mental difficulties than those who lived with others under foster care families. Lack of social support caused depressive morbidity than the experienced traumas’ (ibid, P. 8). Stress escalated with lack of employment while living in the host countries as found in Norway.

A widely recognized risk factor for development of different emotional and behavioral problems, especially in children and adolescents is migration. Worse is if the child is forced to go through this process alone without support and protection of a parent or primary caregiver, the child’s emotional well-being is even gravely threatened; unaccompanied refugee children and adolescents in Belgium showed prevalence of internalizing problems. Anxiety, depression, emotional problems and post-traumatic stress symptoms is very high; these numbers are much higher than those found in accompanied refugee adolescents (Derluyn, & Broekaert, 2007).

4. THEORY

General system theory

Ideas of system theory in social work originated from Von Bertalanffy in the 1940’s and 50’s in management and psychology. It perceives an organism as a system, an organized whole, made up of components, or subsystems (parts) that interact in a distinguishable way, discrete from their interaction with other entities and which endure over period of time (Brandell, 2011, p. 7, Payne, 2005, Greene, 2009, Parrish, 2010). This theory is linked to a science of wholeness (Brandell, 2011, p. 4). It looks at an individual in relation to a larger social context; general systems enable social workers to understand the components and dynamics of a client’s system. This is important for interpreting problems and developing balanced interventions. According to Payne systems theory integrates the atomistic, holistic continuum which requires that social workers should think of both social and personal elements in any social situations as well as seeing how these elements interact with each other to make a whole (Payne,2005, p.142). Greene (2009) illustrates that, system theory provides social work practitioners with a means of understanding the relatedness of several complex variables, whether they physical, social or psychological issues (Greene, 2009, p 165). Since different parts of a system are connected any change or effect in a subsystem influences the outcome in the whole. As Greene puts it a change in any one member of
the social system affects the nature of the social system as a whole (Greene, 2009, p. 166).

System theory is based on the metaphor of ecology. It believes that people and their environments are interdependent. Payne (2005) alleges that people are seen as moving through unique life course. The journey through which they experience life stressors refer to figure 1 below. Coping will occur by changing some aspects of people themselves, the environment or exchange between them. They get feedback about the success of their coping from the environmental signals. Among the resources needed for coping are the capacity to form attachments, competence that a system have needed skills or can get help from others, evaluation of themselves and self-esteem (Payne 2005, p. 150-151). Permeability of systems boundaries determines the level and degree of interaction between a system as well as external environment alleges Parrish (2010).

A systems boundary can be open or closed. Closed boundaries lead to stagnation and isolation which lead to disorganization and inability to transform. Open boundaries in systems are enabled to gather sufficient energy, matter, and information to sustain functioning. According to general systems theory, biological and social systems are open they interact with their environments and across boundaries. The exchanges include sustenance, energy and information, and ensure development, growth and survival (Parrish, 2010, p. 207, Payne, 2005, Greene, 2009).

Systems theory has an important influence on social work practice. It draws attention to the need for the social work practitioner to examine multiple systems in which people function. System theory requires social work assessments to derive knowledge from a number of different system contexts such as family, community and the society as an integrating tool (Greene, 2009). In this study the unaccompanied children can be themselves a system, subs systems are the HVB homes, the children’s’ life experience in host country, workers, as well as other institutions which together interact to influence the unaccompanied children’s experience. The children’s experience was looked at from the system theoretical point, in which it was compared how the subsystems play a role in the system to make a whole or how the whole functioned in relation to its subsystem. As a social work student, the understanding of use of system theory is critical in understanding a client’s problem from diverse angles so as to develop proper interventions. This theory is also used here when analyzing results.
The systems theory even though good as it is to be used for appraisal of clients’ situations, has its limitations; it does not provide guidelines for practice but conceptual model of interpretation. It cannot be generalized to all clients, systems are diverse and people are unique one system that might be a stressor to an individual may not be felt same by another. Parrish states that it is better that professionals pay potential attention to individual circumstances and feelings of less verbal members (Parrish, 2010).

Understanding the unaccompanied children’s outcome or helping them to overcome the stressors of life needs good knowledge of how different sub systems work to influence the system.
5. METHODOLOGY

The method of investigation used is qualitative interviews. A qualitative interview enables an interviewee to think through their views or answers and to express these in their own words (Newman, et al, 2005) Interviews help in learning ones lived world through conversation (Kvale and Brinkmann, 2009). The choice of using semi structured interviewing as a mode of investigation is because of its flexibility. As an interviewer one can choose words, have control of the process,
and make decision on how the order questions are being taken. Interviews also help in collection of extra information i.e. respondent’s background personal characteristics and even the interviewee’s environment can reveal a lot of information to the interviewer. However interviews can have biases as well as lack anonymity that come with use of questionnaires (Nachmias & Nachmias, 1996).

I conducted two interviews using focus group method of interviewing. A focus group method of interviewing is a meeting to discuss a particular subject to hear people’s views about a specific issue, or discuss experiences of a certain situation (Newman, et al, 2005, p. 74). The samples are 3 youths who are 18 years and above but who had come to Sweden without parents. Another group is two social workers, Swedes by ethnic and who are, responsible for taking care of the children at the care home. The language used for interview is Swedish; this is because these children have now lived in Sweden for many years, from their arrival in Sweden through the HVB homes and then schools. Their command of Swedish language is good. Questions used are semi-structured this method of interview is neither open everyday conversation nor a closed questionnaire (Kvale and Brinkmann, 2009, p. 27).

I used questions which I had already formulated as a guide to lead me in the way I was investigating into the lives of the samples. This approach involves a combination of pre-planned and self-generated questions, where self-generation allow interviewer’s some discretion to ask new questions in response to a participant’s answers (Malcolm, 2012, Newman, et al, 2005, Kvale and Brinkmann, 2009). The questions had themes of, life experience in care homes, social support, wellbeing, living as unaccompanied asylum seeing refugee child, working experience in a care home, challenges and opportunities. These themes were followed to give the lived life world of the interviewees and with discretion from the given answers, the next question was taken. The interviews were conducted in a restaurant in a nearby town the choice of my participants. The participants were given the choice to decide the place of the interview, hoping this would be comfortable for them. I sat with the three participants and conducted the interviews with them at the same time. The youth know each other, they are friends so they were comfortable talking even with the presence of the others.

However, when using these methods of investigation there are involved risks. Using focus groups a researcher risks bias if few people dominate the conversation, meaning that without proper control opinion of the quiet group members might not be captured, another risk is sometimes the discussion might run out of the topic. It is an imperative
for the researcher to always steer the conversation back to the topic of discussion, focus groups can be intimidating to other group members. A participant might not reveal something if they are afraid of the presence of other members. Interviews also run risk of biases. Among risks are when the participants are not comfortable with the place where the interviews are taking place, the length of the interviewing time if short might not give in-depth results a good interview authors say, should last to about one hour. Interviews are also costly, when a researcher has to travel to meet participants and also that the presence of the interviewer is imposing and might be intimidating to participants. This lack of privacy may bias results as the respondents might want to be impressive, indicates (Kvale & Brinkmann, 2009, Newman et al, 2005, Nachmias and Nachmias, 1996).

5.1 Sampling

The sample of study comprised five participants; the first group consisted of three male former unaccompanied youth. In this HVB home only male children reside. For this reason, the results of this study are not applicable to female children. If there are any differences of how girls experience their life in HVB homes, it is not covered here. The other two participants are social workers in charge of taking care of the youth at the home. They are also male. The number of samples was limited to five because when the author approached participants with a request to volunteer only three boys agreed to participate. There are not many social workers at this HVB but these two voluntarily agreed. Ethics require that participation be voluntary, the author therefore did not force other workers or former unaccompanied children to participate, neither is it right to coerce anyone to participate if they don’t will. This is why this study only interviewed these five. The time frame was also too short to try going to other homes to find other children or workers to interview.

5.2 Mode of procedure

Having done my internship at a HVB gave me the inspiration to investigate the life experience of these children. I approached the workers at the home with my intention of making a study so that I could accomplish writing the thesis. Consultations were made in regard to the request and eventually two workers agreed to be interviewed. For the youth I called them directly and asked for their consent if they were willing to be interviewed by me so as to help me with information needed for the study. There was no
letter but we spoke orally. I called the youth directly because they no longer live at the home, but now live independently in a town nearby the home. After putting my request to them, as to why I needed their help and for what purpose which was to make a study to complete my thesis writing they agreed to participate.

Having worked at this home as an intern could have biased the study, if the boys responded in a way that was meant to please the author. As for the workers there might be same risk, because we know each other. Another reason that might risk the outcome of the study by these samples is in the event that they willed to participate for the sake of being merciful to the author something that might not be known as none mentioned their intention as per their reason to participate.

I chose not to interview children who were still leaving under the care homes because they are under age of 18, permission is therefore needed by their guardians, to be allowed to talk to an interviewer. This is a good idea and ethically right but given the time limit I tried to reach those who are independent. The aim was to study experiences of the former UASRC who lived in care homes but not those currently living in care.

5.3 Literature selection

As a guide to writing my study I made literature searches in the school library. I searched e-books, searched the LIBRIS, science direct and google scholar from where I limited my search to peer reviewed articles. The years are narrowed from 2000 to current because I wanted to keep as close to what is happening currently in case there might be any difference between now and earlier years the author also judged that current times would give more relevance to the results. I got so many articles and took those that I considered relevant to my study, where relevancy was based on issues that touched on the UASRC’s experiences as asylum seekers, and any that touched on their wellbeing. I also managed to get some studies written in Sweden which I thought was a good supplement to use for the thesis, also googled different web sites of interest such as UNHCR (United nations High Commissioner for Refugees) organization as a body dealing with refugees.

5.4 Credibility

A study is valid when the data collected is sound and well-grounded. Validity means when measuring what researchers is out to measure (Kvale & Brinkmann, 2009). For this reason my yard stick of measure was the research questions which if answered
according to participants’ lived experience gave validity of findings. Being that focus groups can be biased by dominant participants’ I asked another member the same question to give their side of the story. Since semi structured interview was used I even reframed the question in a way that I would require another view different from the one already given, and also pointed who should answer the question, this was a different interviewee not the one who had answered at the first instance. I also used my earlier research literature to see if there was conformity to the interview data. This way I was sure that what I intended to study was concurrent with the measuring object. As construct, the establishment of validity relates to the instrument of measurement, in this case my earlier research was a type of measure used for validity (Nachmias & Nachmias, 1996). The theory here suggests that the environment influences a person’s life; therefore the questions were used to investigate how the former unaccompanied children experienced living in a care home environment.

Reliability is the consistency and trustworthiness of a research finding and if this can be reproducible at other times by other researchers (ibid, p. 245) I avoided the use of leading questions so as to let the respondents not narrate what was pleasing to me but their own lived world. The method of investigation here mentioned means that this study can be reproducible and consistent. Reproducible in that, other study on the same topic in the same manner is likely to give same results. But because of unseen bias as might even have occurred in this study, since such can be difficult to rule out, there is possibility that results might differ. When talking of bias in this study the author means that this study runs risks of bias since I had worked with the participants earlier on as an intern at the HVB home. It therefore might be hard for me to know if they sincerely gave their lived experience without bias or if they said something to please me, same goes for the two workers, though I tried to gain their trust by indicating the importance of them giving me their true experiences to help make a trustworthy study. Being so small a sample might have biased the results, a larger number and neutral participants might have given a different result from ample numbers and probably different experiences. That is why this study cannot be used hundred percent as representative of experiences of UASRC, but it reflects what the UASRC go through.
6. ETHICAL CONSIDERATION

As social worker student we are taught about the ethical consideration when dealing with our clients. We have to always think of protecting client identity at all times. As an ethical consideration I took measures to consult first with the care home and to inform them of my intention to make the study and why I wanted to do it. Interviews were conducted only with those who had voluntarily offered to participate. Voluntarism means that an investigator complies with the principle of informed consent to ensure participants’ freedom of choice, of whether or not to take part in a research project and guarantee that exposure to risk is taken voluntarily (Nachmias & Nachmias, 1996). I explained to the youth the implication of volunteering in participation. I explained to them that all personal information will be handled with confidentiality, whereby their names would not be revealed. As a matter of confidentiality the author promised that there would be no revelation of the participant’s identity, and the information given was going to be used by only me for writing this thesis. Participants were also informed of their free will in participation, they were informed that each was free to answer or not answer any questions that they did not want to and that if they wanted to quite at any time they were free to do so. This is according to Kvale and Brinkmann (2009).

7. RESULTS AND DISCUSSION

Main results from the interviewed adolescents and social workers gave similar responses. Their issues of concern were loss of their families through long time separation, loss of contact with their culture and ways of life, need for social support and networks, emotional wellbeing, language, culture and integration, as well as loneliness and isolation.

7.1 Language, culture and integration

UASRC interviewee 2 said that” in general they were satisfied of the way they were being taken care of. Their relationship with the social workers was not bad, but
sometimes they had, problems of communication because of language differences. This happened before they had gone to school to learn the Swedish language.”

Communication and information constitute an input into a system and an output in interactions with other systems. Communication regulates and either stabilizes or disrupts a system (Brandell, 2011, p.7). Incongruence in communication may result in confusion and anxiety. Parrish (2010) illustrates that social workers are called upon to be particularly sensitive to the implications of language when communicating with people in need, and must choose to approach explaining important concepts in ways that are easy for the users to understand.

Barrie and Mendes (2011) state the importance of placing UASRC within families of the asylum country. It improves quickly their command of language. Contact with friends from the majority culture increases knowledge and skills of necessary language, and behavior patterns, which can facilitate perception of being successful within and belonging to the new country’s culture (Oppedal, & Idsoe, 2015).

Culture is a property that emerges from the interactions among the members of a group. It is a feature of daily living based on relationships and not on individual action. Components of culture according to Greene (2009) are those things, that are relevant to communication across a social boundary, these things are important when crossing cultural boundaries. For this reason system approach has great potential for understanding cultural difference (ibid). It is important to understand unaccompanied child who comes from a country speaking a different language from Swedish. It should not be assumed that these children will understand everything in the same way a Swede would from their early days in Sweden, workers need to be considerate when dealing with the children while they are still new to the Swedish society. Should there be misinterpretation to some things; the Swedes should not take it for granted that the children should have known it but correct them and make them understand the difference of being in Sweden and back in their home countries.

In as much as being able to communicate in Swedish is important in Sweden, these children need to go a pace not stressful to them. They should be allowed the opportunity to have explanations of important issues in languages that they can understand best before they understand the host language.

UASRC interviewee 1 said that, the social workers introduced them to their new environment and the other children, and almost after 2 weeks they went to school to learn Swedish. Up to this time it has been explained to them that here the Swedish
language is the key to get to everything, and they are obliged to learn it. It is also part of the integration because everywhere they go, they must communicate.

For other young people, a white British placement provides an ideal opportunity to integrate into the local community, learning a new language and adapting. The importance of being in a White British placement in order to improve their English language skills was raised by each of the 13 young people interviewed (Barrie and Mendes 2011, pg.9). The importance of culture to the UASRC is also supported by Parrish (2010); she states that culture plays a prime role in influencing an individual’s development. Children’s learning necessarily occurs in the context of their culture, including their family and environment, a precursor to systems theory and its influence on the context provided by the environment on an individual’s behaviour (Parrish, 2010, p.206).

7.2 Children’s loss and emotional well being

Sadako Ogata in UNHCR report 1994 mention that ‘Children are dependent. They need the support of adults, not only for physical survival, particularly in the early years of childhood, but also for their psychological and social well-being (UNHCR, 1994,p.1) Upon arrival in a new country unaccompanied minors usually have to cope with the loss of loved ones, loss of culture and associated identity (Raghallaigh and Gilligan, 2010, pg. 1).

UASRC respondent1 said, “Sometimes we are upset because of lack of contact with our families and a long time to wait for the Migration decision to get residence permit.” Problems for UASRC are that they are psychologically distressed over issues of grant of asylum and broken family ties left behind, as indicates Thommessen, et al. (2015, p. 6) despite having found temporary safety in the Swedish host society, their initial memories were influenced by the uncertainty of not knowing what was going to happen in the future, worrying about the outcome of their asylum applications and their families left behind.

According to Brandell (2010, p. 2010) when attachments are threatened or lost, intense feeling of distress result; anger, protest, despair and anxiety are emotions typically associated with separation. Practitioners can understand that the upset of UASRC’s behavior, stem from loss and separation from their attachment figures. Their families left behind in the home countries or displaced during the forced migration. These children need empathy from the social workers.
Payne (2005, p. 151) alleges that, in using systems theory, people are seen as moving through own unique life course. In the course of movement, life stressors, transitions, events and issues that disturb the fit between them and their environment, causes disturbances to an extent that they feel they cannot cope. UASRC in the same way are affected with stressors, finding them in a foreign country where everything is new to them and given their tender age are issues that are likely to affect their wellbeing, a point that social workers should take into consideration when dealing with UASRC.

UASRC interviewee 3 said, “One never knows if the decision will be positive or negative, so if it takes a long time it is boring”.

Reaching adulthood has a strong impact on the psychological well-being of unaccompanied and separated children in general, it is worse for those seeking asylum or being granted international protection, (UNHCR/ council of Europe report, 2014).

Effective social work practice needs to understand the roles played by the mental and physical responses to stress (Parrish, 2010). Individuals may experience stress as anxiety, which might be acute or chronic manifesting it according to their developmental social and personal variables. Social work interventions need to look at the bio- psychological perspectives of an individual, particularly where trauma or stress is involved. In dealing with unaccompanied child going through such difficult time such as mentioned by UASRC 3 above, the use of system approach by a practitioner will be of importance such as applying stress management, or counselling (ibid).

For children who may have moved away from family, friends, locations and a sense of entitlement to a home, the need to belong to someone, to somewhere, becomes a conscious goal, and the refurbishment of ordinary life takes on a precedence that is at times vivid and urgent (Kohli, 2011, p.5).

Young asylum seekers and refugees may have experienced a range of pre-arrival traumatic experiences, and the sense of loss, grief and dislocation may be further compounded for those who arrive unaccompanied, without the support of their family members (Barrie and Mendes, 2011, p.6). Barrie and Mendes statement here shows the many loses unaccompanied children go through. They are dislocated from family and friends and their homes and natural environments all which might have been through traumatic events.

UASRC interviewee 3 said, “That he can’t say that he witnessed abuse, but there is a lack of a certain family or parenthood love and that, he feels isolated and lonely in the new environment.”
UNHCR report 2014 found that in Sweden, when unaccompanied and separated children reach adulthood while undergoing asylum procedure, they lose their guardian. Their case is transmitted to the Migration Board, where the young adults themselves are in charge of following up with a contact person assigned to them. It is done irrespective of whether the asylum claim was lodged while the person was still a minor. The contact persons’ responsibility at the Migration Board is limited to following up on the case administratively, which excludes advising or counselling the young adults on their asylum claims (UNHCR/ council of Europe report, 2014).

Isolation is not good for a person’s wellbeing. These youth might be affected in their later life because they probably lacked secure attachment when they were young and growing up. Brandell stipulates that ‘interactions between children and their caregivers form the basis of enduring behavioral and emotional patterns that will shape all future relationships (Brandell, 2011, p.652). If these children are not securely attached while developing they risk turning out with behaviors detrimental to their wellbeing. When a young person is faced with distress or threat, they seek out an attachment figure for comfort. It is a normal reaction in a threatening environment that is central to a child’s survival. Once a secure base with an attachment figure is established, the individual begin to relax and cope with their current situation (Groak, et al, 2010, Parrish, 2010, Greene 2009 Brandell, 2011).

Social worker 2 stated that, “in regard to communication with parents and networks, social workers have free telephone they can use to communicate with parents and relatives outside of Sweden if there is need, though it has limited conditions free telephones meaning that the expensive cost of talking abroad is paid for by authorities and limited means that they have to keep the conversation short”

Family members abroad may represent a crucial source of emotional support in terms of perception of belonging and being valued and loved. Having contact with the family abroad implicates a cultural continuity that may provide the children with a sense of a bridge between the past, the present that sustains identity and facilitates further development of culture competence (Oppedal & Idsoe, 2015).

7.3 About religion and culture

UASRC intrevewee1 said, “Some of the adolescents worry because of lack of places to pray and are obliged to travel to other regions.”
As indicated by Raghallaigh and Gilligan (2010) for some of the UASRC religion is important. Different coping strategies are needed by practitioners when dealing with unaccompanied refugee children. Raghallaigh and Gilligan (2010) found that religion played a central role in the unaccompanied youths coping efforts. Religion can serve as a bridge between the old and new ‘worlds’ of the unaccompanied refugee children, in terms of their relationships with God and in terms of their religious practice. Religion and faith in God was usually dominant features of UASRC lives in their countries of origin. When they moved away from these countries, they carried religious faith and its associated rituals with them (ibid).

Understanding the family system within the context of its interaction with other societal social systems such as houses of worship and schools is needed for social workers working within system theory (Greene, 2009).

UASRC interviewee 3 said that, “that they were got all meals three times a day as is normal even though they miss their traditional foods”.

Providing extra foods such that have traditional asylum seekers’ tastes are good for communal meals, or providing other material assistance can give vital emotional support and sustain culture crisis, alleges Ogata (1994, p.1) in UNHCR refugee children guideline report. Confirming the importance of culture continuity of children, Ogata (1994) quotes the CRC (Conventional Rights of the Child preamble) "The importance of the traditional and cultural values of each people for the protection and harmonious development of the child" which must be taken into account.

When dealing with people who have recently immigrated, a social worker should consider PCS (Psychological, cultural social / structural) difficulties of the immigrants, (Parrish, 2010) individually, persons who have immigrated may experience traumatic loss of former lifestyles, of language, religion, and diet that were taken for granted. General systems concepts, utilize ecomaps by social workers to provide diagrams for depicting people’s relationships and relevant systems to establish the point of stress (ibid, p. 214, Greene 2009).

UASCR interviewee 3 recounted that “they experienced a lack of family connections and networks; it takes a long time in a new country to get to know or reach other people that come from same country of origin who currently live in Sweden”.

For unaccompanied minors the establishment of close relationships with co-ethnic peers after resettlement may provide a sense of cultural continuity, of being understood, and of sharing experiences and history. Similar to the family abroad, co-ethnic friends
may contribute to the maintenance and further development of the refugees’ heritage culture competence (Oppedal & Idsøe, 2015, p. 2).

UASCR interviewee 2 said “they hope that social workers should get enough information about other members from their cultures and who live in different HVB homes so that they can pass this information to the newcomers on how they can get in touch with these other children on the different HVB homes, other children who speak the same language so that they can network with them, because it is kind of healing when someone communicate with another in the same mother tongue”.

According to Ogata (1994), culture, is important for all humans it helps restore wellbeing. It is therefore important that it is maintained even in refugee and asylum seeking children. A refugee movement disrupts nearly every aspect of a culture. The social problems caused by the emigration movement of individuals, families and communities, can dramatically affect the coherence of their culture. Social rules, values and controls begin to break down when the social group, families and communities which provides the framework for cultural application disintegrates, through immigration (Ogata, 1994, p.10,).

7.4 Health care

UASRC interviewee 3 said “they were in permanent contact with the health center and/or the hospital when needed. When they need social, psychological or emotional support they had counselors at the Red Cross which the social workers booked for them”.

Being unaccompanied, and a refugee might burden the emotional wellbeing of separated children and adolescents. Migration can result in the development of diverse emotional and behavioral problems, such as post-traumatic stress, depression, anxiety, and fear of recurrence, guilt, separation fears, grief, and withdrawal, eating and sleeping problems, identity confusion and delinquent behaviour (Derluyn and Broekaert, 2007).

Individual events are kept in mind as fully detailed memories, while massive traumatic events provide a psychological shield, causing denial and a feeling of unreality. But, by using appropriate coping strategies and inner resources, and with the aid of support from the people around the affected, many who have experienced traumatic events can achieve mental well-being. Some however can develop post-traumatic stress disorder and therefore social support is important for both mental and physical health (Wallin & Ahlström, 2005).
Social worker 1 stated that “the UASRC’s health concern is taken seriously, they have a plan like other children in the community they get vaccines, meet dentists regularly, they go to medical consultation like other children in the community when there is need for it”.

7.5 School and Education
Social worker 2 said that “all the children are not attracted by school, but the social workers try to motivate and help the children, by explaining to them that the school, especially the language, is the key to everything, because no one can communicate in a new home country without it”.

According to UASRC interviewee 1 “the background and school level of the unaccompanied children is not considered one finds themselves in class below, or above ones level of previously attained education. The mismatch makes education not interesting if one falls in the wrong category”.

Access to education should be better supported, including, after they have reached adulthood, as it plays a critical role in their transition UNHCR/ council of Europe report, 2014, p. 10-11).

Thommessen, et al, (2015) states that education was found to be an important component of integration according to unaccompanied refugee youth as well as their service providers interviewed both in Sweden, and in Scotland. The participating youth expressed not only the importance of practical, legal, and social support, but also to learn focusing on education and the future.

7.6 Social Support
Social support is beneficial on health and wellbeing by itself. Supportive networks provide individuals with a sense of stability, being valued, esteemed and sense of predictability in life situations, social support may either reduce the risk of negative behavior and exposure to stressful events, or increase competencies that aid people in dealing with stressful events (Oppedal & Idsoe, 2015).

Social worker 1 states that “those who are over 18 are in contact with social workers in Social services, because they no longer live in HVB homes. They are in the community like other adolescents in Sweden, but always under supervision of HVB staff until they are 21 years old”. Moreover when they are over 18, the social workers communicate with the social services to help the adolescents according to their wishes,
because there are different opportunities to get a job or practice in different projects organized by the municipality.

Facilitation of adaptation and well-being in the host country is development of close, meaningful social relationships. Evidence reveal suggestions that the perception of social support contributes to well-being in refugee youth and similarly, that the lack of social support is associated with increased mental health difficulties (Thommessen et al, 2015).

Social worker 2 stated that “the social support is for everyone without any consideration, everywhere they want to go, hospital visit, Red cross, school meeting, etc. they get assistance especially translators in any language so that they can express themselves at ease. Every two weeks the children have a meeting (husmöte) with social workers together with translators to express themselves on how everything is going on”. Parrish (2010) in concurrence with the importance of social support, indicates that, dwellers of an environment will thrive and develop physically, emotionally and socially when environments provide sufficient resources such as social support, faith communities, pets, friends, family and neighbors. The result is alleviation of stressful life events.

8. CONCLUSION

The aim of this study was to find out the experiences that former unaccompanied immigrant children, and social workers had of living in a HVB- home.

The results point out that, overall their experiences in the homes have been good, although the children mentioned some problematic issues. The unaccompanied children tried to adapt to the new environment. Although social workers do their job, the findings show that there is a lack of parenthood environment the children miss their attachment figures from their countries of origin. Language the main tool of communication and integration the study found is a problem to the UASRC, the problem can be minimized if UASRC can be attached to Swedes to learn more. Reasons for threat to the children’s wellbeing was the worry of reaching adulthood and having had no decision on their status, it is better that the concerned authority take up this matter into consideration and speed up the necessary steps as this study reveal.

Since this study covered only male adolescents over 18 years, the author suggest for future researches to focus on unaccompanied children under 18 years as well as on female children. Many unaccompanied children are coming to Sweden from war torn
countries which indicates the need for further research on their situation living in the host country.

**Reference**


