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**FOSTERING A NEW APPROACH:
HOW ALTERNATIVE CARE MODELS IN GREECE
ARE MEETING UNACCOMPANIED MINORS'
RIGHTS**

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requirements for the degree of Master of International
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ABSTRACT

Unaccompanied minors seeking refuge in Greece are met with woefully inadequate care structures for meeting their needs. Despite the United Nation's Convention on the Rights of the Child [CRC] stipulating children's entitlement to appropriate care arrangements, there is a gap between this rhetoric and the reality of alternative care provision for minor refugees. Significantly, institutions are prioritised over family-based solutions. There is also a lack of research addressing the processes of power and exclusion in refugee hosting countries, and how these structural conditions influence unaccompanied minors' situations and their wellbeing. To address these issues, this study adopts a socio-political construction of children's rights to understand both how different care models are meeting unaccompanied minors rights, and why these models were selected.

In conceiving rights as a socio-political process, this thesis addresses issues of power and agency in the navigation of rights. Tensions between restrictive migration policy and commitment to the CRC will be shown to compromise care provision for unaccompanied minors through conscription to control over care. Despite the overarching structural limitations, young people in this study find avenues for exercising their agency, albeit often risky ones. What emerges is a need to understand both young people's vulnerabilities and strength, and how they are both these things in different parts of their lives.

This thesis presents results of fieldwork largely undertaken in Athens over a six-week period in 2018. A cross-section of care providers engaged in the welfare of unaccompanied minors participated in the study. Also interviewed were the foremost experts in Greece's child protection system: young people who themselves have experienced these care models. Findings reveal the impact migration policy has had in undermining care provision for unaccompanied minors, and the corresponding tensions that emerge for NGOs looking to address urgent needs and find sustainable solutions. This study recorded that rights violations and risks are occurring. It also explored the barriers and opportunities to expand the spectrum of care options and strengthen optimal care, which were identified as family and community-based alternative care initiatives.

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LIST OF ABBREVIATIONS

BIA	Best interests assessment
BID	Best interests determination
CELCIS	Centre for Excellence for Looked After Children
CRC	The United Nation's Convention on the Rights of the Child
EKKA	National Centre for Solidarity - E.K.K.A
EU	European Union
IAWG-UASC	Inter-agency Working Group on Unaccompanied and Separated Children
IOM	International Organization for Migration
INGO	International non-government organisation
NGO	Non-government organisation
RBA	Rights-based approach
RCI	Residential care institution
RIC	Reception and Identification Centres
SIL	Supported Independent Living
UN	United Nations
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations Children's Fund

CHAPTER 1: INTRODUCTION

Introduction

The provision of safe living arrangements is fundamental to protecting children from exploitation and abuse (Human Rights Watch, 2008), yet unaccompanied minors seeking refuge in Greece are met by a huge shortage of appropriate accommodation and a system lacking comprehensive protection (Human Rights Watch, 2016a). Greece's already struggling child protection system has been further stretched by increases in refugee children in recent times (UNICEF, 2014). As at November 2018, there were an estimated 3,680 unaccompanied minors in Greece, and space for only approximately one third of them in long-term accommodation structures (National Centre for Solidarity - E.K.K.A [EKKA], 2018). A lack of capacity in the care system means unaccompanied minors are placed in open sites, reception centres or detention. Some reception facilities hosting are twice as many children as they are designed for, in deteriorating and unsafe conditions (UNICEF, 2017a).

The United Nations Convention of the Rights of the Child [CRC] (United Nations [UN], 1989), of which Greece is a signatory, stipulates all children are entitled to appropriate alternative care arrangements until the age of 18, including the prioritisation of family-based care models over institutions. However, despite arguments foster care and supported independent living are both more cost effective and conducive to unaccompanied minors' needs and rights, they have received little coordinated government support in Greece (CARE et al., 2017). Therefore, in exploring the factors influencing care provision, this research aims to both understand how rights are being interpreted in the local context, and the social and political processes affecting practice. This study takes a rights-based approach [RBA] to analyse these issues, due to RBAs' potential to call the state to account (Gready, 2008) and reposition problems as unacceptable violations (Jochnick, 1999).

Key definitions and guiding principles

The CRC provides a concrete definition of the permanent entitlements to be provided for all children. The CRC's 41 articles are built around the cross-cutting principles of non-discrimination, a child's best interests, the right to life and development and the right to be heard. These principles call for the protection of children from all forms of discrimination, the prevention of harm to all children, the provision of basic needs and children's participation in decisions affecting them (Kaime, 2013). A child is defined both in the CRC and throughout this thesis as someone below the age of eighteen years (UN, 1989, Article 1). As this thesis explores care provided to unaccompanied minors in the context of migration, the term unaccompanied minor is used in reference to children under 18 who are traveling independently from their parents or caregivers, or whom have become separated from them (Inter-agency Working Group on Unaccompanied and Separated Children [IAWG-UASC], 2017). Such children have migrated across international borders and away from their usual place of residence (Save the Children, 2017).

Unaccompanied minors in the context of this thesis refer to children who are seeking asylum in Greece or who have gained refugee status. According to the 1951 Convention Relating to the Status of Refugees, a refugee is defined as a person outside their country of origin and who has a "well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion" (UNHCR, 1951). Expanded definitions include persons fleeing countries of origin due to civil disturbance, conflict or substantive human rights violations (IAWG-UASC, 2004). An asylum seeker is someone whose request for sanctuary is still to be processed (UNHCR, n.d.). By incorporating both these situations and statuses, this thesis' inclusive definition acknowledges children in these circumstances often have similar needs. However, distinction is required at times based on asylum seekers' relative vulnerabilities due to increased insecurity from a lack of legal status (Kohli, 2007). This definition also acknowledges the convention is applicable to "all children without discrimination of any kind" (UN, 1989, Article 2).

Study background and rationale

An increase in migration trends in recent times has been felt disproportionately in frontline countries like Greece (Greenhill, 2016; Niemann & Zaun, 2018). The country faces very real challenges in responding to the needs of unaccompanied minors. However, this does not absolve their responsibility to protect young people arriving on their shores (Human Rights Watch, 2016a). As duty bearers, the state is accountable to carry out obligations to meet rights holders' legitimate claims (Social Protection & Human Rights, n.d.), and ensure compliance of non-state actors (Gready, 2008). An important line of enquiry therefore emerges as to the barriers rights holders face in claiming their rights, and why duty bearers may be unable or unwilling to implement rights (Schmitz & Mitchell, 2016). In exploring these dynamics, this study's rights-based approach [RBA] aims to centralise the political nature of development, to show the limitations of technical solutions and the need for socio-political action (Gready, 2008).

The situation in Greece represents an “emergency within an emergency” with a child protection crisis positioned within the wider context of forced migration to Europe (Digidiki & Bhabha, 2017, p.1). Adding to the complicated nature of care provision, child protection violations can be representative of insufficient political will to protect unaccompanied minors' rights (McLeigh, 2013). In aiming to understand the processes influencing care provision, this thesis will explore how the right to appropriate care can be routinely complicated by political mandates, international relations and border policies (Del Valle & Bravo, 2013). Rights are understood throughout thesis as a negotiation of power and agency (see Chapter 2).

On top of political factors, socio-cultural considerations can also influence the interpretations of rights (Reynaert, Bie, & Vandeveld, 2012), and correspondingly, the prioritisation of different models of care (e.g. Opening Doors, 2015). In considering these factors, rights emerge as “an unstable translation of ideas of right and wrong that exist in the real world, and based on lived experiences”, over a purely universal process fixed in international legislation (Hanson & Nieuwenhuys, 2012, p. 3). Therefore, children's rights are not just a product of international deliberation, but their conception is continually and contextually crafted in response to the issues

young people and their communities face (Hanson & Nieuwenhuys, 2012). Consequently, the knowledge generated from this study aims to provide valuable insights into the contextual considerations accompanying care practices and children's rights, and contribute to understandings of how alternative care practices can be strengthened.

Why models of care matter

When a child is deprived of their family environment, the CRC specifies they are entitled to appropriate alternative care arrangements (UN, 1989). According to the United Nation's (2010) Guidelines for the Alternative Care of Children, alternative care may refer to the following models:

- a) Family-based placements: Includes kinship care, foster care and kafala. Kinship care involves placement of a child formally or informally with an extended family member or other known to the child. Foster care involves placement into a domestic family environment by the competent authority (UN, 2010). Kafala refers to the Islamic tradition of child guardianship (Rotabi, Bromfield, Lee, & Sarhan, 2017), within which the child is usually placed in a family closely related to the natural family (Assim & Sloth-Nielsen, 2014).
- b) Residential care: Defined as group living arrangements in which children are looked after in a designated facility by paid staff (Better Care Network, n.d.-a), including transit, short and long-term centres (UN, 2010).
- c) Supervised Independent Living [SIL]: Older children or young people receive monitoring and guidance over full supervision. They may live independently or in a group home (Government of Liberia, Ministry of Health and Social Welfare, 2014).

Family-based care models, including foster and kinship care, are widely recognised as compatible structures for meeting unaccompanied minors' development needs. However, few structured systems exist in Europe for this group of children (Schippers et al., 2016). Foster care is often considered most appropriate for younger children, and in accordance with dominant expert opinions, is especially pertinent for children

under three years old (United Nations, 2010). Comparatively, SIL provides adolescents with housing and access to social support to assist them in the development of life skills and transition to adulthood (UNHCR, 2018a). Despite the advantages of these models, large-scale residential care is often prioritised in the European context; an approach associated with greater incidences of violence, abuse, criminal activities and physiological distress (UNHCR, 2017a). The Guidelines for the Alternative Care of Children state residential care “should be limited to cases where such a setting is specifically appropriate, necessary and constructive for the individual child concerned and in his/her best interests” (p.5). The guidelines further describe where large residential care institutions exist, alternatives should be developed alongside a deinstitutionalisation strategy. Care should also be delivered in settings as close as possible to a family or small group.

A country-specific analysis on care provision

The above recommendations are juxtaposed against the situation in Greece, where the predominant model is residential care (Opening Doors, 2015); there has been a lack of coordinated support for alternatives including SIL and foster care (CARE et al., 2017); and dangerous conditions have been reported across reception systems (Digidiki, & Bhabha, 2017; Oxfam, 2019). The urgency for more knowledge generation is therefore evidenced in a need to further understand why substandard conditions permeate across the child protection system for unaccompanied minors, and why care models such as SIL and foster care remain underdeveloped (see Kallinikaki, 2010; Lumos, 2016; Opening Doors, 2015). Furthermore, studies on the care of unaccompanied minors have only become prominent in the last decade, meaning significant knowledge gaps on the effects migration policies have on children’s rights and wellbeing remain (McLeigh, 2013).

Research aim and questions

Based on the above discussion and gaps identified in relation to the care models available to unaccompanied minors in Greece, a critical conceptualisation of children’s rights is used in this study. The purpose of critical studies is to uncover non-explicit processes and promote progressive social change (Murray & Overton,

2014). A critical approach also helps ensure rights maintain their socio-political frame of reference (Reynaert et al., 2012).

The central aim of this study is summed up as:

To explore alternative care approaches for unaccompanied refugee and asylum-seeking children in Greece from a socio-political rights based perspective.

From this aim, three research questions have been developed:

- 1) How does the CRC apply to alternative care options available to unaccompanied minors in Greece?
- 2) What social and political processes are influencing the implementation of unaccompanied minors' right to appropriate alternative care in Greece?
- 3) How are alternative care approaches working in practice in the Greek context?

This study aims to move beyond purely legal conceptions of rights to analyse the underlying norms, knowledge and logics that shape practices in children's rights (Reynaert et al., 2012). The conceptual framework guiding this thesis is detailed in the following chapter, with a full thesis layout presented below.

Thesis layout

This thesis is made up of eight chapters:

Chapter 1 has briefly introduced the study, the relevant background material and the rationale for pursuing this line of enquiry under a socio-political framework. The research aim and questions have been stated.

Chapter 2 situates the care of unaccompanied minors in Greece into a socio-political conception of rights. An overview of rights-based approaches, the relevance and

limitations of the CRC and a critical conception of rights is presented. The importance of considering the power and agency in the process of realising rights is discussed, alongside the need for context specific knowledge.

Chapter 3 focuses on the methodological make-up of the study, including positionality and reflexivity, ethics and methods used in the field. The data analysis process is also discussed alongside limitations and additional areas for research.

Chapter 4 considers the situation of unaccompanied minors within wider regional and local politics, including the framing of migration issues and the corresponding EU responses. The effects of securitisation on the reception of unaccompanied minors is also explored, alongside some of contextual factors shaping care provision.

Chapter 5 presents additional context including the literature surrounding different models of care, and the rationale and considerations for expanding the spectrum of care options. This background is presented alongside research findings pertaining to the different care models.

Chapter 6 is a second results chapter. The social and political processes belying rights access and implementation are recorded. Participants detail the reality of care implementation on the ground and how wider regional politics have influenced practice.

Chapter 8 discusses the dynamics of care provision including how constructions of vulnerability and childhood are interweaved with understandings of models, the way in which power and agency influences rights and how a RBA applies to the reception and care of unaccompanied minors in practice.

Chapter 9 contains concluding remarks correlating the research's aims and key findings.

CHAPTER 2: A SOCIO-POLITICAL CONCEPTUALISATION OF CHILDREN'S RIGHTS

Introduction

This chapter reviews and discusses relevant literature in relation to the study's conceptual framework. A rights-based approach [RBA] to development is adopted in this thesis due to its potential to assist marginalised groups to assert their rights and achieve more equal resource distribution (Cornwall & Nyamu-Musembi, 2004). In the case of unaccompanied minors, the United Nation's Convention on the Rights of the Child [CRC] is regarded as the guiding framework for children's rights. Such an agreement adds value through the legitimacy of operational practice based on extensive international discussion and agreement (Moser & Norton, 2001). In this research, the CRC also serves as a basis for how different models of care are able to meet children's rights, based on its guiding principles of a child's best interests, right to survival and development, non-discrimination and participation (Kaime, 2013).

A rights-based framework is explicitly political meaning it also offers the opportunity to reflect on development's inherent power dynamics (Cornwall & Nyamu-Musembi, 2004). Consequently, this framework also introduces ideas of power and agency intrinsic in the process of navigating rights (e.g. Eide & Hjern, 2013; Watters, 2008), and aims to move beyond purely legal conceptions of children's rights, towards a critically-reflective approach that analyses the underlying norms, knowledge and logics shaping practices (Reynaert et al., 2012). Such an approach is particularly relevant in the context of unaccompanied minors, where tensions have emerged between universal children's rights and enforced immigration control (Bhabha, 2009; Vitus & Lidén, 2010). Differences in the care arrangements available, and deemed acceptable, for migrant versus local children also concurrently appear (e.g. Human Rights Watch, 2016a; Human Rights Watch, 2016b; Digidiki, & Bhabha, 2017).

By taking a critical approach to children's rights, the different interpretations and constructions of rights are acknowledged in order to allow greater comprehension of

the wider children's rights framework (Reynaert et al., 2012). The aim of this approach is to better conceive children's rights as a socio-political process (Josefsson, 2016). This thesis will argue rights claims are processed into outcomes through multifarious power and control structures which can be understood through an analysis of the social and political processes affecting the implementation of rights (Moser & Norton, 2001). Children's rights have a greater chance of maintaining their social and political frame of reference, over becoming an ideology, when the underlying norms and beliefs are questioned (Reynaert et al., 2012).

This chapter begins by first exploring the relevance of a rights-based approach to the situation of unaccompanied minors, and the CRC as the universal standard for children's rights. In shifting towards a critical conception of children's rights, a post-development view of rights is outlined. Tensions in rights realisation are then detailed, alongside how the concepts of power and agency can be used to navigate these.

Adopting a rights-based approach to unaccompanied minors' care

International human rights law outlines governments' obligation to "to act in certain ways or to refrain from certain acts, in order to promote and protect human rights and fundamental freedoms of individuals or groups" (UN, n.d., para 2). The last 15 years has seen human rights take a central position in international development discourse (Miller, 2017). This wide adoption has been linked to the attractiveness of rights' perceived moral certainties and capacity to hold the powerful to account (Stevens, 2016). Strengths of RBAs in the context of migration include the creation of a mechanism to help reconcile the interests of power states and inevitable involuntary migration (Hathaway, 1991). International conventions such as the CRC also provide a baseline for the analysis of policy and practice in relation to refugee and asylum-seeking children (Cemlyn & Briskman, 2003). The applicability of a RBA to the situation of unaccompanied minors is detailed in this section, by first exploring rights-based approaches to development, the CRC as a tool for child protection and the relevance of this approach to unaccompanied minors.

Rights-based approaches to development

RBAs to development are centred on common principles including accountability, equality, participation, transparency and empowerment (Gready, 2008). The incorporation of RBAs to development recognises the links between rights denial, vulnerability, impoverishment and conflict, and therefore the need to incorporate RBAs into both policy and practice (Gready & Ensor, 2005). Modern conceptions of human rights took root in a post-WWII era against a backdrop of rising inequality, the atrocities of war and a world divided by colonialism (United Nations, 2007). This period saw important evolutions in the human rights movements with the establishment of the United Nations, the Universal Declaration of Human Rights and subsequent adoption of legally binding treaties and conventions (Gready & Ensor, 2005), including the CRC in 1989 (UNICEF, 2014).

RBAs aim to promote “human dignity through the development of claims that seek to empower excluded groups and that seek to create socially guaranteed improvements in policy” (Uvin, 2004, p. 163). RBAs reveal the causes of underdevelopment to be political in nature (Schmitz & Mitchell, 2016), to help shift the terms of debate from deprivation to development as an entitlement that can be operationalised through political and legal contract with the government (Gready, 2008). This reorientation also shifts the terms from needs to rights, to consequently bring issues of accountability centre stage (Uvin, 2007). The “achievement of human rights as an objective of development” then becomes the main goal of RBAs (Overseas Development Institute, 1999), with the principles of RBAs providing a mechanism for reframing problems as intolerable violations (Jochnick, 1999).

With the problem redefined to acknowledge rights as an objective of development (Overseas Development Institute, 1999), the solutions also move to focus on the claims, duties and corresponding mechanisms for respecting and adjudicating the violation of rights. An accountability relationship is formed between rights holders and duty bearers (Schmitz & Mitchell, 2016). Duty bearers are actors with responsibilities to respect, promote and realise human rights, and rights holders are the individuals or groups with entitlements relationally to duty bearers. A human rights approach to development recognises entitlements should be honoured,

protected and delivered, and considers rights holders active agents in rights realisation and development (UNICEF, n.d.). As such, RBAs may be operationalised through building rights holders' capacity to forward their claims and duty bearers to meet their international commitments (Cornwall & Nyamu-Musembi, 2004). The value of RBAs therefore becomes less in the positioning of rights as strict legal certainties, and more on their ideas of claims and processes, or ends and means (Sengupta, 2000). In the migration context, RBAs applicability can be found in the provision of a benchmark for good practice and policy (Cemlyn & Briskman, 2003). International conventions such as the CRC provide a moral and legal standard to protect all children's rights, regardless of immigration status (Pobjoy, 2015; UN, 1989).

The Convention on the Rights of the Child

With its significant number of signatories, the CRC, together with its optional protocols, is one of the world's most successful international human rights instruments (Milne, 2015), and the main legal tool for protecting children (UNHCR & UNICEF, 2014). The CRC is considered a huge milestone as prior to its implementation, children were not explicitly recognised in any international treaty, nor had the correlation between children's wellbeing and societal strength been acknowledged (UNICEF, 2014). The CRC was developed to protect minors from abuse and neglect, in particular from powerful states (Pobjoy, 2015). Once ratified, countries commit to protecting children's rights within their territories (Milne, 2015). The CRC provides a near-global subscription to a shared legal framework for establishing children's agendas (UNICEF, 2005). Therefore, the convention is seen as the most comprehensive articulation of a state's minimum obligations to children, both generally and in the context of migration (Pobjoy, 2015).

As touched on in Chapter 1, the CRC's central principles include the best interests of the child (Article 3), non-discrimination (Article 2), the right to life, survival and development (Article 6) and the right to be heard (Article 12) (UNHCR & UNICEF, 2014). Kaime (2013) details how these principles are elevated due to their cross-cutting nature, and should be used as a reference in any policies, actions or interventions relating to children. The best interests principle requires decision makers to assess the long-term impacts of an action on a child's welfare and development.

The principle should be read within the context of the full CRC, with respect to the range of rights children should be afforded. The principle is also applicable to all children within a state's authority. Provisions cannot be limited on the basis of factors such as immigration status – something further enforced by the guarantees of non-discrimination described in Article 2 (Pobjoy, 2015). In ensuring a child's best interests, a child's right to be heard through participation is necessary for effective protection (Ruiz-Casares, Collins, Tisdall, & Grover, 2016), and critical to the identification of a durable solution for unaccompanied minors (UNHCR & UNICEF, 2014). The UN Committee on the Rights of the Child (2009) explain participation as an ongoing process of dialogue based on mutual respect, within which children can help shape the outcome of decisions affecting them. Combined, these principles help ensure children's right to survival and development. The right to survival is an essential precondition to ensuring rights can be enjoyed and encapsulates life's social, cultural, economic and political aspects. The right to development gives weight to the importance of nurturing all aspects of a child. The principle therefore serves to emphasise the need for a holistic approach to finding durable solutions for refugee children (Kaime, 2013).

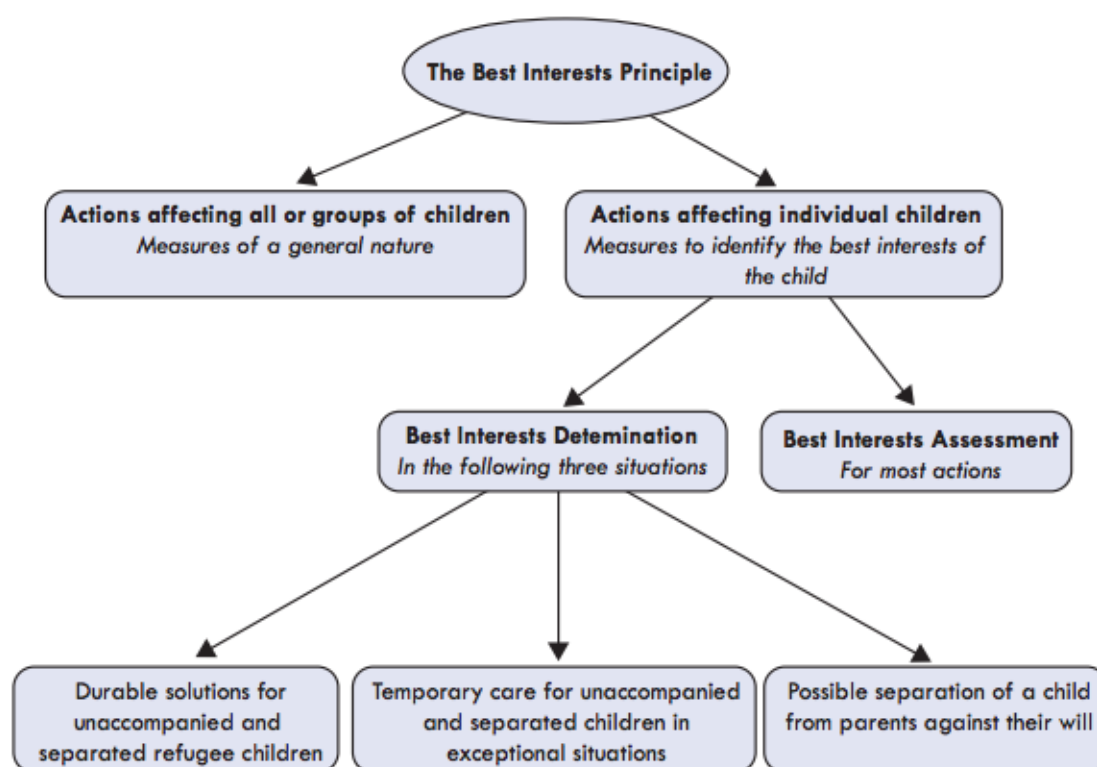
Applying the Convention on the Rights of the Child to the situation of unaccompanied minors

The CRC's guiding principles also highlight how, comparative to other international documents pertaining to children's rights, the CRC seeks to recognise both minors' vulnerability and agency, and seeks a balance between them (Nykänen, 2001). This balance is important in the context of unaccompanied minors, where variance in childhood experiences across culture and context can lead to different rates of transition to adulthood, and therefore different care arrangement needs (De Berry & Boyden, 2000).

The CRC also acknowledges a family's role in care provision for children, and pays special attention to the unique protection and assistance needs of those outside of their family environment, be it temporarily or permanently (UNHCR & UNICEF, 2014). In determining care arrangements, the best interest principle is applicable to all actions affecting unaccompanied children arriving in mixed migratory flows in Europe

(UNHCR & UNICEF, 2014), and must “be respected during all states of the displacement cycle” (UN Committee on the Rights of the Child, 2005, p.8). Several principles exist to help guide best interest evaluations. For example the UN Committee on the Rights of the Child’s (2013) General Comment No. 14 highlights major consideration should be given to the child’s views and identity. If the child is placed in out of home care, the importance of maintaining family and other relationships as well as ensuring a safe and stable environment is centralised. The UNHCR Guidelines on Determining the Best Interests of the Child shows when the principle should be operationalised in relation to the care of unaccompanied minors, as demonstrated in Figure 2.1.

Figure 2. 1: Application of the best interests principle



Source: UNHCR, 2008, p.22

As shown above, a best interests determination [BID] is required in decisions regarding alternative care arrangements. A BID is a formal procedure with strict safeguards and which ensures adequate participation of the child, involves decision

makers with relevant expertise and weighs all considerations to make a judgement on the action deemed most conducive to the child's best interests. Comparatively, a best interests assessment [BIA] is done by staff making decisions related to an individual child to ensure the action gives primary focus to their best interests (UNHCR, 2008).

The best interests principle can be used independently of traditional refugee protection instruments to create a new category of protection for unaccompanied minors, with domestic decision makers obliged to evaluate their claims (Pobjoy, 2015). The CRC therefore provides a vital moral and legal standard for children's treatment above key refugee protection documents such as The Refugee Convention (Pobjoy, 2015). Central to the CRC's comparative strength is both its wide adoption (Milne, 2015) and the potential of the best interests principle to provide a more child-friendly tool for assessing the protection needs of asylum seeking children (Pobjoy, 2015). Moreover, the CRC serves as a reminder that unaccompanied minors are above all children first, regardless of their immigration status, and so are unrestrictedly entitled to the range of applicable rights (Van Bueren as cited in Nykänen, 2001).

The relevance of a rights-based approach to unaccompanied minors

The CRC committee's country reports frequently mark the challenges children face in accessing basic services in arrival countries (McLeigh, 2013). Likewise, in relation to the care available to unaccompanied minors, disparities often exist in the approach for local versus migrant children (e.g. Hammarberg, 2010). In addressing these issues, RBAs have three key characteristics that can address the barriers to accessing rights as laid out in the CRC. Firstly, RBAs re-politicise development, aiming to address the structural conditions affecting rights provision. Secondly, RBAs call the state to account for rights violations and work to strengthen the capacities of rights holders and duty bearers. Finally, instruments such as the CRC can be leveraged directly and indirectly to address violations. For example, direct legal challenges to impact development outcomes can also indirectly influence the translation of rights principles into social and political processes in the everyday work of NGOs (Gready, 2008). In order for a RBA to maintain its relevance however, this thesis argues the limitations of rights instruments such as the CRC need to be acknowledged and from this a more critical conception of children's rights realised, as discussed in the following sections.

Acknowledging the limitations of the CRC

Treaties such as the CRC may be transformative in their objectives, but they raise issues of compliance globally (Skold, 2013). The failure of governments to deliver on obligations commonly results from deep-rooted inequality and discrimination (Schmitz & Mitchell, 2016). The conflict between care provision and migration policy also leads to an ambiguous position for unaccompanied minors' rights, as stipulated in the CRC, and reveals the reasons why NGO actors are increasingly involved in interpreting children's rights (Eastmond & Ascher, 2011). The limitations of two key principles of the CRC, the best interests of the child and right to participation, are discussed in this section.

In whose best interests?

The subjectivity of the CRC's best interests clause opens the potential for the principle to be mobilised for different ends (Sandin & Hallden 2003; Schiratzki, 2005 as cited in Eastmond & Ascher, 2011). Despite Article 3(1) attempting to bypass limited application of the article due to migration status by creating "an intrinsic obligation for States, is directly applicable (self-executing) and can be invoked before a Court" (Buck, 2014, p. 138), disparity in policy and practice is still easily evident (e.g. CARE et al., 2017; Digidiki & Bhabha, 2017; Human Rights Watch, 2016a). Divergences exists in part because there are variances in legislation internationally pertaining to children's welfare and the degree of leeway or prescription provided to decision makers concerning the best interests principle. This in turn creates a range of directives on the spectrum from no instructions beyond the principle itself, to the strong emphasis on certain values or concerns. Questions are then raised as to whose perspective or agenda these interpretations channel (Ruiz-Casares et al., 2016). Furthermore, in positioning the best interests as a primary consideration in all actions pertaining to children's rights, contradictions in the CRC become apparent through both situating children as competent legal subjects while simultaneously undermining their competence through the exercise of enacting rights on their behalf (Lewis, 1998).

These factors combined begin to highlight an underlying assumption of the CRC: that adults always act in children's best interests (Haydon, 2012). This assumption is challenged by evidence of discriminatory practices and policy (e.g. Galante, 2014; Human Rights Watch, 2016a). Tensions between the best interests of the child and the best interests of the state consequently emerge (Eastmond & Ascher, 2011). Commitment to the CRC means state obligation to enact measures in prevention of discrimination in all forms (Williamson, Gupta, Landis, & Shannon, 2016). States also having a special duty to protect unaccompanied minors, including through the provision of safe accommodation and access to important support services (UN, 1989). However, NGO reports have uncovered many instances of children being excluded from the social services intended for them, to instead push them to live in isolating situations. For example, contrary to UNHCR (2008) Guidelines on Determining the Best Interests of the Child¹, there is a tendency for European countries to prioritise unaccompanied minors' placement in reception centres over foster care (Committee on Migration, Refugees and Population, 2011). The denial of rights becomes centred around disabling notions including the perceived need to adopt measures to deter irregular migration, and that refugee minors' rights are affected by non-citizen status (Crock, 2013), despite the CRC's clauses stating otherwise (UN, 1989).

The problems with participation

Another key principle of the CRC is the need for children's participation in decisions affecting them, however, this too remains challenging in humanitarian contexts (Ruiz-Casares et al., 2016). Cornwall and Nyamu-Musembi (2004) argue the frame of assessment in a rights-based interpretation of participation is to shift from the needs of benefactors, to foster citizens' capacity to recognise and claim rights and duty bearers who heed their responsibilities. Awareness that children's visibility is not the same as participation on parity should be concurrently maintained (Woollcombe, 1998). This awareness is particularly pertinent given constructions of childhood and child-adult communication varies culturally and socially, and can influence minors' participation (White, 2002). From these critiques, it becomes necessary to ask who is defining what children's participation is and how meaningfully it is being enacted, what tensions

¹ UNHCR developed these guidelines as a toolkit to help operationalise the best interests principle (The

exist between child protection and participation, and how can these can be effectively navigated (Ruiz-Casares et al., 2016). In centralising such questions, this study moves towards a more critical conception of children's rights.

Towards a critical conception of children's rights

Since the incorporation of human rights into development and correspondingly the CRC, children's rights have been shaped by assumptions of childhood autonomy and fundamental rights. Some scholars consequently argue that the underlying assumptions in children's rights studies remain under-analysed. This lack of analysis has given rise to poor insight into dominant constructions of children's rights, and where these different iterations sit on a scale of beneficial to detrimental (Reynaert et al., 2012). The potential for legal approaches and instruments, such as universalising and labelling processes, to disguise contested power between a state and its citizens becomes evident (Bourdieu, 1987). These tactics play a role in presenting the legal field as separate from general social processes, and in particular, the power relations supported within the legal system (Engebrigsten, 2003). Therefore, questions as to whether RBAs are modest or transformative become at least in part, a matter of context (Langford, 2015). Conflicts emerge between entrenched cultures of power and emerging cultures of rights (Baxi, 1994). When looking at agreements like the CRC, it again becomes important to consider the centrality of the accountability relationship between the state as duty bearers bound to legal obligations under national and international laws, and individual rights holders (Schmitz & Mitchell, 2016).

Previous research has shown how political and economic factors can minimise the CRC's principle of universality in practice, and that non-citizen children face particular challenges to realising their rights (Hart & Kvittingen, 2016). The CRC may be harnessed to legitimise immigration policy at the cost of children's rights. For example, judicial and political criteria may be prioritised over the cultural and psychological factors that should guide assessments of a child's best interests (Engebrigsten, 2003). Embedding the principles of the CRC within a wider frame in order to account for the social and political factors influencing their implementation aims to show how structural processes can serve to increase the strength of the state

over the individual child migrant (Engebrigsten, 2003). In navigating these power dynamics, the next section looks to post-development as a tool for exploring the interaction of power and agency in rights provision and for exposing underlying tensions in rights implementation.

Viewing rights through a post-development lens

Post-development challenges the idea of objective knowledge, delinked from power, to instead show how the ways in which we define and depict the world are contingent on factors like time and place, as well as the systems of power that shape both relations and lives (Eyben, 2005). Power and knowledge are inseparable and together frame what is thinkable and doable (Foucault & Gordon, 1980). Development agencies themselves are positioned as political actors, who use knowledge and power to define the problem, and create networks to sustain the analysis (Eyben, 2005). Related to concepts of post-colonialism, post-modernism and post-structuralism, post-development thought encapsulates the need to destabilise dominant discourses that prioritise Western worldviews at the expense of alternative cultural meanings, value and practices (McEwan, 2014). Post-development scholars argue that much development theory begins with ideological and universally applied presumptions aligned with a Euro-centric experience (Ziai, 2007). In contrast, post-development problematises the very ways the world is known and standard assumptions of progress (Sidaway, 2014). Post development aims to deconstruct development norms and languages (McGregor, 2009), disturb the status quo, and make the invisible visible (FitzHerbert & Lewis, 2010).

To understand these norms and languages, it is necessary to assess the system of relations defining “the conditions under which objects, concepts, theories and strategies can be incorporated into the discourse” (Escobar, 1997, p. 87). Human rights frameworks are a discourse that has been subject to critique by post-development thinkers. For example, the human rights discourse is argued to be distinctly ethnocentric, and conjures up binary depictions of otherness (Munck & Hyland, 2014). Contradictions are also at their strongest in migration contexts (Munck & Hyland, 2014), because migration “challenges a foundational assumption of international human rights law, namely, that the primary, and often exclusive,

responsibility for protecting and implementing “universal” human rights lies with the state of which one is a national” (Donnelly, 2002, p. 230–231). Consequently, human rights are weakest at borders and migrants often face significant barriers to citizenship (Munck & Hyland, 2014). Belying narratives of unaccompanied minors are ideas that the criteria for their acceptance is apolitical, universal and objective, despite immigration policies’ interment with a neoliberal world order, which advocates the free movement of capital and goods, but restricts movements for particular groups of people (De Graeve, 2017).

Underlying power and tensions in rights realisation

The dynamics of the refugee crisis in Europe unveil a hypocrisy in Western societies as both creators (e.g. Leary, 1990) and violators of human rights (e.g. Andersson, 2016a; Human Rights Watch, 2016a; Human Rights Watch, 2016b). Western perspectives have undeniably dominated the early formation of human rights standards, and as such, have had unbalanced influence on their intrinsic norms (Leary, 1990). Western commitment to these ideals, however, is a whole other question (e.g. Barbulescu, 2017; Human Rights Watch, 2016a). When neither the state from which people are fleeing nor the state in which they arrive is willing to offer safety and recognition, refugees become deprived of their rights. In order to realise human rights for all therefore, Hart & Kvittingen, (2016) explain that there is a need to examine how effective mechanisms can be established to protect the rights of non-citizen minors not of interest to political powers, or risk them becoming invisible.

With legal and bureaucratic practices perpetuating pre-defined ways of categorising the world (Engebrigsten, 2003), child development models and discourses become outputs of certain power dynamics and interests, while simultaneously being presented through the supposed neutrality of the judicial system (White, 1998). The preference for duty-orientated, state-centric and a-historicised conceptions of justice sits in conflict with more exploratory notions of participation (Langford, 2015). A purely legal focus often ignores the political and real-world perspectives, including the catastrophic track record of the right to development² (Uvin, 2007) and the

² Despite the mainstreaming of human rights approaches to development, severe deprivations and rising inequality continue to pervade. Widespread poverty exists in tandem with rising affluence

particular difficulty of enforcing universal rights for non-citizen, migrant children (Bhabha, 2009). That is not to say legal translations of children's rights are not helpful or needed, and there is not a plurality of interests across societies, but what needs to be recognized is the interpretative element of the CRC. Consequently, there is a need for more research into the underlying norms and beliefs that shape children's rights practices (Reynaert et al., 2012).

Whether international legal requirements are more progressive or regressive than local policy, laws and politics is largely determined by existing institutionalisation and realisation of rights (Langford, 2015). The differing emphasis placed on certain principles of RBAs, therefore, means any version needs to be analysed in relation to the normative content – its vision, ideals and how these contrast with, or are used to re-orientate, existing development practices (Cornwall & Nyamu-Musembi, 2004). For Eyben (as cited in Cornwall & Nyamu-Musembi, 2004), rights, power, and development assistance practices are entwined concepts. This argument appears visible in Engebrigsten's (2003) study analysing how Norwegian immigration officials apply the CRC's best interests of the child principle to unaccompanied minors' cases, revealing the potential for misuse of the principle to serve immigration control prerogatives. This misuse holds implications for care given unaccompanied minors become embedded in a process that contributes to strengthening state power on a structural level at the expense of the individual child migrant. Consequently, through some interpretations, international agreements such as the CRC can work to weaken the legal rights of the people they intend to protect (Cornwall & Nyamu-Musembi, 2004). Such considerations further highlight the need for country-specific research into the policies and practices affecting unaccompanied minors' care (Boothby et al., 2012).

Values and practices reflected in care

When assessing children's needs, consideration is required as to how values and care practices are interlaced with national and familial politics and emotions. This

elsewhere (Pogge, 2008) and the rights movement has resulted in no reshuffling of power, or worldwide resource redistribution (Uvin, 2007).

consideration is pertinent given there are visible moral contradictions in the constructions of obligations to people in need (De Graeve & Bex, 2016). In this globalising world with globalising responsibilities, these contradictions become evident in divisive reactions to forced migration, with tensions between rights and diverging social and political processes visible across Europe (Committee on Migration, Refugees and Population, 2011; Nykäne, 2011). Such tensions stem from migration and transnational flows being seen as challenging national borders, something that contributes to rising nationalism and increased border control to hinder certain forms of migration (Andersson, 2016a; Wernesjö, 2014). These interplays converge in dominating, binary, narratives of unaccompanied minors as either vulnerable, passive victims in need of care (De Graeve, 2017; Giner, 2007; Kanics, Hernandez, & Touzenis, 2010), or illegitimate adults looking to exploit public services and money (De Graeve, 2017; Gower, 2011). Such constructs impart sentiments of ‘the other’, and are embedded in a network of power relations that serve to reproduce depictions of otherness as pathology or as subjects to be reconstructed (Escobar, 1995). Simplistic, binary constructions also create depoliticised passive victims or situate unaccompanied minors as the problem, rather than acknowledge historical and political contexts of both the country of departure and arrival (Judge, 2010).

Such depoliticised discourse serves to render migration due to global inequality and poverty illegitimate, while constructing categories of people perceived as deserving of Western intervention and compassion. A politics of care that conceptualises idealised victims inevitably produces their counterparts, the undeserving (De Graeve, 2017). Intertwined with binary conceptions of deserving and undeserving are multiple gendered, racial and politicised discourses, where unaccompanied minors are construed as a risk to society. This is particularly the case for adolescent boys who are constructed as potential deviants, and a threat to the nation-state (Bryan & Denov, 2011; Wernesjö, 2014). Unaccompanied minors in this age group are situated within a grey zone between adolescence and transition to adulthood in government discourses, despite their legal categorisation as minors (De Graeve & Bex, 2016; Sirriyeh, 2010). Such politics of exclusion serve to deny unaccompanied minors political subjecthood (De Graeve & Bex, 2016) and are tied to middle-class subjectivities in receiving states, including normalising ideas of children’s needs and discourses of belonging,

integration and worthy investment (De Graeve, 2017). Care emerges in this context as a form of capital, for selective distribution, to those deemed deserving (De Graeve, 2017).

The discourse that portrays unaccompanied minors as vulnerable victims in need of Western intervention is skewed by the agency young people demonstrate in navigating their migration (De Graeve & Bex, 2016). This agency has consequently been construed as both a site of fear and strength (De Graeve & Bex, 2016; Fassin, 2001; Judge, 2010). Again, the constructions surrounding unaccompanied minors is also an issue of gender, with the predominance of adolescent males not easily absorbed into images of vulnerability (Fassin, 2001). Instead, masculinity may be considered a site of fear and consequently positioned in the negative space of criminality (Judge, 2010). Leanings towards this positioning show how, unfortunately, unaccompanied minors' experiences and social and cultural capital are more likely to be seen as irrevocable differences than as assets and strengths (De Graeve & Bex, 2016). These constructs are relevant considerations to the situation in Greece, where of the 5,174 unaccompanied children referred to the child protection system, 91 percent were boys, the majority over 14 (Digidiki & Bhabha, 2017). In accounting for the disempowering consequences of unaccompanied minors' resilience and agency, it therefore becomes necessary to understand unaccompanied minors as neither solely victims, or as strong and resourceful agents. Rather they are both these things in different aspects of their lives (Hopkins & Hill, 2010; Wernesjö, 2014). Children respond to forced migration challenges in diverse ways, emerging as "active survivors" over "passive victims" (Rousseau & Drapeau, 2003, p. 78).

Agency in accessing rights

A post-development lens seeks to account for the agency of social actors (Long, 2001). Many migration studies disregard children as lacking agency (Sporton, Valentine, & Nielsen, 2006). However, additional evidence points to minor's capacity to find means of coping, even under trying circumstances (De Graeve & Bex, 2016; Long, 2001). For example, Gustafsson, Fioretos and Norström's (2012) study analysing the migration experience of unaccompanied minors in Sweden found even though they faced many structural limitations, particularly in regards to

accommodation, they also uncovered opportunities to exercise their own power. Similarly, Watters (2008) outlined the importance of taking unaccompanied minors' agency and views into consideration in relation to decisions on care arrangements in a receiving society. Citing the risks unaccompanied minors take to reach Europe, it was argued unaccompanied minors have strong visions of what they want to accomplish, visions into which they will invest a lot. Research suggests unaccompanied minors' highest priority is often stable and long-term housing, while many also want a reliable adult in their lives who can act as a substitute parent or caregiver (Eide & Hjern, 2013). Whatever their vision, participation of unaccompanied minors in decision making pertaining to their care arrangements becomes a vital component of both recognising their agency and protecting their rights (Tolfree, 2003; UNHCR, 2012a; Watters, 2008).

Bringing hope back into development

As described in the preceding sections, the origins of, and power associated with, human rights reveal how the regime retains ethnocentric bearings (Baxi, 2002). Pervading ideas of the moral sovereignty of the individual effectively reduce the validity of collective and cultural moral values. Consequently, only partial social and political experience, most closely linked to the liberal-democratic and political systems of the North, is reflected in rights (Fagan, 2009). Confronting these critiques, a hopeful post-development lens of human rights attempts to move beyond narrow conceptions of RBAs to development, to widen the field of credible experience. It also seeks to ground approaches within the historical context and shift towards practice that is hopeful, generative and experimental (Gibson-Graham, 2005).

Where much of early post-development has sought to expose the negative effects of development in a challenge to mainstream approaches, hopeful post-development begins to offer solutions (McGregor, 2009). Gibson-Graham (2005) presents a tool for enacting hopeful post-development through mapping pre-existing strengths in communities, to offer a more contextualised and inclusive approach (Gibson-Graham, 2005). Hopeful-post development therefore encourages a shift towards reimagining places in terms of capacities and opportunities over needs and limitations. In taking this approach, hopeful post-development moves beyond purely pointing to problems,

which can ironically can reaffirm development's power and influence, to instead empower alternative processes and worldviews (McGregor, 2009). This view of rights will therefore be useful in research for both mapping positive practices protecting children's rights and recording different care experiences and opinions.

Conclusion

Maintaining a critical approach to children's rights is essential to understanding unaccompanied minors' access to disparate and sometimes desperate care structures. In the context of forced migration, pronounced tensions emerge between migration policy and commitment to conventions such as the CRC, to render an analysis of unaccompanied minors' right to appropriate care incomplete without acknowledging its interplay with power. The CRC itself raises issues of compliance, while the mainstreaming of children's rights leads to risks of reductive approaches within which complex political issues are reduced to technical and management matters. Consequently, it becomes important to address the underlying tensions and conflicts that challenge the realisation of rights. To effectively do this, context specific insights are required in order to understand how rights are being interpreted and implemented, by whom and to what end. This chapter showed that a socio-political conception of rights helps to situate rights within lived realities and experiences, to better reflect the challenges and opportunities to rights realisation and bettering alternative care.

CHAPTER 3: RESEARCH METHODOLOGY AND FIELDWORK

Introduction

Critical conceptions of children's rights studies require both acknowledgement of existing critiques of the CRC, such as the norms and logics it perpetuates, and a shift to better contextualise and facilitate rights' applicability to children's lived experiences (Larkins et al., 2015). In order to explore these lived realities, and subsequently the challenges and opportunities regarding care provision for unaccompanied minors in Greece, a qualitative enquiry was selected as a suitable methodological approach. Qualitative research techniques were used in order to acknowledge the subjective nature of knowledge and to provide an in-depth understanding of a particular context and phenomenon (O'Leary, 2017).

In exploring alternative care for unaccompanied minors, awareness of power throughout the research process was pertinent (O'Leary, 2004). This awareness is particularly critical in the migration context where participants are often situated in precarious and risky positions based on their living situations (Dempsey, 2018), legal status (Connolly, 2014), and lack of familiarity with foreign concepts and legal processes that underscore informed consent (McLaughlin & Alfaro-Velcamp, 2015). It was imperative ethical concerns permeated the entire research process and mindfulness of representation and self-representation was maintained (Dempsey, 2018). In translating these considerations into my approach to data collection, this chapter details my methodology and interrogates my starting points through an exploration of my positionality. Ethics relating to the study are also explored, and methods used then specified. Finally, the scope and limitations of the study are acknowledged.

Methodology

A critical research approach aims to uncover non-explicit processes and relations, and promote progressive social change (Murray & Overton, 2014). This study's research questions are built around understanding the social and political phenomenon influencing rights provision and mapping care practices in their local context (see Chapter 1). Therefore, this study is situated on the continuum between applied research, that has the goal of identifying solutions for situational improvement, and emancipatory research, that exposes underlying ideologies (O'Leary, 2017). The latter is also consequentially aligned with this study's post-development lens (see Chapter 2). With these aims in mind, qualitative research techniques were employed in order to better understand the logics associated with different care models available in Greece, and the barriers and opportunities in expanding rights within alternative care programming.

In enlisting a post-development view of rights (see Chapter 2), my study starts from the viewpoint that diverging social and political processes and interpretations affect the implementation of rights (Josefsson, 2016). Therefore, a social constructivist approach is enlisted to demonstrate how world meanings are a construct of human interactions and interpretations (O'Leary, 2017). Such an approach views the world as socially formulated, acknowledges how patterns can be contingent on human agency and helps develop associations that can increase understanding of particular phenomenon (Moses & Knutsen, 2012). The social constructivist approach is used to explain the competing agendas, diverse interpretations, and fluctuating commitments to the CRC in the local context, to better uncover the conflicts intrinsic in the provision of the right to care.

Positionality and reflexivity

A researcher's positionality is both their view of themselves and how others view them (Ozano & Khatri, 2018). In assessing issues of research philosophy, it is important to evaluate my own positionality and the wider historical, political and social contexts underpinning my qualitative research process (Merriam et al., 2001). This section brings my own intrinsic biases and personal identities to the forefront, to

consider how these may be shaping my study and relational positioning with participants (Rose, 1997).

The contradictions of borders, and consequently my privileged position, are epitomised in my ability to conduct this research. The relative ease with which I was able to travel and stay in Greece stands in stark contrast to asylum seekers arriving in the region. This contrast outlines the first important aspect of my positionality – I have entered the frame of this study as an educated, middle-class, European New Zealand woman with sufficient resources to be able to conduct research in this context. For these reasons it was very important to be reflexive, and give due consideration throughout the fieldwork process to the prevailing power differentials that result from this privilege and how issues of power affect the research process (Ozano & Khatri, 2018).

Reflexivity is a continual process of self-awareness “that reminds the researcher to deconstruct their positionality with the aim of producing a more trustworthy, transparent and honest account of the research” (Ozano & Khatri, 2018, p. 191). Being reflective helps facilitate a critical attitude towards the impact of a researcher’s context and subjectivities on project design, data analysis and presentation of findings. Reflexivity also facilitates insight into the power dynamics, context and relationships inherent in research by at least making visible a researcher’s relevant individual dispositions that may affect the research process (Gough, 2003). It is important to note here my advocacy leanings in relation to family-based care solutions, as well as my critical viewpoint of securitisation approaches to the challenges of forced migration. Maintaining awareness of personal values and belief systems iteratively helps to mitigate the effects of unintentional bias (Sumner & Tribe, 2008). Practical ways of enacting reflexivity included utilising a fieldwork journal to record and reflect on thoughts and experiences throughout the data collection process, including reasons for decisions made and personal reactions to interactions and discussions with participants.

The reconstitution of identity as a power element in data collection requires awareness of a researcher’s evolving identities (Dempsey, 2018). In a binary-sense I am an outsider, given my research exists across multiple cross-cultural contexts and

with people who have had diverging experiences. As such, when approaching this study it was important to take steps to better inform myself and to understand these contexts, languages and customs, while also acknowledging the limits of how effectively I could do this, and seek local insight and guidance where it was possible. Surra and Ridley (1991) reimagine the insider-outsider dichotomy as a continuum. This conceptualisation acknowledges the complexity of interactions and how a participant and researcher actively, and relationally, navigate positions (Nowicka & Ryan, 2015). For example, variations in dynamics emerged between participants and myself, based on their role, seniority level and age. Additional considerations emerged when including young people in the study. Considerations included acknowledgement of potential pressure to be involved based on their relationship with the organisation or carers whom they rely on for services (Nakkash, Makhoul, & Afifi, 2009), alongside power and cultural dynamics (Gillam, 2013). These considerations were navigated in various ways depending on the data collection method, as reflected on further in the ethics section.

Ethics

It is imperative ethical concerns permeate the entire research process, and consideration is paid to issues of power, representation and self-representation (Dempsey, 2018). Throughout my research, I worked to develop respectful and mutually beneficial relationships through processes of informed consent, privacy protection and reciprocity (Banks & Scheyvens, 2014). The inclusion of unaccompanied minors meant my research processes required additional scrutiny at all stages of the project in order to realise my commitment to do no harm (Vervliet, Lammertyn, Broekaert, & Derluyn, 2014), particularly in regards to power dynamics and probable vulnerabilities associated with forced migration (Block, Riggs, & Haslam, 2013). Therefore, full ethics approval was sought and obtained by the Massey University Ethics Committee [MUHEC] (see appendices).

In further exploring the ethical dimensions of my research, this section evaluates the benefits and risks associated with my research and how these were mitigated, before looking deeper at the processes and approaches to address the outlined vulnerabilities and risks identified in Table 3.1.

Table 3. 1: Benefits and risks identified in the study

	Considerations	How approached or mitigated in practice
Benefits	<ul style="list-style-type: none"> • Contribute to knowledge on the effects of migration policies on minors and their rights and wellbeing at the country level. Significant gaps in this knowledge currently exist (see McLeigh, 2013). • Highlight positive work being done to further the spectrum of care options, and map positive practices that protect unaccompanied minors' rights. • Provide a platform for unaccompanied minors involved in the care system to voice their views. 	<ul style="list-style-type: none"> • Research involved documenting participants' direct experiences of how migration policy had affected care provision. • Positive practices mapped and disseminated through the study. • 13 unaccompanied minors took part in the study.
Risks for participating NGOs	<ul style="list-style-type: none"> • Misrepresentation: Participants should receive fair representation and be treated with respect and dignity in order to meet commitments to do no harm (O'Leary, 2004). • Safeguarding: NGOs engaged in the welfare for unaccompanied minors play a critical role as gatekeepers (Powell, Fitzgerald, Taylor, & Graham, 2012). There are elevated risks associated with research with this population for them to consider (Block et al., 2013). • Confidentiality: Maintaining confidentiality is important to help mitigate harm associated with mandatory disclosure of identifiable data and afford participants control over their personal information (Yu, 2008). 	<ul style="list-style-type: none"> • Opportunities to provide feedback on interviews was offered. • To ensure minors' welfare is protected, I liaised with participating organisations closely on appropriate research methods and adhered to internal protocols as required and appropriate. • I protected identities through both removing identifying features from data, not publishing names and storing data appropriately (O'Leary, 2017).
Risks for participating minors	<ul style="list-style-type: none"> • Vulnerabilities: Elevated cognizable risks of harm present based on unaccompanied minors situation, age and experiences (McLaughlin & Alfaro-Velcamp, 2015) 	<ul style="list-style-type: none"> • As well as following associated organisation's safeguarding procedures, I developed non-probing research techniques, and

	<ul style="list-style-type: none"> Confidentiality: Additional vulnerabilities present because of legal status, and interest of immigration data to authorities (McLaughlin & Alfaro-Velcamp, 2015) Pressure to participate: Guardians and care workers are often the gatekeepers to children's participation: interests or views are not always aligned. Questions of consent versus assent are also pertinent (Kirova & Emme, 2007) 	<p>sought consultation on research methods.</p> <ul style="list-style-type: none"> Protected through use of pseudonyms, disguising identifying details (Hopkins, 2008) and data being adequately stored (O'Leary, 2017). Consent was viewed as an iterative process (Hopkins, 2008). Informal interactions were led by the minors, and a participating organisation passed on the online questionnaire only to those who wanted to participate. Participants could also skip any question.
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Risks associated with this research were taken very seriously, and appropriate measures therefore adopted in order to realise this study's commitment to do no harm. These measures included processes for ensuring informed consent, accuracy of findings and the protection of privacy, as well as adherence to safeguarding protocols for children. Data collection techniques that minimised risks were also selected, as discussed further below.

Ethics in data collection

Research in the field of social science requires special skill sets and sensitivities to address ethical and cultural concerns, and a willingness to redesign the research process as it evolves (Murray & Overton, 2014). Since I was working in an international context with diverse populations, it was vital to exercise cultural competence (Liamputtong, 2008), and sensitivity to the age and experiences of participants (Hopkins, 2008). This was achieved through exploring and appreciating different cultural and social values (Liamputtong, 2008), to help ensure appropriate approaches were employed throughout the full research process (Scheyvens, Scheyvens, & Murray, 2014). In an international context where language barriers and cultural differences exist, it was most suitable for me to obtain consent in participants'

own language (Benatar & Singer, 2000). As such, forms were translated and a research assistant was used where required (see appendices for information sheets with translations).

There are multiple ethical considerations to work through when including children in research. However, it is important their voices are heard (Scheyvens et al., 2014), as is also principally advocated for in the Convention on the Rights of the Child [CRC] (UN, 1989). Organisations engaged in unaccompanied minors' welfare were approached to help facilitate access. This approach was taken in the understanding such organisations endeavour to represent minors' best interests and could facilitate links to legal guardians for additional approvals where required. This approach also helped protect unaccompanied minors confidentiality, and acknowledged the limitations of the guardianship system and consequential positioning of NGOs as best placed in terms of knowledge of individual children's situations. In approaching research methods, Lawrence, Kaplan and McFarlane's (2013) guideline of respect was applied. This guideline recognises both basic human values and rights alongside protection from further harm or abuse for those that have already suffered (Lawrence et al., 2013). Data collection tools were carefully designed to avoid potentially traumatic lines of questioning. Questions focused on the expertise young people could contribute in regards to the care system (discussed further below).

During fieldwork, I was offered the opportunity for a site visit. The ethics of informally meeting children living in a shelter situation was something I took very seriously and approached reflexively. Benefits of such a visit included monitoring and evaluation, being able to see and receive feedback on the shelter and garner greater insight into the reality and views of young people. My concerns lay in the risks and trauma minors face in their daily lives and not wanting to exacerbate these (Kelley et al., 2016). I wanted to respect minors' right to privacy (UN, 1989), and was also aware of the need to navigate consent and assent of children engaging with me (Kirova & Emme, 2007). I approached this situation cautiously, given my own resistance to the idea of outsiders being able to access children in their home space.

In addressing these issues, I met children in a common area onsite. I ascertained they could come and go as they pleased, and followed their lead on how much they wanted

to engage with me, while also being mindful of communicating my role and boundaries. I had decided prior to going to the shelter, if they were not interested or seemingly enjoying interacting, I would leave. Most of the time was spent playing games or helping with English practice. Interspersed in conversations were glimpses into the positives and negatives of their situations and stories, volunteered entirely and not probed. The organisation had both invited this visit and had their own processes for safeguarding – including someone being present for the duration I was there. This approval, balanced with my own reflexive and ultimately cautious approach, helped to mitigate the risks and balance what Gifford (2013) describes as tensions between protecting and respecting.

Ethics in dissemination of findings

The positioning of my research in a rights-based frame helped provide a structure for addressing my subjectivities and ensure rigor in my research. Ongoing reflection on my practice was also required to ensure conclusions were justified, credible and trustworthy. By providing opportunities for feedback on transcripts from participants, and by consulting with outside experts, I put additional checks in place to ensure accuracy (O’Leary, 2017).

As discussed in Chapter 2, unaccompanied minors are often depicted as either vulnerable, passive victims in need of care, or illegitimate adults looking to exploit public services and money. In approaching representations in my research therefore, it was imperative I did not replicate stereotypical depictions of minors, but account for their agency in the process of accessing their rights (e.g. De Berry & Boyden, 2000), and ensure a dignified portrayal (Banks & Scheyvens, 2014). Equally important is to not refer to minors as only victims or resourceful agents, but to acknowledge the fluidity of such concepts throughout different parts of their lives (Hopkins & Hill, 2010; Wernesjö, 2014). In research, vulnerability is also understood to be located in circumstances, rather than within the person (Block et al., 2013). Considering these factors, my research sought to first centralise unaccompanied minors’ own views and perceptions of their situations, and balance vulnerability as a result of extenuating circumstances with the agency demonstrated in response to restrictive systems. In

taking this approach, this thesis has aimed to challenge dominant narratives that exist around vulnerable populations (see Maillet, Mountz, & Williams, 2016)

Fieldwork

Research predominantly took place in Athens, Greece, with one interview with an outside expert conducted in The Netherlands. I travelled for six weeks for research, from August to mid-September in 2018. Fieldwork involved speaking to a range of key stakeholders involved in the provision of care for unaccompanied minors. I used qualitative semi-structured interviews, online questionnaires and observation to uncover the challenges and opportunities associated with alternative care. I went into the field prepared with multiple data collection tools, in order to ensure I was able to respond reflexively to opportunities presented. These processes and approaches are outlined in the following section.

Identifying and engaging with participants

In identifying participants, I aimed to interview staff involved at various junctures in the care process, including programme team members, social workers, psychologists, legal advisors and independent experts. By ensuring representation of care actors from different backgrounds and expertise, I was able to explore the issue from multiple perspectives to the aim of triangulating findings and increasing data credibility (see Baxter & Jack, 2008). Organisations engaged in the welfare of unaccompanied minors in Greece were identified largely using internet searches. METAdrasi was originally identified as a potential case study organisation, given they are engaged in addressing public service gaps through their foster care and supported independent living [SIL] programmes for unaccompanied minors. However, while representatives participated in the study, a fuller case study exploration of their programmes could not be facilitated. Instead, I invited organisations involved in care provision to be involved in the research via email or phone. I provided full information sheets on the study for consideration. Requests were also made to engage with foster carers, however, this too could not be facilitated.

A total of 27 organisations were contacted prior to field research. Additional participants were identified on-the-ground using snowballing techniques (O’Leary, 2017). In total, 20 participants from 17 organisations took part (see Table 3.3). In addition, one in-depth interview took place with a former unaccompanied minor. Online questionnaire responses with three unaccompanied minors were also received, and an informal meeting with nine others took place (see Table 3.2).

Table 3. 2: Number of participants who received care

Participants receiving care	Number
Unaccompanied minors	13 (4 formal interviews, and 9 informal conversations)

Participants were coded into the following job categories in-line with their area of expertise as per the following table.

Table 3. 3: Participants by job category

Participants by job category	Number
Programme Manager	3
Social Worker	3
Child Protection Worker	2
Directors	2
Independent Authority	2
Lawyer	2
Ethnic Community Group Representative	1
Fieldworker	1
Informal Care Worker	1
Psychologist	1
Volunteer Manager	1
Youth Worker	1

A range of organisations engaged in the welfare of unaccompanied minors participated, including stakeholders working at both international and local organisations in Greece, an outside expert organisation engaged in capacity building in Greece, and community group representatives. The rationale for inclusion of each participating organisation is detailed in Table 3.4.

Table 3. 4: Participating organisations

Organisation	Number of participants	Rationale for inclusion
International		
International Organization for Migration [IOM]	1	Leading international body relating to migration with programmes in Greece. Works closely with government, intergovernmental and NGO partners. Also includes programmes targeted towards care of unaccompanied minors.
Nidos	1	Implement the guardianship system and reception in families in the Netherlands. Engaged in partnerships and research in Greece re: alternative family care.
Safe Passage	1	Assists young people to find legal routes to the UK. Overlap with care e.g. effects of family reunification policies on care provision, engaged in legal aid and referrals of unaccompanied minors to accommodation while they await reunification.
SOS Children's Villages		Global organisation running shelters for unaccompanied minors in Greece since 2016.
United Nations High Commissioner for Refugees [UNHCR]	1	Global organisation mandated to protect refugees rights, with strong presence in Greece. Engaged in the care of unaccompanied minors including in reception sites and a SIL pilot programme.
Local		
ARSIS	1	Provides social and legal support to youth, including unaccompanied minors. Work tied to, and affected by, care provision issues.
Community group	1	Representative from an ethnic community group engaged in refugee issues, details withheld.

Greek Forum of Refugees	1	Represents refugee rights and able to offer insight into both the situation of unaccompanied minors and wider, connected issues.
METAdrasi	2	Identified as a key organisation given their unique role in the local context supporting foster care and SIL for unaccompanied minors, and involvement in furthering guardianship.
Network for Children's Rights	3	Engaged in representing refugee children's rights through a holistic approach that includes the provision of legal aid and social support.
Office of the Deputy Ombudswomen for Children's Rights	2	Independent authority for protecting children's rights including responding to protection issues for unaccompanied minors. Referred to hereafter as the Independent Authority.
Roots Research Centre	1	Organisation involved in promoting deinstitutionalisation and alternative care arrangements.
Smile of the Child	1	Children's homes part of programming, including for unaccompanied minors.
Youth centre for refugees	1	Name and details withheld
Za'atar	1	Community centre which helps provide services to unaccompanied minors by referring them to other accommodation centres. Also runs its own shelter for women and children.
[Name withheld]	1	Informal settlement. Linked to care provision through previously hosting unaccompanied children, while still receiving requests to do so.

The study aimed to include participants involved in various aspects of care provision, at the local, international and community levels. Further organisations and political representatives were approached but unable to participate in the study.

Methods

The majority of research utilised semi-structured interviews. Opportunities for observation were also taken and a field journey used for critical reflection. Additional tools were also designed to aid the inclusion of unaccompanied minors in the study, as discussed below. Grey literature, or materials that do not have an International Standard Book Number or Standard Serial Number, was also utilised throughout the study alongside academic literature. The use of grey literature aids access to contemporary original work and important background and context (O’Leary, 2004). Methods used in the field are further detailed below.

Semi-structured interviews

Semi-structured interviews were selected as a primary method given they provide flexibility to follow different lines of enquiry, while still addressing specific dimensions of my research (Galletta, 2013). They are also a method capable of uncovering hidden facets of organisation and human behaviour by modifying the pace and style of interviews to elicit the fullest responses from participants (Qu & Dumay, 2011). Interview guidelines (see appendices) were developed with the aim of uncovering contextual understandings and interpretations rights, in-line with key considerations outlined in the CRC. Interviews also explored the local challenges to implementing these rights and the processes in place to support children’s rights. This method was used primarily for NGO stakeholders. Interviews took place in locations convenient to the participants, usually a meeting room at their offices. An informed consent process was followed that outlined the purpose of the research, confirmed the participant understood the research and was freely and willingly participating. After this process, interviews took place (as also outlined in Gillam, 2013).

Observation

Where possible, appropriate and non-intrusive, I sought access to care facilities to observe standards and associated processes. During fieldwork, I had the opportunity visit a shelter and spend some hours with children in their services, visit an informal settlement and observe a demonstration against securitisation policies. I also had

social and informal interactions with people involved with providing or receiving care. Non-participatory observation was consequently used in the study as a supplementary data collection method to help triangulate my interview findings (O’Leary, 2017).

Advantages of observation include the opportunity to record the actual environments and how people behaved directly and in real time, without reliance on the account of others. Foster (2006) explains that observation allows the researcher to see what participants cannot and O’Leary (2017) further details how observation presents an opportunity to try correlate what participants say they do. My research also provided important insights into what care might look like for a young person. In viewing these findings, awareness needs to be maintained of how the presence of a researcher may influence usual behaviour, and that observations are ultimately filtered through a researcher’s interpretative lens (Foster, 2006). As such, it was imperative to maintain awareness of my own biases and seek to mitigate these through addressing my own predispositions and subjectivities.

Fieldwork journal

The purpose of my fieldwork journal was to both provide a source of additional data through notes on the setting and participants (Campbell, 2015) and to aid critical engagement with my interpretations, findings and interactions. This reflection can also contribute to establishing credibility (Baxter & Jack, 2008). The journal was used throughout fieldwork, with a heightened importance on reflection and documentation following observation events and informal interactions. Consequently, a fieldwork journal aids understanding of a researcher’s role and positioning by recording decisions made in the research process in detail (Ortlipp, 2008).

Tools designed for speaking with unaccompanied minors

When entering the field, I initially planned to conduct focus groups with unaccompanied minors (see appendices). This tool was designed with input from a young person from a refugee background prior to departure. However, due to challenges on the ground, focus groups could not be facilitated. I later adapted this tool for use in an online questionnaire. Advantages of an online approach included

gaining access to individuals who were difficult or impossible to reach through other channels (Wright, 2005), while also offering flexibility to participants (Evans & Mathur, 2005). Questions asked minors to reflect not only on the models of care available in Greece, but what they could be. As such, the design aimed to be forward thinking rather than discuss the potentially traumatic events leading up to young people's arrival in Greece.

Use of research assistant

As my fieldwork took place in an international context with potential language barriers, I utilised a research assistant where required. The research assistant was identified and selected due to their aligned studies in international relations. As a Greek local they were also able to help me navigate the local landscape and translate where required. Advantages of research assistants include that they can build rapport, open doors and assist in data collection, however, they may bring their own biases that can affect results (McLennan, Storey, & Leslie, 2014). Misunderstandings can also easily arise in translation, as not all concepts can move across cultures (Bujra, 2016). In helping to address these shortcomings, I fully briefed my research assistant to ensure they understood the aims and objectives, and that they were comfortable with these. Building rapport my research assistant helped ensure an open-line of communication, something that was important for flagging issues relating to concepts not translating. This rapport consequently helped ensure accuracy in findings (McLennan et al., 2014). In practice, most interviewees were comfortable conducting interviews in English. However, my research assistant was able to assist with one important interview and also with translation of documents. A confidentiality agreement was also signed by the research assistant in order to protect participants' privacy.

Data analysis

I took an exploratory approach to data analysis whereby data codes were used to develop categories and formulate themes, which in turn become findings (Campbell, 2015). A code is defined in qualitative research as “most often a word or short phrase that symbolically assigns a summative, salient, essence-capturing” (Saldana as cited

in Campbell, 2015, p. 203). Verbatim transcripts from participants were manually analysed in this way, with key words and phrases identified through multiple readings. In ensuring rigour in research, data sets were coded twice and the results were compared (Krefting, 1991). Descriptions of themes are detailed in the following table:

Table 3. 5: Research themes identified

Theme	Description
Standards of care	References to the kind and level of support young people are able to access in different care structures. Sub themes: Participation; different standards across shelters.
Access to care	References to the level of difficulty young people had in accessing appropriate care. Sub themes: capacity; discrimination.
Monitoring and safeguarding	References to the child protection system and how well it is functioning. Sub themes: Guardianship; child protection system; calls for leadership, monitoring and/or standardised structure; importance of trust for safeguarding.
Family and community connection	Importance of, and systems affecting, family and community links for young people in care. Sub themes: Family reunification.
Socio-political factors influencing care provision	Bilateral and multilateral agreements, internal politics and relationships between care stakeholders affecting care provision. Sub themes: EU-Turkey deal and hotspot approach, family reunification, competition, collaboration.
Emergency care provision	Tensions between short and long term care needs and investment. Sub theme: Funding.
Protection versus empowerment	Discourse surrounding care provision and the rationale for different models and approaches to care provision. Also encompasses perspectives of participation. Sub themes: Constructions of childhood and vulnerability.
Expanding care options	Specific considerations raised in relation to expanding care options. Sub themes: Foster care as a pathway to adoption; deinstitutionalisation, openness to expanding care.
Capacity building	Capacity building opportunities for rights holders and duty bearers.

Themes were then bundled into factors influencing the quality and capacity of care available (standards of care, access to care, monitoring and safeguarding), social processes (trust, family and community connection, protection versus empowerment), political processes (processes and events, emergency care provision) and processes and practices relevant to furthering care provision (expanding care options, capacity building).

Limitations of the study

This study unveils some important findings in relation to the care nexus for unaccompanied minors in Greece. However, it also has some limitations that are important to acknowledge. Some additional areas were concurrently identified, which can be built on in future studies.

This study incorporated a rich spread of representatives from across the care spectrum that could be expanded in several ways. For example, challenges in the field limited access to formal interviews with unaccompanied minor refugees. In seeking to further centralise young people's views and understand their perceptions of the care system, it would have been good to speak to a greater number of unaccompanied minors. The underdeveloped foster care system also made connecting with foster carers for the study a challenge. Despite this, the inclusion of people engaged in foster care from a programmes perspective contributes to understandings of the challenges for foster carers. A cross-section of care providers engaged in the welfare of unaccompanied minors were selected for the study with a considerable number agreeing to participate for in-depth qualitative interviews. Given the diversity of care provision, the study could still have benefited from additional care representatives, alongside further site visit opportunities to help further verify participant's claims. Despite these caveats, the study's spread of data still contributes valuable knowledge on rights realisation for unaccompanied minors and the belying processes influencing practices.

Several additional areas requiring study have also been identified through this research. These include a need for mapping informal and community care initiatives, and a more thorough exploration of discrimination experienced by unaccompanied minors arriving in Greece. In an ongoing sense, there is also need to closely watch

how fluctuating politics are affecting care provision, the implementation of new foster care and guardianship laws, and the functionality of emerging care models as they expand.

Conclusion

At the very heart of this thesis is an analysis of the idea that rights realisation is invariably linked with displays of power and agency, a conceptualisation that was also reflected on at each stage of research. Reflexivity in the field played a key role in both allowing me to respond to research opportunities, and helped me maintain awareness of power dynamics in data collection. Trust was also a vital component during fieldwork, something that was generated through allowing sufficient time to build rapport and an informed consent process that took into account the needs and requests of participants.

The needs of one group of participants was particularly pertinent. The inclusion of unaccompanied minors in the study required careful consideration to ensure appropriate methods and processes were in place to ensure the commitment to do no harm. The balance between respecting and protecting young people was centralised, alongside their right to be heard. As will be described in the next chapter, children arriving in Greece have often endured considerable challenges, but also demonstrate considerable agency. The pertinence of acknowledging young people as active survivors over passive victims, as was discussed in Chapter 2, is again prevalent.

CHAPTER 4: CRISIS AND CONTROL IN THE MEDITERRANEAN

Introduction

The individual circumstances of unaccompanied minors' are embedded in wider politics and inequalities, as will be discussed in this context chapter. Across Europe, it is possible to see two concurrent social and political processes. Firstly, migration is challenging national borders. Secondly, rising nationalism has resulted in a securitisation approach and increased border controls designed to hinder certain forms of migration (Andersson, 2016a; Morris, 1997; Wernesjö, 2014). Migration challenges the traditional structure of a nation-state (Morris, 1997), within which "fears of immigrant waves have fuelled resentments and spurred renewed interest in cultural identity, national solidarity and defence of national interests" (Smith, 1995, p. 15). It therefore becomes important to consider the processes of power and exclusion and structural conditions in countries hosting unaccompanied minors, and to understand how these influence their situations, wellbeing and consequently, rights (Wernesjö, 2011).

Children should be viewed as children, whether they are migrants or not (Van Bueren as cited in Nykänen, 2001). In reality, however, unaccompanied minors seeking asylum face a number of obstacles that prevent access to safe accommodation (Crawley, 2007). Tensions between state commitment to the CRC and restrictive migration policy are prominent (e.g. Bhabha, 2009; Vitus & Lidén, 2010). In exploring the local and international processes within which the denial of rights takes place, this chapter first analyses the reality of movement in the Mediterranean including an examination of the push and pull factors influencing the routes, rationales and risks taken. Secondly, it explores the policies developed in response to movement in the Mediterranean before looking to how these policies have characterised the reception and care system for unaccompanied minors. Finally, it also considers some of the contextual factors shaping care provision in Greece. By linking the structural context and the individual experience of migration, I hope to highlight

the centrality of unequal structures while maintaining focus on the people affected by these systems (Hatziprokopiou, 2006).

Movement across the Mediterranean

Extending along North Africa and Southern Europe, the Mediterranean region is one of the hardest transit regions for those trying to reach Europe (Baklacioğlu, 2017). It is also one of the most prominent, with nearly 1.8 million people making the perilous sea journey between 2014 – 2017. During 2015, there were 1,015,887 arrivals by sea into the Mediterranean (UNHCR, 2018c, table 1), 61% of whom originated from Syria, Afghanistan, Iraq, Eritrea, Somalia and Sudan, the largest refugee-producing countries. Many travelled the Eastern Mediterranean route to the Greek Islands in the Aegean Sea at the Greek-Turkish border. Fewer people attempted to reach the coasts of Sicily and Lampedusa in Italy (Triandafyllidou, 2018).

For those attempting to reach Greece, there are two main gateways: via the sea, or along the 182 km land border with Turkey. A fence constructed to seal off the latter in 2012 served to push the majority towards the sea, an expensive and dangerous route, despite being relatively quick at just a couple of hours (UNICEF & REACH, 2017). These routes also make up the most common pathways for unaccompanied and separated children trying to reach safety in Europe (UNICEF & REACH, 2017). Over one third of those crossing the Mediterranean Sea are children; on average two such children drowned each day in 2016 (UNHCR, 2016, p.1). The following tables show the number of arrivals into both the Mediterranean region and Greece in 2014-2018, and the number of people who perished on this deadly crossing.

Table 4. 1: Recorded sea and land arrivals in Greece 2014-2018

Year	Sea arrivals	Land arrivals	Dead and missing (Estimate)
2018	32,497	18,014	174
2017	29,178	6,592	59
2016	173,450	3,784	441
2015	856, 723	4,907	799
2014	41,038	2,280	405

Source: UNHCR, 2018b, table 1

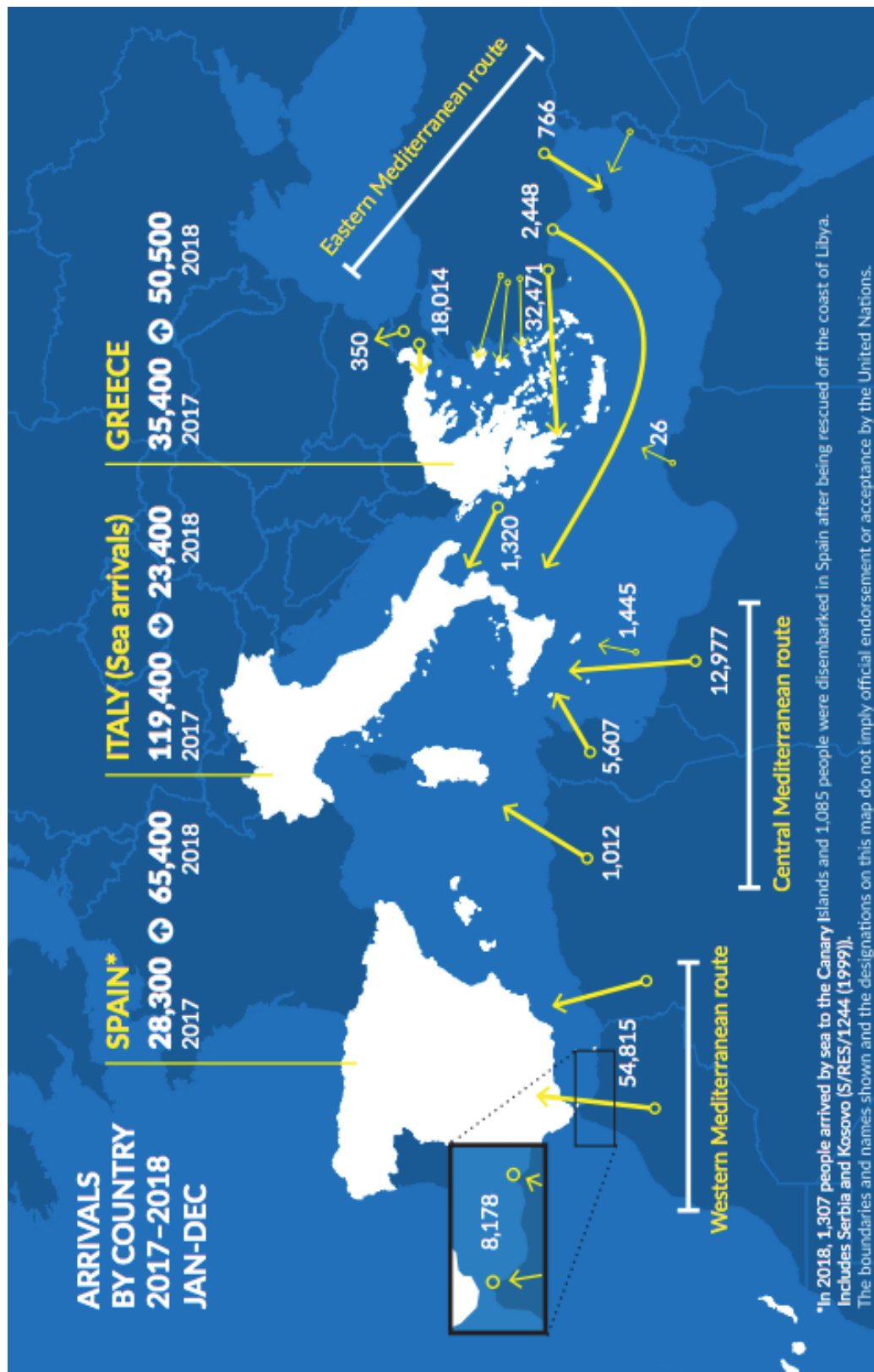
Table 4. 2: Recorded sea and land arrivals into the Mediterranean region 2014-2018

Year	Land and sea arrivals combined	Dead and missing (Estimate)
2018	139,300	2,275
2017	172,324	3,139
2016	363,425	5,096
2015	1,015,887	3,771
2014	215,690	3,538

Source: UNHCR, 2018c, table 1

Migration has decreased since the 2015 peak in both the Mediterranean generally, and in Greece. However, despite lower recorded arrivals in the Mediterranean in 2018, a higher proportion of people were recorded as dying at sea. One death per every 14 people was recorded on the central Mediterranean route in 2018 compared to one death for every 38 people the previous year (UNHCR, 2018d, p. 5). The toll was even heavier on the Western route, where the number of deaths in 2018 nearly quadrupled on the previous year (UNHCR, 2018d, p.9). Reasons cited include a reduction in search and rescue off the Libyan coast and the EU's contentious support of Libyan Coast Guard interventions. These factors have pushed people to travel for increased periods of time and over longer distances to reduce the risk of detection, in overcrowded and unsafe vessels (OHCHR, 2017; UNHCR, 2018d). In late 2018 the migrant rescue ship Aquarius also ended its operations. Médecins Sans Frontières, the charity that runs the ship, cited a "smear campaign" by European governments (Reuters, 2018, para 2). The affront on search and rescue was led by Italy's far-right interior minister, Matteo Salvini, who sees NGOs as a "taxi" service to Italy (Harlan, 2018, para. 11). These events are indicative of increased anti-immigration in the continent, and the challenges of a coordinated EU-response with the closing or opening of borders in one country having effects on the others (Henley, 2018). Interestingly in the Mediterranean, decreases in sea arrivals in Italy 2018 have correlated with increases in Greece and Spain, as seen in Figure 4.1.

Figure 4. 1: Arrivals by country 2017 -2018, January-July



Source: UNHCR, 2018d, p.10

The above map shows recent patterns and trends in migration, with increased use of the Eastern and Western Mediterranean routes comparative to 2017. Given the aforementioned risks of migration, it is important to understand the even riskier situations people are leaving behind to make such a journey, including war and poverty (UNHCR, 2018d).

Push and pull factors

People traveling to Europe have different motivations for doing so. Some may be fleeing armed conflict, human rights violations or persecution, others may be escaping poverty or seeking education opportunities (UNHCR, 2018d). Significantly, violence and conflict in Syria, Libya, Afghanistan, Iraq and Central Africa led to the displacement of millions of people (Barbulescu, 2017). Most attempt to find refuge in neighbouring countries (UNICEF & REACH, 2017). However, conditions in these countries are also deteriorating to create another push factor (Brannan et al., 2016). A minority embark on the treacherous journey across the Mediterranean in the hopes of finding safety on Europe's shores (Barbulescu, 2017).

A UNICEF and REACH (2017) study further illuminates the reasons for, and reality of, the migration journey for unaccompanied minors arriving in Greece and Italy. The young people interviewed felt they were leaving behind a situation where they were unable to access basic children's rights and had no future prospects. Overlapping drivers of migration were most reported to be violence, conflict and exploitation (70%), limited livelihoods in the country of origin (48%), and limited public services (20%) (UNICEF & REACH, 2017, p. 30). As many as 75% of minors were the primary decision makers in deciding to migrate, many lacking a caretaker to look after them in their origin country or not wanting to worry their parents (UNICEF & REACH, 2017, p.3). For others, a common reason for travelling alone was because their families did not have enough funds to accompany them. Italy and Greece were often not the intended destination; some aimed to join family elsewhere in Europe, while others were motivated by their inability to find work (UNICEF & REACH, 2017). The motivations for movement become increasingly important when juxtaposed against negative depictions and securitisation justifications in receiving states (see Ceyhan & Tsoukala, 2002; De Graeve, 2017; Innes, 2010; Vollmer, 2011).

The journey for unaccompanied minors

Comparative to other children, unaccompanied minors are subject to additional risks due to their migration status, age and being outside of adult care (Schippers et al., 2016). Along their journeys, they may be exposed to danger and neglect (Save the Children, 2017). Like many refugees or migrants attempting to reach Europe, unaccompanied minors are reliant on smugglers to make the dangerous Mediterranean crossing (UNICEF, 2016). Children are much more vulnerable to criminal groups of smugglers or traffickers (Derluyn, Lippens, Verachtert, Bruggeman, & Broekaert, 2010), with unaccompanied minors sometimes under additional pressure to help their families and send money home (Schippers et al., 2016).

Smuggling and trafficking are often considered distinct phenomena: trafficking is defined as the transportation of people from one place to another for exploitative purposes, while smuggling is associated with illegal border crossings with third parties (Derluyn et al., 2010). As many as 30% of children aged 14-17 reported experiencing trafficking or other exploitative practices on the Mediterranean Route, compared to 16% of adults (IOM as cited in UNICEF & REACH, 2017). Despite the distinction from trafficking, exploitation is also rife within smuggling networks: travel routes are dangerous and complex, transport substandard and the risk of mistreatment or death considerable (United Nations Office on Drugs and Crime, 2018). Children may be pulled into a cycle of exploitation and debt in order to pay off smugglers or traffickers (Derluyn et al., 2010; Hodal, 2017). The growth of the smuggling apparatus has been linked to the securitisation approaches employed by the EU, with stricter border control tactics leading to few safe and legal alternatives for those seeking safety (Andersson, 2016a; Baklacioğlu, 2017).

A climate of control and restriction

The arrival of more than 1.25 million people seeking international protection in Europe in 2015 came to be represented as a crisis given the considerable political and humanitarian challenges it poised for the EU (Greussing & Boomgaarden, 2017). The increase in refugees came at a time when the EU was already facing challenges in the form of the Greek financial crisis and low economic growth, the rise in populism and

separatist movements, and continuing terrorist threats (Heisbourg, 2015). In response to current migration patterns, Europe opted for a default border security strategy with external borders becoming a key focus for political and financial investment in recent years (Andersson, 2016b). Stricter border control policies have been introduced (UNICEF & REACH, 2017) and securitisation attitudes have come to characterise the reception system, which are embedded in ideas of containment, control and deterrence, instead of care (Human Rights Watch, 2016a). Control tactics simultaneously seek to reaffirm and produce social boundaries (Bendixsen, 2016). This section discusses the construction of EU borders, the crisis frame associated with migration and the relevance of regional policies to care provision of unaccompanied minors in Greece.

The construction of a border crisis

Borders mean different things to a range of social actors; they are constructed and contested using a variety of techniques, laws, institutions, policies and social interactions. In a post-colonial world, the control of these borders has also intensified, becoming a core question in discourse of European and national identities (Bendixsen, 2016). Migration has become a prevalent political issue in the majority of countries in the global North (Peters & Besley, 2015), with debates about refugees morphing into wider discussions on migration (Goodman, Sirriyeh, & McMahon, 2016). Incoming refugees have been negatively positioned as economic burdens and a threat to European ways of life (Goodman, Burke, Liebling, & Zasada, 2015). In this climate, the construction of borders emerges as short-term political tool (Andersson, 2016a).

Borders are increasingly represented in media and political spheres within a perpetual emergency frame, while mobility is simultaneously positioned as a threat. Emotive labels such as ‘crisis’ imply a disconnection from the status quo to be consequently used by political actors to either absolve blame for the crisis’ occurrence, or to capitalise on opportunities to consolidate strength (Boin, Hart, & McConnell, 2009). The crisis frame associated with forced migration also holds implications for care, with a need to question whose interests the frame is serving (Goodman et al., 2016). For example, the temporary nature of crisis service can serve to suspend government

responsibility to remain at the emergency level and focused on basic needs (Cabot, 2014). The pursuit for border security within an emergency frame has also paved the way for a security model with a mandate of border control over humanitarian action. Within this frame, the border becomes situated as vulnerable, rather than the people crossing it (Andersson, 2016a). Through this approach however, people's vulnerability is increased: Restrictive policies further compromise the rights and safety of those attempting to seek asylum via the Mediterranean route (Albahari, 2018). Such policies consequently question the EU's commitment and compliance to the human rights regime it has ironically sought to champion (Barbulescu, 2017). By ignoring the agency of migrants, stringent border policies succeed more in inspiring the evolution or diversion of migration to riskier routes, rather than stemming movement (Amnesty International, 2017; Bendixsen, 2016).

Security on the seas

The European Border and Coast Guard Agency, also known as Frontex, patrol off the coast of Lesbos and utilise sophisticated equipment to alert both Turkish and Greek border authorities when a migrant boat is detected departing from Turkey. They aim to stop it before it reaches Europe (Vice News, 2015). The perils of crossing the Mediterranean allows for EU officials to position border policies as good for migrants, but as Feldman (2011) argues:

The EU's migration apparatus is not a vast humanitarian intervention, but an amalgam of policies and enforcement agencies, usually given a humanitarian face, that define 'crisis' according to the EU's own political and economic needs. That crisis provokes the EU to fine-tune its migration management policy – not to improve wellbeing of migrants themselves. (p. 17)

The above quote demonstrates how migration interventions are shaped around Europe's own interests, even if it is cloaked as a humanitarian response. The discourse of control logically shifts to prevention and protection, both justifying policy and shifting responsibility for its effects, such as deaths at sea (Jansen, Celikates, & Bloois, 2014). The social and material arrangements of borders, including security infrastructure and technology growth, are continually reinforced by

drama at the borders. This cyclically strengthens the emergency frame and security response (Andersson, 2016a).

Looking at the Mediterranean response further, in February 2016, the North Atlantic Treaty Organisation (NATO) announced a joint intervention in the Aegean Sea with the EU under a mandate to gather information to immobilise smuggler networks working between Turkey and Greece. This use of military force is considered highly problematic given many boarding the ships are asylum seekers entitled to international protection (Barbulescu, 2017). Such tactics are reductive analysis of the problem, and serve to reinforce the security threat frame, rather than addressing demand (Andersson, 2016a). These tactics also target low-rung smugglers, and thus the migrants and refugees themselves, rather than the growing black market based on the exploitation of women and child refugees (Baklacioğlu, 2017). Punitive approaches instead transfer new risks to refugees and migrants by driving smugglers further underground (Andersson, 2016a), and also show how the denial of the right to care begins before the border is reached.

The closing of the Balkan route

Positioned as the gateway to Europe, during 2015 about one million migrants arrived in Greece with the intention of continuing travel through neighbouring Balkan countries (Digidiki & Bhabha, 2017). The Balkan route that took shape in 2015 saw huge numbers of people arriving in Greek islands such as Lesbos, Chios, Samos, Kos and Leros before traveling to mainland Greece by boat, and trek to the border with Macedonia. After crossing the border, many people aimed to move onwards into Vienna or Munich via Serbia and Hungary, or Serbia, Croatia and Slovenia (Bechev, 2016). However, in early 2016, regional political developments in Europe influenced border closures with Greece by key Balkan countries (Digidiki & Bhabha, 2017). The charge was led by Hungary and Austria in response to German Chancellor Angela Merkel's "Willkommenskultur" (culture of welcome)³ (Bechev, 2016, p. 5). From late February, people at the Idomeni border crossing were blocked (Triandafyllidou, 2018), sparking a humanitarian crisis for 60,000 stranded refugees in Greece given

³ Germany initially adopted an integration and 'welcome' response to high levels of migration into the EU, permitting about one million refugees to enter Germany during 2015-2016 (Funk, 2016).

the limited capacity of the Greek Asylum system to process claims. The closing of the border contributed to excessive stays for asylum seekers in inadequate, deteriorating conditions and the practice of mandatory detention. Access to asylum procedures and safeguards were undermined as a result (Papadopoulou, 2016).

The closing of the Balkan route was important for Greece, not only because many refugees were then stranded there (UNICEF & REACH, 2017), but also because it forced Greece to take a stance amid pressure between upholding its obligations to offer asylum and keeping the Turkey border open, to the threat of being expelled from the Schengen Agreement⁴. As such, these border closures represent more widely the politics of belonging to the EU (Triandafyllidou, 2018). This event was also significant in relation the care of unaccompanied minors as it meant Greece transitioned from a short to long-term host country (Digidiki & Bhabha, 2017). There were efforts to improve standards of housing arrangements, especially for children (Digidiki & Bhabha, 2017), but care facilities continued to operate at a severely limited capacity (see next section).

The hotspot approach, EU-Turkey readmission agreement and Dublin regulation

In May 2015, the ‘hotspot approach’ was introduced as an immediate action response to ease migratory pressures in key EU locations, including Greece. The approach was initially linked to relocation to alleviate the pressure on frontline countries, however, the EU-Turkey statement in March drastically altered the mandate “from identification and registration to admissibility and return” (Danish Refugee Council, 2017, p.8). Under the EU-Turkey readmission agreement, new irregular migrants arriving in the Greek Islands from Turkey after 20 March 2016 were to be returned. Turkey was also to implement measures preventing new sea and land routes to the EU forming (European Commission, 2016). Such an agreement significantly altered the landscape of EU, Turkey and Greece relations, and life for the refugees themselves (Dimitriadi, 2016).

⁴ The Shengen Agreement is a treaty that abolished border control checks at common borders of signatory EU states (European Commission, n.d.-a)

By blocking movement to the Greek mainland, many were stranded in the hotspot locations of Lesbos, Chios, Samos, Leros and Kos (Human Rights Watch, 2018). Prior to the agreement, arrivals in the Greek Islands were free upon registration to head for Athens. Those arriving after the EU-Turkey agreement were contained in hotspots that were quickly transformed into overcrowded and poorly resourced detention centres. Only one day after the agreement came into force, 50,411 people were stranded (Dimitriadi, 2016, p. 4). As at May 2018, overcrowding persists as demonstrated in Table 4.3.

Table 4. 3: Hotspots in Greece capacity and occupancy

Hotspot location	Start of operation	Total reception capacity	Occupancy
Lesvos	October 2015	3,000	8,500
Chios	February 2015	1,014	1,533
Samos	March 2016	648	3,276
Leros	March 2016	980	924
Kos	June 2016	816	968
Total capacity (May 2018)		6,458	15, 201

Source: European Parliament, 2018, p.3

Not only are the hotspots continually overcrowded, particularly in Lesbos and Samos, but they are also unfit for long-term stay. A recent report by the BBC described “appalling sanitary conditions”, “deadly violence”, “overcrowding” and detailed how children as young as 10 had been attempting suicide at one of the main refugee camps, Moria on Lesbos (Nye, 2018). In most cases, tents have been set up around existing infrastructure as an emergency accommodation measure. They are not sufficient for winter (Dimitriadi, 2016). Conditions remain inhumane as at early 2019, with Oxfam (2019) releasing a report detailing dangerous environments and the failure of authorities to identify vulnerable refugees, such as unaccompanied minors, instead placing them in detention.

The Greek government argues the containment policy is necessary to uphold its commitment under the EU-Turkey Statement on migration (Human Rights Watch, 2018). However, Amnesty International (2014) argues the EU's attempts to construct an impenetrable wall around Europe, both physically and legislatively, comes with the responsibility to ensure lawful practice is upheld. The EU-Turkey deal, however, instead attempts to legalise the practice of refoulement⁵ (Amnesty International, 2017). Returns are premised on Turkey being a 'safe third country', but Amnesty International (2017) contends this is not the case. Amnesty International's research instead shows that the prerogative placed on third countries to prevent irregular migration to Europe puts migrants, refugees and asylum seekers at increased risk of detention and ill-treatment. The policy is also a prime example of the EU shifting pressures to the national level (Papadopoulou, 2016).

Despite exemptions from the accelerated border process of the hotspot approach (Human Rights Watch, 2016b) unaccompanied minors are still vulnerable to prolonged stays in these locations in deteriorating conditions due a lack of shelter on the mainland (Papadopoulou, 2016). The practical challenges and their implications for unaccompanied minors at the hotspots are many: there have been reports of overcrowding, unsafe and inadequate living conditions (Kourachanis, 2018; Banning-Lover, 2017), and a lack of access to food, water, sanitation facilities and healthcare (Greek Council for Refugees, n.d.-a). Some reception facilities are now hosting double the number of unaccompanied minors than they were made for, compromising safety and wellbeing, while long delays before being transferred to the mainland further compounds the mental and emotional strains (UNICEF, 2017a). Delays also leave young people vulnerable to other risks including smugglers and violence (Montero, 2017). Some may choose to bypass the asylum and child protection systems altogether and continue dangerous journeys north (Ferrara et al., 2016).

The European Agenda on Migration introduced the hotspot approach under the objective of easing the pressure on Greece and Italy. Instead, however, the hotspot approach contributed to issues given the increase in asylum applications. The

⁵ Refoulement is the forced return of a person to a country where they face human rights violations. Under international law, such returns are prohibited under what is referred to as the principle of non-refoulement (Amnesty International, 2017).

shortcomings inherent in the Dublin system⁶ were consequently highlighted (Papadopoulou, 2016). The number of asylum applications continued to place unequal pressure on Greece (Maldini & Takahashi, 2017), and the barriers to a harmonised reception system was also evident in the disparities across member states in reception policies, standards, access to welfare, and liberality in granting asylum status (Brekke & Brochmann, 2015). Concerns pertaining to unaccompanied minors also exists in relation to the Dublin Regulation, including member states not upholding positive obligations in practice, such as the allocation of a guardian to promptly undertake a best interests assessment and conduct family tracing (European Council on Refugees and Exiles [ECRE], 2016).

Need for coordination and recognition of claims

Given their absorption into a wider narrative of politics and control (Pratt & Valverde, 2002), different political and social contexts can therefore impact unaccompanied minors reception and life situations in host countries (Wernesjö, 2011). Despite negative depictions of migrants as looking to exploit the system (Anderson, 2013), in reality, the injustices exist more in the radical inequality in life-chances between countries. The failure of stable and affluent states to recognise the rights claims of those fleeing conflict and poverty serves to further entrench global inequalities (Brannan et al., 2016). This tension shows how it becomes important to embed issues of legality within political and real-world perspectives, with the mainstreaming of right to development limited in its omission of wider shifts towards more equal resource and power distribution (Uvin, 2007).

Europe's refugee crisis is one caused by the response to refugees, rather than the refugees themselves. The increase in people migrating is something the world's richest continent could feasibly absorb, if it was handled properly (Kingsley, 2016). European Authorities continue to focus on reducing irregular migration through restrictive policies (UNHCR, 2018d), when what is really needed is safe, legal pathways with which to seek asylum (Amnesty International, 2017; Andersson, 2016a; Orchard & Miller, 2014) and a long-term plan to ensure the rights of asylum

⁶ The Dublin Regulation was designed to establish the member state responsible for examining asylum claims (European Commission, n.d.-b)

seekers and migrants is protected (Barbulescu, 2017). The recent Global Compact for Migration, a non-binding agreement signed by 164 countries aimed at fostering greater coordination, holds potential to improve cooperation for safe and orderly migration (Goodman, 2018). UNHCR (2018c) also outlines key recommendations to improve the migration response, reduce deaths and protect unaccompanied minors. These recommendations include a need to implement protection-sensitive border policies; to develop a regional collaborative plan in the Mediterranean Basin; to strengthen systems through integration of unaccompanied minors within national child protection frameworks; and finally to ensure children are not subject to detention. These protections are not yet in place for children in Greece, as explored in the following section.

The effects of securitisation on reception

The regional policy developments described above have tested the Greek government's capacity and readiness to take action in regards to immediate care needs such as safe accommodation and access to basic supplies and services (Tsitselikis, 2018). Amidst the implications of a fortified border strategy, Feldman (2012) argues the growth of transnational migration management apparatus has produced a grave apathy towards, and hyper-objectification of, the migrants it targets. These ideas are explored in relation to the policy and practice of the reception system for unaccompanied minors.

Identification and reception of unaccompanied minors

The EU-Turkey agreement has left unaccompanied minors seeking asylum at greater risk of “deportation, detention, exploitation and deprivation” (UNICEF, 2017b, para. 1). The introduction of uniform detention for all new arrivals transformed Reception and Identification Centres [RIC] into overcrowded detention spaces with no provisions for age appropriate services and spaces for minors (Fili & Xythali, 2017). Under Article 17 PD 220/2007, the competent authorities and local administrators are to “take care to provide special treatment to applicants belonging to vulnerable groups such as minors, in particular unaccompanied minors”. The Reception and Identification Procedure further stipulates vulnerable groups are to be referred to

social support and protection institutions (Asylum in Europe, 2018b, para 1-2). In practice however, there are systematic problems with identifying unaccompanied children (Fili & Xythali, 2017).

Part of the problem is due to the small number of RIC and Accommodation Mobile Units comparative to the number of points and ports of entry. The task of identification can fall to the Hellenic Coastguard or the police, who lack the necessary training. Services have previously been subcontracted to NGOs, who in turn do not have appropriate spaces to work in. Shortcomings compound to lead an environment where minors may be wrongfully identified and registered. Examples include the forceful separation of children travelling with extended family members and registering them as unaccompanied, allegedly for their protection, or the reverse: placing unaccompanied minors with non-related adults. The latter is correlated with periods where detention facilities are overrun, with wrongful registrations reportedly allowed in order to relieve detention capacity pressures (Fili & Xythali, 2017). The transferral of health services back to state actors including the Ministry of Health and the Centre of Disease Control and Prevention (KEELPNO) revealed further issues. Delayed and dysfunctional identification services have been reported, leading to asylum seekers subjected to asylum interviews without first having vulnerability assessed (Greek Council for Refugees, 2017). UNICEF and REACH (2017) further detailed how unaccompanied minors may lose trust in the system given access to documentation such as asylum and residency, alongside legal pathways, is inherently slow.

The underdeveloped and overburdened asylum system means processes for a fair hearing for children, as stipulated in EU and national law, became even harder to guarantee. This can lead to children falling through the cracks as, for example, the assessment of a child's best interests (see Chapter 2) is not a process that can be compressed and is a time and resource intensive process, requiring specialised sets of skills (Beirens & Clewett, 2016). Inaccurate registrations are further complicated by age assessment procedures, within which a culture of suspicion emerges for those claiming to be under 18, despite laws stating the opposite (e.g. Law. 4375/2016, Art. 14, par. 9 as cited in Fili & Xythali, 2017).

Use of age assessments

With greater consideration in accessing care given to minors, age has become a central feature in defining what constitutes an authentic asylum claim (Hedlund, 2016). Age assessment tests are highly disputed, with age determination understood to be at best difficult, at worst an impossible endeavour (Derluyn & Broekaert, 2008; Hedlund, 2016). Greek authorities have been reported to arbitrarily register many children as adults, with Human Rights Watch (2017) detailing the case of 16-year-old unaccompanied minor who was registered as 19; “I don't know why they changed my age. I asked them many times and the only thing they told me is to sign some papers” (p 1). Describing the UK context, Humphries (2004) outlines how the cost of caring for children in need has led to such restrictive policy, and effectively internal borders to accessing care. Age itself therefore exists as a contestable label subject to power dynamics, due to its relationship with access to services (Kohli, 2006).

The conceptualisation of age is also embedded in a hegemonic narrative of normative constructions of Western childhood (Jeffrey & McDowell, 2004). Concerns about how age is construed emerges, given age constructs are an example of universal and ideological assumptions embedded in Euro-centric experience (Ziai, 2007). Through age assessments, binary constructions relating to perceived deservingness of support are uncovered, from the fraudulent adult asylum seeker looking to exploit public services (Gower, 2011), to the vulnerable child in need (Giner, 2007; Kanics et al., 2010). Such depictions not only ignore minors' agency (De Berry & Boyden, 2000), but can serve to justify harsh enforcement mechanisms that act to severely weaken the best interests of the child prerogative outlined in the CRC (McLeigh, 2013).

The arbitrary use of detention

Alone in Greece without their parents, unaccompanied minors are entitled to the care and protection from the state. Instead, a lack of capacity in Greece's shelters has contributed to the use of prolonged, arbitrary detention of minors, in pre-removal detention centers, police stations or closed facilities on the Greek islands, while they wait to be transferred to an official shelter (Human Rights Watch, 2016a). A well-documented occurrence across EU member states (Smyth, 2013), detention has been

found to have “a profound negative effect on children” as it “undermines psychological and physical health and compromises their development” (Corlett, Mitchell, Van Hove, Bowring, & Wright, 2012, p. 7) and places unaccompanied minors at high risks of abuse (Human Rights Watch, 2016a). Detention also contributes to unaccompanied minors’ sense of powerlessness, particularly due to the limitations it signals for future possibilities (Coffey, Kaplan, Sampson, & Tucci, 2010).

In consideration of Article 37 of the CRC, detention is seen as a denial of children’s right to liberty (Corlett et al., 2012). Detention stands in violation of unaccompanied minors’ rights under international and national law (UNHCR & UNICEF, 2014), and should only ever be a last resort measure for the shortest period possible (Human Rights Watch, 2016a). The use of detention in Greece is under the guise of a three-day restriction of movement, however, confinement can be extended to 25 days if procedures are not yet completed, and a further 20 days in exceptional circumstances. Despite legislative protection, many unaccompanied minors are held in prolonged detention or in quarters with adults, in situations that exacerbate their exposure to dangerous living conditions (Digidiki & Bhabha, 2017). The use of detention is justified under the guise it is a temporary protective mechanism for the child’s best interests, however, in reality the policy is far from it (Human Rights Watch, 2016a). A recent Human Rights Watch (2016a) found children to be detained for periods longer than 45 days. The report also found children faced abusive treatment and unsanitary, disgraceful conditions, including ill-treatment by police and detention among adults. Children were also not provided access to critical care and services including access to a guardian, medical treatment, counselling, legal aid, or offered interviews in an appropriate language – an important safeguard for identifying and addressing specific needs.

Detention is commonly used because of a lack of capacity in official care structures (Digidiki & Bhabha, 2017), with violations then becoming representative of insufficient political will to protect unaccompanied minors’ rights (McLeigh, 2013). The use of detention has also been correlated as a deterrence measure for irregular

migration⁷, despite research showing even the most stringent policies do not achieve this (UNHCR, 2014a). Instead, studies have shown destination countries are chosen based on where family and friends are, perceptions of the relative safety of the country and reliance on smugglers, rather than in relation to immigration policy such as detention (Council of Europe, 2014a).

Attempts at temporary reception alternatives

Established under emergency guise, temporary accommodation facilities commenced operation in the summer of 2015, under the expectation children would be transferred to longer-term facilities within three weeks. However, with a lack of capacity in mainland facilities, they inadvertently became a model unto themselves (Fili & Xythali, 2017). Temporary alternatives to detention include residential care centres at border locations (Fili & Xythali, 2017), a model discussed further in the next chapter, and other care arrangements such as the establishment of safe zones in camps (Human Rights Watch, 2016a).

Safe zones are effectively areas identified in refugee camps to better protect vulnerable groups like unaccompanied minors. Sites are selected based on factors such as the ability to regulate entry, presence of authorities to ensure law and order, inclusion in a winterisation plan and proximity to support services. Safe spaces for unaccompanied children among families may also be considered (Child Protection Sub Working Group – Athens, n.d.). Such zones are considered favourable to detention as children can enjoy greater freedoms and access to the services provided in refugee camps (Human Rights Watch, 2016a). However, it is again worth noting the deteriorating conditions and overcrowding documented in such camps (Tazzioli, 2017), and high levels of child abuse (Nelsen, 2017). These factors further call into question the ability of any space within these camps to align with the CRC's principles including the best interests of the child (Article 6), right to survival and development (Article 6) and right to liberty (Article 37) (UN, 1989).

⁷ Irregular migration is loosely defined as “Movement that takes place outside the regulatory norms of the sending, transit and receiving countries” (IOM, 2011, para. 17)

Challenges and contextual considerations

The conditions in reception facilities are significant given the lack of capacity in the official care system means unaccompanied minors are often held in these centres for extended time periods (UNICEF, 2017a). Despite the EU deploying a humanitarian unit to Greece following the migration peaks of 2015, a lack of oversight on funds, managerial negligence and short-termism contributed to ineffective programming, and harsh conditions in accommodation remained across many centres (Howden & Fotiadis, 2017). The rapid expansion of housing arrangements in Greece to respond to the situation of unaccompanied minors highlighted the need for qualified staff, and a consequential shortfall in training capacity on legal and institutional provisions for unaccompanied minors (Fili & Xythali, 2017). The foster care system also remains underdeveloped, with reasons including complex bureaucracy, staffing shortages at the relevant authorities and a lack of political leadership and investment (Giannarou, 2013).

Challenges to caring for unaccompanied minors permeate across the Mediterranean region. For example, fragmented practices exist in France and Italy, with different policies in each region and only a few examples of reception in families (de Ruijter de Wildt et al., 2015). In Malta, unaccompanied minors are housed in separate open centres and foster care hardly ever utilised. Unaccompanied children over 16 years old may be accommodated with adult asylum seekers (Asylum in Europe, 2018a). In Cyprus, a foster care for unaccompanied minors pilot programme was introduced in 2017 (Cyprus Mail, 2017), prior to this unaccompanied minors were legally entitled to foster care but there was no system for foreign children. In Spain, unaccompanied minors make up 50% or more of children in residential care and the country also has an underdeveloped foster care system (de Ruijter de Wildt et al., 2015). The issues that plague Greece therefore, are not unique, but they are significant given the numbers of unaccompanied minors arriving on their shores (EKKA, 2018).

In considering the state of care for unaccompanied minors there are also context specific elements to consider on top of regional migration policies. The height of migration to Greece came at a time when the country was still reeling from the financial crisis (Trauner, 2016) and welfare service had been compromised further by

austerity measures (Matsaganis & Leventi, 2014). This section seeks to understand some of the contextual factors shaping the systems and models of alternative care available for unaccompanied minors.

Welfare models and the financial crisis

The “Mediterranean model” of welfare is described as emphasising the importance of family networks in approaching social needs. This is to the effect family becomes situated as the main provider for social and personal wellbeing. In recent decades, there has been development in welfare provision across social, health and education services (Del Valle, Canali, Bravo, & Vecchiato, 2013, p.227). However, welfare provisions across basic security, family and care policies, and universal healthcare are under-resourced. Consequently, “the family constitutes the main insurance for risks not covered by public welfare” (Calzada & Brooks, 2013, p.516). Mediterranean cultures therefore have high levels of intergenerational cohabitation and family proximity (Attias-Donfut, Ogg, & Wolff, 2005). It is worth noting the assumed relationship between citizen attitudes and family-based provision could be an outcome of independently existing preferences, or an adaption to inadequate service provision (Calzada & Brooks, 2013).

Within the Mediterranean model, it is argued that strong family ties, and corresponding commitments, have contributed to some aversion to, and slowness in, developing foster care (Del Valle et al., 2013). This is reflected in statistics pertaining to the number of children in foster care at only 309 of the 3134 children in care in 2014 (Opening Doors, 2015, p. 2). Comparatively, there are currently 85 children’s institutions in Greece (Lumos, n.d, para. 1). The main reasons for children being placed in institutional care include disability, neglect and abuse, with a lack of family support also cited as a contributing factor (Opening doors, 2015).

The Greek financial crisis

The Greek financial crisis further aggravated the state of welfare provisions through the depletion of much needed resources (Matsaganis, 2011). The crisis occurred because of the amount of sovereign debt the Greek government owed following the

financial crisis of 2007-2008 (Nelson, Belkin, & Mix, 2011), and showed how the welfare state was inadequate for helping vulnerable groups cope with the emergency (Matsaganis, 2011). Austerity measures hit struggling parents to the point they were unable provide for their children. Increasingly, families were turning to the country's institutions for support; 500 such families requested placements for their children in homes operated by SOS Children's Villages alone, something that further compounded issues of capacity (Smith, 2011). The financial crisis also affected accommodation facilities, with funding reduced, long-term planning and the implementation of policies for smooth integration of unaccompanied minors and their preparation for adulthood has been described as impossible (Marouda, Rossidi, Koutsouraki, & Saranti, 2014).

Culture of institutionalisation

In Southern European countries, the charitable and private sectors play a considerable role in residential care service provision, and have a tendency to retain and develop these services over investment in wide scale foster care systems (Sellick, 1998). Large institutions have traditionally been seen as places of rescue, not just in the immediate sense, but also the religious (Courtney, Dolev, & Gilligan, 2009). Approximately two thirds of residential care institutions in Greece are privately owned and operated, raising concerns of organisational structure, power and influence (Opening Doors, 2015). A lack of public oversight means violations are often left unnoticed (Lumos, 2016), while also contributing to an environment where corruption of care is more likely to take place (Wardhaugh & Wilding, 1993). Despite the introduction of new legislation to reduce the procedural burden of foster care (see next chapter), private and faith-based institutions do not routinely participate in foster care programmes, given they are not certified nor obliged to follow legislation (Opening Doors, 2015).

Conclusion

Political and social processes permeate the care process for unaccompanied minors. The deprioritisation of investment into the child protection and welfare systems has been shown to perpetuate private operators' control of care while leaving gaping

holes in terms of capacity. The financial crisis compounded issues of shelter capacity, with both an increased reliance on residential care by struggling families, and funding reductions. Unaccompanied minors' right to access appropriate arrangements are further undermined by migration policies, which are characterised by a mandate of control over care.

Migration has become a point of contention amongst many EU states, with the corresponding securitisation response failing to account for the push factors leading people to embark on such a dangerous journey. The approach also compromises the EU's own commitment to the human rights regime it has sought to champion. Policies such as the EU-Turkey deal have instead contributed to deteriorating conditions in camps, and left unaccompanied minors to languish in vastly inappropriate conditions. Exclusion tactics employed in the migration response have been demonstrated to have an unacceptable human toll, with a need for greater coordination to enact a humanitarian response.

The tensions that emerge between the CRC and migration policy also show how children's rights are weakest at the border, with unaccompanied minors met with an ineffective care system that is stretched beyond capacity. Urgent child protection needs resulting from these conditions have led NGOs to implement temporary alternatives in an emergency response style. The use of harsh deterrence mechanisms can also serve to inspire unaccompanied minors to avoid the system altogether, and continue dangerous journeys without protection. Consequently, political processes have been shown in this chapter to have direct consequences for children attempting to realise their right to appropriate alternative care. In approaching research into the local Greek context therefore, rights provision and care practices cannot be viewed in isolation from key regional events and surrounding processes of power and exclusion.

CHAPTER 5: THE CARE LANDSCAPE

Introduction

In looking to the local care landscape, this chapter details both wider literature pertaining to available models of care and presents findings from the field research. These are presented in relation to the Convention on the Rights of the Child's [CRC], in which family-based care solutions are prioritised over institutions (UN, 1989). This prioritisation arguably stems from residential care institutions' association with poorer outcomes for children (see Tolfree, 2003; Vorria, Rutter, Pickles, Wolkind, & Hobsbaum, 1998; Wade, Fox, Zeanah, & Nelson, 2019), and recognition that family-based care arrangements are broadly considered more conducive model for meeting children's rights and needs (see Li, Chng, & Chu, 2017; Tolfree, 2003; UN, 2010). Advantages of family-based care consistent with a best interests approach include stability, individual care and emotional support (Sirriyeh, 2013). Additional research points to the benefits of secure and supportive family membership and relationships for adolescents (Schofield & Beek, 2009), which make up the main demographic of unaccompanied minors (UNICEF, 2017c). That is not to say family-based care arrangements are appropriate for all children, with supported independent living [SIL] positioned as another model attempting to respond to the unique needs of older children (Kuligowska, 2015).

Considering the advantages of foster care and SIL, it is significant residential care has emerged as the dominant response for children outside of adult care or unable to live with their families in Greece (Opening Doors, 2015). Therefore, in seeking to understand the Greek care landscape, this chapter first juxtaposes the responsibility of the state to provide appropriate care with system limitations and actual practice. Next, in beginning to answer the question as to how different alternative care models are meeting unaccompanied minors rights, each approach is discussed in-line with existing literature, then findings from the field presented. Finally, the rationale for expanding the spectrum of care options is discussed alongside linked considerations.

State responsibilities versus a stretched system

When a child is deprived of parental care, the right to alternative care is triggered (UN, 1989). Alternative care can be informal or formal, with distinctions outlined in Table 5.1. This chapter explores the formal systems of care provision, including foster care, residential care and supported independent living, and introduces the state's role in informal care. The focus on a rights-based approach to alternative care is borne from the state's legal responsibility to provide alternative care for a child deprived of their family and ensure processes are in place to protect all children (UN, 1989).

Table 5. 1: Informal and formal alternative care solutions

Informal care (no state involvement)	Formal care
<ul style="list-style-type: none"> • Kinship care • Community-based care • Other informal family-based arrangements 	<ul style="list-style-type: none"> • Legally/judicially ordered foster care (kin and non-kin) • Other family-based or family-like care placements • Residential care of any kind • Supported independent living

Source: UN, 2010, p.6; Roby, 2011, p.10

Despite the distinction in Table 5.1 that informal care has no state involvement, this does not mean the state does not have responsibilities. Where possible, appropriate and deemed to be in a child's best interests, states should encourage and enable informal caregivers to formalise arrangements. Consent of the parents and child concerned should also be obtained (UN, 2010, p.11). Consequently, in exploring the care landscape for unaccompanied minors, the role of the community in care provision should also be acknowledged.

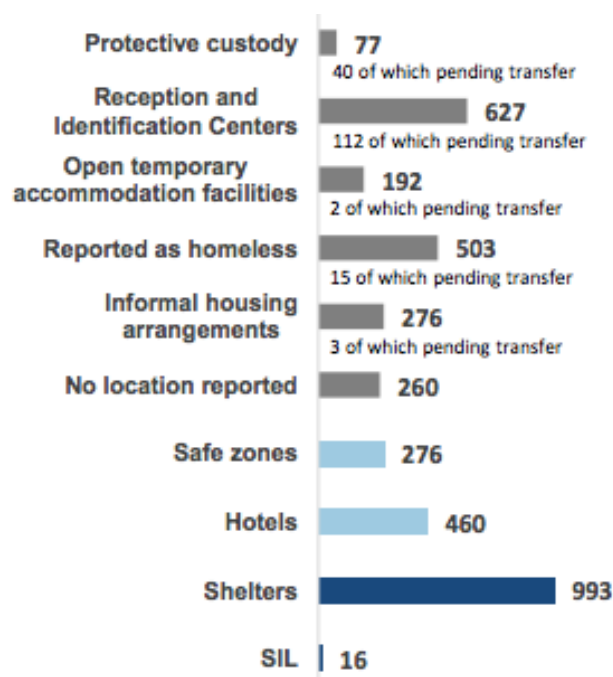
A fragmented child protection system

Juxtaposed against the above outline of care provision responsibilities, is the reality of the situation in Greece. The country's child protection system has been reported by The Manifold (2018) to lack coherency, and is made up of hundreds of services

spread throughout the country that operate in isolation. Successive governments have largely ignored the problem and attempts to coordinate child protection efforts have been reportedly disregarded to the effect there is a “structural inability to organise a coherent system of child protection in Greece” (para. 16). Unaccompanied minors arriving in the country enter a fragmented system with little accountability (Fili & Xythali, 2017).

Most shelters are run by NGOs without common standard operating procedures (Fili & Xythali, 2017). Referrals to the shelters are made through the National Centre for Social Solidarity [EKKA], the only authority with a placement referral network (Greek Council for Refugees, n.d.-b). The number of placements available remains vastly insufficient, with beds available for approximately only one third of unaccompanied minors. Where unaccompanied minors are able to access a space, the predominant model of care available is the residential shelter system (see EKKA, 2018). NGOs have also implemented small-scale foster care and supported independent living [SIL] programmes (discussed below). In 2016, the average wait time to access shelter was 39.5 days (Gioka & Boswas, 2018). As at November 2018, there were a reported 3,680 unaccompanied minors in Greece, with their reported place of stay detailed in Figure 5.1.

Figure 5. 1: Reported place of stay of unaccompanied minors, 15 November 2018



Source: EKKA, 2018, p.1

Figure 5.1 shows the severe lack of capacity for unaccompanied minors, a factor that has pushed young people to homelessness and outside of formal care, or left them to languish in inappropriate reception and identification centres (see previous chapter). Compounding the potential for rights abuses across accommodation structures is the lack of effective guardianship system.

The guardianship system

According to the UN Committee on the Rights of the Child (2005), “a guardian or advisor should be appointed as soon as an unaccompanied or separated child is identified” (p.11). Guardianship is an important feature of a child protection system for children outside of adult care, with unaccompanied children more vulnerable to abuse or exploitation (European Union Agency for Fundamental Rights, 2015). In Greek legislation, Article 19(1) of the Presidential Decree 220/2007 states competent authorities must take adequate steps to ensure representation of minors, and to this effect the Juvenile Prosecutor is informed, and where there is none, the local Prosecutor of the First Instance Court is to act as guardian until an alternative is appointed (UNHCR, 2012b).

In practice, however, guardianship is not always accessible or properly conducted. Reports have emerged of children having no contact with their guardian (Council of Europe, 2014b; Human Rights Watch, 2016a). The large number of children allocated to guardians renders their duties largely impossible, and the corresponding transferal of guardianship to accommodation personnel creates a conflict of interest (The Greek Ombudsman, 2017). The absence of an effective guardianship system in Greece holds significant impacts on unaccompanied minors’ situations given the important safeguarding role guardians play in advocating for appropriate care and legal representative in judicial hearings (De Graeve, 2017). Instead, limited understanding of the child reception systems and lengthy procedures can contribute to attempts by unaccompanied minors to meet their objectives by irregular means (UNICEF & REACH, 2017).

New legislation aimed at strengthening care

New legislation is being introduced to address gaps and increase protections for unaccompanied minors. These protections include the establishment of a Supervisory Guardianship Board and the Department for the Protection of Unaccompanied Minors at the National Centre for Social Solidarity (EKKA) of the Ministry of Labour, whom have the responsibility to guarantee safe accommodation (European Commission, 2018). There have also been some positive movements in regards to foster care legislation. New foster care laws were implemented in May 2018, under the title *Measures for the Promotion of Fostering and Adoption and Other Provisions*. The law provides for the establishment of national registers of prospective and approved foster parents. Foster care is organised into contractual, judicial and professional fostering. Concerns have emerged that no competent authority is allocated to oversee contractual fostering (Network for Children's Rights, 2018).

In this thesis' research, participants demonstrated a suspended but hopeful belief in how new laws will work in practice. Six participants felt the new policy had the potential to improve the situation, but the practicalities remained to be seen. For example, it was said that "at least now we're talking about something different" in relation to models such as foster care and SIL (Interview with Social Worker 2, August 29, 2018), and "maybe this will make the situation better and faster, but we don't know if it's possible, how it will be enforced in our society. Let's hope it will be" (Interview with Lawyer 1, August 23, 2018). Hope, but not yet belief, was demonstrated in the previous comments. This suspended belief may be for good reason: Independent Authority Representative 1 outlined the challenges of enacting such laws from a resource perspective given current fiscal restrictions and an attrition rule for hiring people. The need for secondary legislation to support the laws' implementation was also discussed. Consequently, while steps towards improving the situation of unaccompanied minors are evident, huge barriers to their realisation remain. In the meantime, unaccompanied minors are left in unpredictable situations with insufficient representation.

Unaccompanied minors left in flux

A lack of capacity in care structures leaves unaccompanied minors in flux while they wait for a care solution, something that can further push them to risky situations. Registration procedures for unaccompanied minors should be instantaneous (see Chapter 4), however, in reality they can be a lengthy process as “sometimes it takes months” (Interview with NGO director 1, August 27, 2018). As a result, large numbers of children are going “many, many, months without shelter” (Interview with Lawyer 2, September 14, 2018). A huge gap in care provision emerges because young people are unable to access official care structures until their registration is complete. Psychologist 1 explained how “it’s like they don’t exist if they’re not registered”. Young people may be forced to live in precarious situations in the interim, including “living in the streets, in the parks, or at friends, at squats” (Interview, August 29, 2018). The denial of the right to care consequently begins with issues of access.

Residential care: Characteristics, structure and impacts

Once an unaccompanied minor is able to access care, as detailed in Figure 5.1, they will most likely be placed in a shelter, a type of residential care. Residential care is provided in a non-family and group-based setting (UN, 2010), in a designated facility with remunerated staff (Better Care Network, n.d.-a). The model encompasses pseudonyms such as group homes, short and long-term residential facilities and emergency care (UN, 2010), and consequently takes on many forms. At one end of the spectrum, such care may be small scale and used in cases where the child is not comfortable in a family or requires specialised or intensive support. For example, a child with a negative experience of living in a family may struggle in the transition to foster care leading to a high likelihood of placement breakdown; some adolescents may prefer to live in a small group home situation; and other children may require specialised treatment, at least for a period of time (CELCIS, 2012). At the other end of the spectrum, residential care institutions [RCIs] are large-scale centres associated with a wide variety of physical and social issues (Better Care Network, n.d.-a).

The distinction between residential care and institutions is important, with the latter linked to calls for deinstitutionalisation strategies (CELCIS, 2012; UN, 2010). However, no common definition on what constitutes an institution exists outside of noting size as an important factor. Consequently, it is important to instead look to the “institutional culture” that exists in such settings, including the critique that these settings do not account for children’s individuality, or psychological and emotional needs in day-to-day programming (CELCIS, 2012, p. 34). Table 5.2 represents some of the characteristics of residential care institutions and how they relate to the CRC, as adapted from Tolfree (2003, p.9).

Table 5. 2: Institutional characteristics and rights

Institutional characteristic	Relevant articles from the CRC
Tendency to segregate children, leading to a sense of discrimination and stigma.	The principle of non-discrimination (Article 2)
Contact with parents and family, where available, decays over time.	The right to maintain regular contact with parents (9.3). The right to preserve identity (8). The right to family reunification (10)
Lack of individualised care and attention. Institutional needs prioritised over needs of individual children.	The right to grow up in an atmosphere of happiness, love and understanding (Preamble). The right to express views (12)
Inadequate stimulation and purposeful activities for children.	The right of leisure, play and recreational activities appropriate to the age of the child (31)
Denial of opportunities to learn about the role of adults within the particular culture.	Children should be fully prepared to live an individual life in society (Preamble)
Little or no opportunities to meet children outside the institution.	The right of freedom of association (15)
Increased risk of child abuse of various kinds. Can persist for extended periods of time before uncovered.	The right of protection from all forms of abuse and neglect (19) and from sexual exploitation (34)

Insufficient capacity to respond to the psychological needs of children	The right to rehabilitative care (39)
Problems adjusting to life outside the institution.	The right to assistance to enable the child to fully assume his or her responsibilities within the community (Preamble and 18)

Source: Tolfree, 2003, p. 9

There are a number of characteristics of residential care that are shown above to have a negative impact on children's rights and development. As a result, typical experiences of minors living in RCIs include segregation, discrimination and isolation (Tolfree, 2003). Children growing up in institutional care do not receive the level of nurture and stimulation required for healthy growth and development. More than 70 years of research points to delayed cognitive performance of children growing up in residential care (Van IJzendoorn et al., 2011), with institutional care most damaging for children younger than six (Tolfree, 2003). Other issues associated with RCIs include frequent shifts and changes in caregivers, which creates instability for minors (Zegers, Schuengel, Van IJzendoorn, & Janssens, 2008). Nunno (1997) further describes how large child-to-caregiver ratios have the potential to increase carers' job stress and consequently the likelihood of violence. A lack of trained and vetted staff raises additional protection concerns (Sellick, 1998).

Institutional characteristics of Greece's shelters

Institutional characteristics detailed in Table 5.2 also presented in research findings in relation to Greece's shelter system. In viewing these findings, note first that variability exists across shelters given the lack of standardised system (discussed below). Some evidence of segregation was presented through the practicalities of confinement to a residential facility. For example, Unaccompanied Minor 2 described how they "spend most of our time inside the house." (Online Interview, October 10, 2018). Multiple participants including Unaccompanied Minor 2, Former Unaccompanied Minor 1 and Lawyer 1 corroborated there was lack of activities in shelters. Scattered practice in relation to maintaining community and family ties was evident; one shelter pointed to their practices in supporting communication with family members as their "difference with other organisations who run shelters like

this” (Interview with Programme Manager 2, August 24, 2018). Further evidence suggesting children become disconnected from support networks within shelters was found in anecdotes that some children “would say they preferred it in the safe zones, because they were closer to their community” (Interview with Child Protection worker 2, September 5, 2018). Divergences in how well care was provided also emerged, with Independent Authority Representative 1 noting some shelters work with “the best practices possible” and in others, “the children were pretty much institutionalised” (Interview, September 3, 2018). Consequently, the provision of individualised care was detailed as an ongoing challenge in the Greek context.

In place of an individualised care approach, it was felt by some that there was instead a focus on basic needs. Descriptions of how “most of the time, these services think it is just about giving a bed” (Interview with NGO director, August 27, 2018) are bolstered by statements that “the current biggest needs remain safe care arrangements that are appropriate to each individual’s child’s needs” (Interview with Child Protection Worker 2, September 5, 2018). The limitations of shelters to be able to provide individual care was also leveled: “I believe that minimum 20 children living together in the same house with one or two social workers, having the same activities all together, have same life, with no special treatment, seems like they are living in an orphanage” (Interview with Social Worker 2, August 29, 2018). Building on this belief, an inability to adequately respond to children’s psychological needs was also described. For example, only a couple of shelters are reportedly capable of handling complex cases, but even these were targeted towards local children and had “very little experience of handling a young person who’s displaced and whose trauma is different” (Interview with Child Protection Worker 2, September 5, 2018).

Low standards of care were correlated with poor mental health outcomes in shelters by three participants. Informal Care Worker 1 described how initially unaccompanied minors “accept to stay in a shelter, but after some months, they will not go out of their room” (Interview, September 11, 2018). Former Unaccompanied Minor 1 further correlated this feeling: “They [the child] aren’t having a good time there. So I can’t say that I’m happy, but it’s obviously a thousand times better than a child sleeping on the street”. (Interview, September 6, 2018). The lack of capacity and the resulting relative perceptions of care models emerge in this participant’s statement.

Further disempowering consequences of shelters were also detailed, including little space for unaccompanied minors to learn skills to aid their independence. Former Unaccompanied Minor 1 felt a lack of allowance for unaccompanied minors compromised their ability to participate in assimilating social activities like going out with friends. The constricting environment in shelters was correlated with young people wanting to leave that situation: “Sometimes I see that they prefer to stay in a house with a smuggler than to stay in a refugee shelter run by NGOs, where you have to go at 10 o’clock at the latest...And then the only things that you have in a room is a TV, nothing else.” (Interview with Informal Care Worker 1, September 11, 2018). It was also felt there were limited opportunities for mixing with local children, with Youth Worker 1 identifying contact opportunities with Greek peers as a current gap. Research into the adjustment of unaccompanied minors into society following placement in a shelter is outside the scope of this study, however, evidence suggests there is not adequate integration to aid this transition.

On top of a lack of supporting processes for integration, residential care is seen in Table 5.1 to be aligned with increased risk of child abuse. Participants presented evidence of abuse in the form of neglect and substandard conditions. For example, safety was described as “a large concern” alongside “cleanliness and access to resources” (Interview with Volunteer Manager, August 23, 2018). Unsafe shelter environments were described to contribute to substance abuse: “a lot of children, unfortunately, are using substances.” (Interview with Social Worker 2, August 29, 2018). Some shelters were further described as “not in good condition” (Interview with Informal Care Worker, September 11, 2018) and that NGOs with “no experience at all in child protection [have] already opened shelters” (Interview with Social Worker 2, August 29, 2018). Consequently, these shelters were seen as ill-aligned to protect children from neglect and abuse, with rights at risk due to low levels of resources and technical capacity to respond to children’s needs. Specific instances of physical and sexual abuse were also not identified in shelters within the scope of study, however previous instances have been publically reported (see Hadjimatheou, 2014; Lumos, 2016).

Disparate standards of care

As described above, different shelters operate to different standards of care. A repeated frustration among participants was the lack of standardised care and monitoring systems, and the resulting disparate care provision. In research, nine participants described the unequal care provision as a key concern. For example it was felt “there is no model because we don’t have all the same protocol” (Interview with Social Worker 2, August 29, 2018), that shelters were “really hit and miss” (Interview with Fieldworker 1, September 13, 2018), and “the biggest challenge is the fact that we have a different dynamics when it comes to sheltering” (Interview with Child Protection worker 1, August 16, 2018). The lack of common standards of care is reflected on in these statements, something tied to a lack of public oversight of shelters.

Several participants including Social Worker 2, Psychologist 1, Independent Authority Representative 1, NGO director 2, and Informal Care Worker 1, lamented the absence of an effective monitoring mechanism for NGOs. The social worker summarised the need for such mechanisms: “someone from the Greek government has to be responsible to evaluate every one of us, to see if we do a good job, if we do the same thing” (Interview with Social Worker 2, August 29, 2018). The lack of monitoring was also associated with a loss of control: “the state must not lose its overall control of the situation, because that's what's going on now” (Interview with Independent Authority Representative 1, September 3, 2018). With little oversight of their practices, the gaps in the child protection system are shown below to reduce accountability of care actors and contribute to disparate care provision. Different views concurrently emerged on how well rights are realised in the shelter system.

In shelters where participants felt rights were being met, they cited elements including the provision of basic needs, good nutrition, access to activities, social support, inclusive education, rapport between children and staff and integration in the community. Unaccompanied Minor 3 felt caregivers provided everything he needed at the shelter he resided, although he noted the meals could be more nutritious. In the shelter I visited, there appeared to be a range of activities that children expressed they enjoyed, opportunities to exercise their independence including cooking nights and

time to go out, access to support workers and contact with their families facilitated. However, the reality is the shelter could not provide the children with what they really wanted: to be with their families. This was evidenced in both conversation with the young people who described missing their parents repeatedly, and by Programme Manager 2 who stated the children's "biggest concern is when they will get to their parents" (Interview, August 24, 2018). These findings show how even well-resourced shelters struggle to meet children's needs - they can not replace family – to further evidence why family is recognised in the CRC as the best environment for full development (UN, 1989).

Comparatively, it was felt by six participants that not all care providers were suitably qualified. On top of instances of NGOs with no experience in child protection opening shelters as described above, it was further felt shelters "don't know their responsibilities (Interview with Lawyer 1, August 23, 2018). Building on concerns, Psychologist 1 noted that in the first instance, unaccompanied minors may be happy to go to a shelter, but then something would happen, such as no one checking on them, a lack of access to interpreters and no activities. This worker also described cases where children were not met by a social worker in the first days, while others had no lawyers. Fieldworker 1 reported a lack of legal representation and safeguarding at another shelter: unaccompanied girls were housed alongside women who had experienced domestic abuse, at a venue also operating as a school for teenage boys during the day. Inappropriate conditions and inadequate access to required support services consequently emerge as key concerns.

RCIs and the corruption of care

The term 'corruption of care' refers to the conditions within which institutions, organisations and individuals, purportedly dedicated to an ethic of care, come to be 'corrupted' and abuse their power. There are several defining features relevant to the situation of unaccompanied minors. For example, continued depersonalisation throughout the institutional process can contribute to moral invisibility and consequently powerlessness of young people (Wardhaugh & Wilding, 1993). An emphasis of control over care becomes both the product and perpetrator of depersonalisation, while simultaneously speaking to failures in management whereby

the smooth running of institutions is prioritised over individual needs. This environment also makes it easier for staff to become corrupted, as greater attention to control, conformity and surveillance, over care and development, contributes to divisive staff and residential cultures (Green & Parkin, 1999; Wardhaugh & Wilding, 1993). This division leads to the creation of an oppositional atmosphere between those in care and carers, while also meaning young people are less likely to report abuse when it occurs (Moore, McArthur, Roche, Death, & Tilbury, 2016). In the context of unaccompanied minors, a conflict of interest also emerges in attempts to both care for and control unaccompanied minors, with implications for internal power relations between unaccompanied minors and their carers. These tensions lead to shifting prerogatives “between a policy of pity and a politics of control” (Fassin, 2005, p. 366), with carer’s work existing in the dichotomy of a moral imperative to act and implicit and explicit practices of violence and containment (Ticktin, 2011).

Research further details how in environments where the work is difficult and the resources are short, corruption of care is more likely to occur. The lack of societal interest in care provision becomes evidenced in low material standards that in turn, legitimise compromised care standards and behaviour by staff (Wardhaugh & Wilding, 1993). Staff may have power over their clients, however, in other respects, they are powerless themselves (Wardhaugh & Wilding, 1993). This powerlessness is evidenced in their own entanglement in the policy affecting their practice (De Graeve, 2017). Furthermore, high staff turnover, low levels of staff satisfaction and alienation characteristic of this setting, can also make staff feel vulnerable and powerless. These competing notions of powerfulness and powerlessness can create a dangerous sense of ambivalence, which simultaneously contribute to a climate in which abuses of power can take place (Wardhaugh & Wilding, 1993).

These arguments go some way to explaining the environmental factors influencing low standards of child protection evident within Greece’s systems, and further speaks to how polarity in politics and practice can cause dilemmas in the link between migration and childcare (De Graeve, 2017). Unfortunately in emergencies, institutional care has also been shown to generate publicity and have a strong donor appeal, which can further reinforce its proliferation (Tolfree, 2003). The call for models of care more able to address care corruption characteristics is concurrently

levelled, with foster care and supported independent living discussed next due to their capacity to provide more individualised care and support.

Underdeveloped models in Greece: Family and supported independent living alternatives

Benefits of foster care as an appropriate alternative care response for unaccompanied minors include its capacity to provide increased support, security and safety (Newbigging & Thomas, 2011). Comparatively, SIL aids the development of independence skills for children and support older unaccompanied minors in their transition to adulthood (National Children's Bureau, 2006; UNHCR, 2018a). Despite these advantages, only small-scale examples of these models exist in Greece, and the charge has been left to NGOs to implement such alternative care. For example, local NGO METAdrasi⁸ launched a pilot for the temporary foster care of unaccompanied minors in 2015. The programme operates alongside the national foster care system. There is only one known foster care placement of an unaccompanied minor prior to this date (Fili & Xythali, 2017). SIL projects are also implemented by METAdrasi alongside UNHCR (METAdrasi, n.d.-b; UNHCR, 2018e). In further exploring the capacity of these models to meet unaccompanied minors rights, the background literature on their advantages and disadvantages is presented alongside findings on the local processes in place to protect children's rights.

Foster care

Foster care is the placement of a child by authorities into a domestic environment with an approved, qualified and supervised family (UN, 2010). Foster care may be short-term due to a temporary crisis, medium-term while processes such as family tracing are conducted, or long-term where required (Centre for Excellence for Looked After Children [CELCIS], 2012). Advantages of family-based care compatible with a best interests approach have been described to include stability, individual care and emotional support, alongside positive outcomes in terms of support and advocacy for

⁸ METAdrasi – Action for Migration and Development, is a Greek NGO focused on services not covered by the government or other NGOs. It operates in two key sectors: interpretation and child protection, and is the only organisation to have a presence in all entry and exit locations (METAdrasi, n.d.-a).

unaccompanied minors' rights (Sirriyeh, 2013). Kalverboer et al.'s (2017) study comparing unaccompanied minors' views on four different types of care available in the Netherlands, also found family-based solutions offer a source of strength and resilience. These findings are important in the context of unaccompanied minors, who have increased risks of mental health issues (Eide & Hjern, 2013). Evidence suggests reception in families can help compensate for losses experienced by unaccompanied minors by enabling a new and protective social support system (Kalverboer et al., 2017; Schippers et al., 2016). In relation to adolescents specifically, the importance of supportive, secure family membership and relationships is often overlooked (Schofield & Beek, 2009).

There are risks associated with foster care to consider, specifically, some studies point to increased vulnerability to abuse compared to the general population (Euser, Alink, Tharner, Van IJzendoorn, & Bakermans-Kranenburg, 2014; Hobbs, Hobbs & Wayne, 1999). In holding family-based care to its claimed advantages therefore, it is important to consider additional practices that can be employed in order to shape protective environments (Tolfree, 2003). Participation of unaccompanied minors and preparation of foster families, alongside ongoing monitoring and support, are vital programme components for ensuring minors' rights are upheld (Tolfree, 2003). On top of this, attention needs to be directed to safeguarding education and healthcare access, and minors' right to identity, freedom of beliefs and language (United Nations, 2010).

Processes for protecting rights

In exploring the processes for protecting children in foster care in Greece, research participants from METAdrasi described certain criteria for potential foster carers, including their age, their mental and physical capacity for minding children, their financial situation, and whether they have a clear criminal record. The way foster care procedures functioned was detailed as follows: foster carers are first screened by the NGO, including a meeting with a psychologist, and an assessment made as to if they are suitable for the programme. The relevant authorities are then informed to do their own independent social assessment. The minor's guardian conducts a best interests assessment, and in cases of long-term foster care, the social worker responsible for the

placement cooperates closely with the Public Prosecutor to make a plan. Monitoring continues after placement; minors meet with their guardian on a weekly basis. The guardian also helps facilitate contact with the biological family, and a social worker cooperates with the guardian and supervises the family. METAdrasi also received outside technical support from practitioners with established programming, partners whom corroborated they are operating well (Interview with outside expert, September 13, 2018). Despite these processes, two participants expressed concerns in terms of the quality of matching children and carers.

Challenges to foster carer recruitment

In exploring the challenges to appropriate matching, some interesting findings emerged. Foster care was described by multiple participants to be a precursor to adoption rather than an interim care measure (Independent Authority Representative 1; Lawyer 1; NGO Director 2). This finding raises challenges in recruiting appropriate foster carers for unaccompanied children, who may only require interim care while they wait for processes like family reunification. Those engaged in foster care programming also recognised the teenage demographic of unaccompanied minors arriving in Greece was incompatible with some foster parents' desires, which included closer age and gender matching to their own younger children. Finding families to take on siblings was described as another challenge, as was recruiting carers from similar backgrounds to unaccompanied minors. This recruitment is complicated by the stage of settlement such families may themselves be in and therefore, their capacity to take on such a responsibility. Outside Expert 1 also noted the challenges of finding appropriate families, with their own positioning being that families with a similar cultural or refugee background, and whom are integrated into society, were best positioned to look after unaccompanied minors' rights and needs.

Finally, complications in placement planning emerged given the potential disruptions associated with the unpredictability of family reunification. For example, placements are subject to lengthy and variable processing times: "a foster care [placement] we thought would last a few months, ended up lasting two years". This was described to translate into a need to recruit "families that are open" (Interview with Social Worker 1, August 16, 2018).

Supported independent living

SIL programing recognises that family-based care may not be appropriate for all children. For example, minors who have been living independently for some time prior to entering the care system may struggle in family-based arrangements (Kuligowska, 2015). Instead, SIL arrangements are settings where young people are accommodated in the community, live in small groups or alone, with some monitoring (UNHCR, 2014b). SIL programmes aim to provide a safe environment to build and develop practical independence skills (National Children's Bureau, 2006) and transition to adulthood in an integrated way (UNHCR, 2018a).

In looking to wider research on the suitability of SIL programmes, variables emerge which are due consideration. Some research has pointed to positive results in utilising the model. For example, a study evaluating an independent living programme for homeless and alienated young women reported the majority responded well to the model. A follow-up assessment after the women left the programme found most in stable living situations, in employment or schooling, and that they had abstained from risky behaviour such as substance abuse (Schram & Giovengo, 1991). However, when it comes to the model's application for unaccompanied minors, research has also suggested unaccompanied asylum seeking children living in SIL arrangements are more likely to report increased post traumatic stress disorder symptoms, comparative to those in foster care (Bronstein, Montgomery, & Dobrowolski, 2012). Tolfree (2003) adds that in situations where foster care is not the appropriate response for older children, they are still likely to need support and can benefit from connection with compassionate adults in the community.

Referral system for SIL

Referrals for SIL arrangements currently come from shelters rather than directly from hotspots or for children that are homeless. Social Worker 1 explained the rationale for this approach: only children with a best interests assessment from a guardian and the previous facility detailing the child's positive alignment with SIL could be accepted into the programme. Referral to SIL was considered as a reward for responsible behaviour due to what was described as improved living conditions. Child Protection Worker 2 further described how consideration is also given to factors including

gender, mental health and readiness for such an arrangement: “it’s really about working out on an individual basis, would this young person thrive in a less structured but supportive environment” (Interview, September 5, 2018). However, care workers have experienced a lack of referrals to SIL from shelters. Possible reasons for this varied from “what we’re seeing is that there is a certain amount of resistance. Now is that because people don’t trust supported independent living? I think probably” (Interview with Child Protection worker 2, September 5, 2018), to “it could be because children are comfortable and don’t want to leave the shelters” (Interview with Fieldworker 1, September 13, 2018). The fieldworker also leveled the locations of SIL apartments as outside Athens as a potential off-putting factor. As a result, the referral system is being reviewed to look at the possibility of allowing referrals directly from places like safe zones, according to Child Protection Worker 2.

Expanding the spectrum of care options

As described above, each alternative model of care presents strengths and weaknesses. In further looking to the rationale for expanding alternative care models, this section first compares and contrasts different models against their capacity to cater to the needs of unaccompanied minors. In exploring the expansion of alternative care, the role of culture is then considered alongside the value of supporting community care initiatives. Finally, the CRC’s best interests principle is returned to as the determinate when navigating care options.

Rationale for expansion

The rationale for expanding care options can be found in a comparison of each model’s strengths and weaknesses. In residential settings, studies point to an increased risk of abuse (e.g. Euser, et al., 2014; Green, 2001). Kalverboer et al. (2017) also found minors living in small group homes often missed support, stability and affectionate bonds, while minors in larger scale centres expressed feelings of loneliness and exclusion from society. Comparatively, guardians in the Netherlands and social workers in Germany have reported less incidences of psychological problems among children living in families compared to those living in other reception structures (Schippers et al., 2016). Strengthening calls for investment in the

foster care system is the potential for placements to be more cost effective comparative to residential care (de Ruijter de Wildt et al., 2015, p. 63; Giannarou, 2013, para. 13). As such, family-based care also holds the advantage it is comparatively more sustainable, with an additional benefit being a child may continue to have the family's support beyond the age of 18 (Schippers et al., 2016). That is not to say family-based care is appropriate for all children. Some adolescents may find living in small groups or alone preferable. In these instances however, evidence suggests these young people are likely to still need support, support that can be delivered through community-based, independent living initiatives (Tolfree, 2003).

As outlined above, there are some good child-centred justifications for shifting provision from institutional to family-based care. However, Sellick (1998) argues some countries now face a deficiency of suitable foster carers, as also described by Social Worker 1 (see foster care section above). This sentiment is echoed in Del Valle and Bravo's (2013) study comparing out-of-home care in 16 countries where a repeated theme in their review was the need to house unaccompanied asylum seekers. Del Valle and Bravo (2013) also argue a significant function of residential care was to cater to adolescents with diverse issues largely incompatible with foster care. These sentiments are also accounted for in the UN (2010) Guidelines for the Alternative Care of Children, which states how the use of residential care should be restricted to cases where it is "specifically appropriate, necessary or constructive" for the child involved (p.5). In assessing the ability of care models to meet children's rights therefore, high-quality and small scale residential arguably still has a place on the spectrum of care choices, for use in certain circumstances (see Inter-agency Group on Unaccompanied and Separated Children, 2013). In these instances, residential care needs to have clear and enforced admission criteria; programmes should work towards specific and time-limiting objectives; and the model should be integrated with other services such as family tracing to ensure children move on promptly (Tolfree, 2003).

Findings presented earlier in this chapter also align with the above position. Shelters were described by research participants as having a litany of rights risks, while also being critiqued for their lack of capacity to provide individualised care and support. The institutionalising nature of some residential care shelters was described as reason

enough to explore other options. In shifting towards these other models, participants detailed some strong processes for ensuring suitable placements. However, the lack of effective external monitoring systems to ensure appropriate safeguards are in place is again relevant. In furthering these options, there are also additional considerations to take into account, including the importance of culture in care provision.

Considering culture in care

Providing appropriate alternative care for children cannot be achieved without consideration of cultural and religious factors. These factors are due relevant consideration in-line with the CRC's principles (Assim & Sloth-Nielsen, 2014). Alternative care should be identified that “promotes the child’s full and harmonious development” (United Nations, 2010, p.2). Consequently, it is useful to also consider how child development trajectories are highly normative (Watters, 2008), and may be orientated from a Western perspective (Rose, 1998). This point raises two areas for awareness in seeking care solutions for unaccompanied minors. Firstly there is a need to account for the diversity of child rearing practices and to consider how these practices affect notions of meeting rights (Watters, 2008); and secondly, to acknowledge how such constructs are then intertwined with the policy affecting unaccompanied minors, for example in relation to age (e.g. Derluyn & Broekaert, 2008). A potential deficiency in developmental approaches embedded in universalising Western development norms and values emerges, given diverse cultures are judged on this trajectory (Watters, 2008).

With high levels of forced migration from the Middle East into Europe (as described in Chapter 3), the Islamic tradition of child guardianship, kafala, deserves heightened attention. Awareness of its principles can help avoid cross-cultural miscommunications and potentially violate religious tenets (Rotabi et al., 2017). kafala is the provision of alternative care without changing the original kinship status of the child (Assim & Sloth-Nielsen, 2014). Islamic beliefs emphasise the need to preserve family origin ties and where possible, preserve the family name, origin and inheritance rights (Rotabi et al., 2017). It is comparable to foster and kinship care in the transfer of some, but not all, of a parent’s responsibilities and rights (Assim & Sloth-Nielsen, 2014), and is positioned at odds with adoption as kafala does not allow

for the formal and permanent relegation of parental rights to a family that is not the child's own (Better Care Network, n.d.-b). In consideration of children's right to preserve their identity (Article 8), and freedom of religion (Article 14), alongside the due regard to be paid to a child's ethnic, religious, cultural and religious background in their care placement (Article 20) (UN, 1989), adequate training of carers, including foster parents, on the obligations of kafala can help them respond to specific groups of unaccompanied minors' needs (Rotabi et al., 2017).

In research, kafala was not specifically mentioned, but some aligned processes were described including one shelter's efforts to facilitate communication with unaccompanied minors' parents and try include them in care planning, as described earlier in this chapter. The local interpretation of foster care as a pathway to adoption (described above) is also relevant given kafala's ill-alignment with adoption (Better Care Network, n.d.-b). A concurrent need for wider awareness of foster care as an interim care measure is therefore raised.

Supporting informal care arrangements

In looking further at issues of continuity of care, the informal aspects of care are due consideration. Kinship care, which can be either formal or informal, varies from foster care in that the child is placed with extended family members or a person the child is familiar with (UN, 2010). Community-based care initiatives build on this definition to also include placement in an alternative family, ideally within the child's community (Tolfree, 2003). Previous research suggests significant numbers of unaccompanied minors are in informal kinship care arrangements, and are consequently invisible to services (Newbigging & Thomas, 2011). UNHCR (1994) also concludes many unaccompanied children are cared for spontaneously by the community in informal foster arrangements.

The CRC advocates for continuity in care in relation to a child's background (UN, 1989), with kinship care offering potential advantages in this regard (Testa & Rolock, 1999). Kinship care has been found to provide greater stability, proximity to a child's community of origin, and increased likelihood of sibling placements (Testa & Rolock, 1999). However, studies have also pointed to additional vulnerabilities of kinship

caregivers based on socio-economic status, availability of resources and physical and mental health (Xu & Bright, 2018). Consequently, an obligation emerges to identify children in informal arrangements, so both the needs of the unaccompanied minor and their informal foster family can also be identified (UNHCR, 1994).

In working to protect children in informal arrangements, the UN's (2010) Guidelines for the Alternative Care of Children stipulates the state is responsible for the development of coordinated policies regarding formal and informal care. In ensuring the protection of children in informal arrangements, the state should enlist measures to optimise informal care provision. These measures include mechanisms for identifying and supporting informal carers, and systems to protect children in informal care from abuse and neglect. In Greece however, informal care remains challenging and studies have uncovered instances of forceful separation of children from extended family members, under the guise of protection (Fili & Xythali, 2017).

Returning to the best interests principle

Many different opinions exist on the best care options for unaccompanied minors, with variances in approach and opinion also highlighting the importance of providing tailored care (Ní Raghallaigh, 2013). The most fitting care option can depend on individual circumstances, and therefore requires individual assessment to reach the most appropriate decision (Schippers et al., 2016). As outlined in Chapter 2, this approach is also advocated for by the best interests principle of the CRC (UN, 1989). A best interests determination [BID] is required in decisions pertaining to a child's care to ensure a durable solution is identified that takes into account the opinion of the child and involves decision makers with relevant expertise (see Chapter 2). In identifying a durable or temporary care solution for unaccompanied minors, some clear advantages have been described in relation to alternative models such as SIL and foster care throughout this chapter.

Conclusion

The rationale for expanding care options has been presented in this chapter. Critiques of residential care are centred on the model's capacity to cater for young people's

needs and rights due to its institutionalising characteristics. Comparatively, family-based alternatives can offer increased protections through the creation of supportive relationships and SIL can help aid young people in their transition to adulthood. Nevertheless, residential care can still have a place on the spectrum of care options for use in certain circumstances, and within strict parameters. However, its positioning in Greece as the first and dominant response, rather than the last one, is problematic for ensuring a best interests response. Risks within this model are compounded given the disparate nature of care provision and weak child protection system in Greece. These surrounding influences begin to speak to how access to quality care is inextricable from wider political, societal and individual processes, with these elements explored more in depth in the following chapter.

CHAPTER 6: THE SOCIAL AND POLITICAL PROCESSES AFFECTING CARE PROVISION

Introduction

Securitisation policies permeate the care landscape through the creation of urgent child protection needs. This chapter details findings from this research on how these factors have shaped direct care provision. In particular, the Chapter explores how shortcomings in state capacity can, and arguably has, led to a context where NGOs seek to fill gaps, maintain their relevance and compete for limited resources. This reliance on NGOs to provide care has contributed to a care landscape of competing mandates and approaches, with the underlying processes, pressures and practices presented in this chapter.

In exploring these processes, this chapter first details findings on constructions on childhood, as implicit in participant interviews, and the flow on effects of these perceptions. Speaking to evidence presented in Chapter 2, constructs of childhood and vulnerability are shown to be influential as to how care is provided, and to whom. Building on assumptions of childhood, the underlying logics associated with different models of care are then presented with distinctions emerging around the prerogative to protect or empower young people. In shifting to explore the wider complexities of the local care landscape, the direct impact of migration policy on care provision is then detailed. Finally, this chapter concludes with examples of positive practices and possible ways forward as identified by participants.

Constructions of rights and childhood

In the course of the research, unaccompanied minors shared their own perceptions of what constitutes rights. One young person noted the importance of “freedom, to be safe, to have a home” (Online interview with Unaccompanied Minor 2, October 10, 2018), another urged for respect of the rights of others and also felt care providers needed “to create an environment to live like a family” (Online interview with

Unaccompanied Minor 1, October 9, 2018). Finally, another levelled the right to live with their family and the need for quality education (Online interview with Unaccompanied Minor 3, October 25, 2018). These statements build on the importance of balancing protection with agency as described in Chapter 2, and detail the desire for safe and supportive living environments that respect the importance of family ties and all children's rights. These rights are presented against the perceptions of those providing care below, within which divisions as to what constitutes protection or empowerment emerge.

Protection or empowerment

Understandings of childhood were inadvertently threaded throughout participants' perceptions of different alternative care models. Constructions of childhood were related to a need to control, or a need to afford more freedoms. For example, Informal Care Worker 1 and Psychologist 1 each discussed how some young people struggle to adjust to strict rules and structures in shelters after the experience of looking after themselves. It was felt the shelter system "doesn't fit with their age" (Interview with Psychologist 1, August 29, 2018). A case example by Fieldworker 1 appears to corroborate this perception: a previously homeless minor struggled to adapt to the shelter situation, as he "didn't want to be coddled". The fieldworker explained that after spending so much time out of a strict structure and living independently, coming into a shelter "where you have strict rules, you have a curfew, you're supposed to be a child again, it's quite a difficult thing to do". This example shows the disempowering consequence of protection in some instances, a factor that can push some to leave formal care situations. Rather, it was felt by others there is a need to "give them the protections without exchanging it with their freedom" (Interview with Informal Worker 1, September 11, 2018), and that shelters were "not freedom" but something to be endured "because I have no other choice" (Interview with Former Unaccompanied Minor 1, September 6, 2018). These statements reveal how ideas of protection intersect with unaccompanied minors' prioritisation of freedom.

Looking to the underlying processes in constructions of protection, a tendency to victimise and over-analyse children was described. The highly professionalised environment was said to have overbearing effects, with the inclination of some care

workers to “pathologise every child”, alongside feelings there are “a lot of motherly instincts going on” (Interview with Child Protection Worker 2, September 5, 2018). Vulnerability as pathology arguably undermines the recognition that vulnerability is located in the circumstance, rather than the person (see Chapter 3), as well as the need to recognise children’s agency (see Chapter 2). Instead, these perceptions speak to Lawyer 2’s perspective that unaccompanied minors are “always treated like people that should be only a child in order to have a better opportunity” and “helpless victims that we can save” (Interview, September 14, 2018). Amidst what appears to be a disempowering care environment, there were calls to shift to better acknowledge unaccompanied minors as “active political subjects” (Interview with Lawyer 2, September 16, 2018). Child Protection Worker 2 advocated for a “move towards empowering the young people rather than caring for them” (Interview, August 5, 2018). These statements consequently seek to acknowledge young people’s agency, as well as challenge dominant narratives of vulnerable populations (see also Chapter 3).

Age and vulnerability

Intersecting with ideas of protection is age and vulnerability. The age of minors were linked to “an overwhelming compassion fatigue” of donors by Child Protection Worker 2. The participant further described an assumption exists that teenagers need less support: “I have people say to me in meetings, why do you want us to babysit young adults, all they need is a take away pizza and a TV and they are happy” (Interview, September 5, 2018). However, there are arguably high risks associated with this demographic also, with unaccompanied minors “in the very most vulnerable age range in terms of the very worst forms of exploitation, violence and abuse”. Furthermore, adolescence does not automatically “make you somehow safer or more resilient” (Interview with Child Protection Worker 2, September 5, 2018). An impression that adolescents challenge notions of vulnerability emerges in these statements, with such notions juxtaposed against the unique age identity⁹ of unaccompanied minors described by other participants from migratory backgrounds.

⁹ Age identity is the subjective evaluation of age based on historical and individual experiences (Kaufman & Elder, 2002).

In illustrating these unique age identities, Former Unaccompanied Minor 1 questioned the categorisation of age as physiologically constructed when it does not account for variances in development and maturity. Another participant described how the experience of migration can mean “maybe you are 16, 17, but in certain things, you are more than 25” (Interview with Informal Care worker, September 11, 2018). Intrinsic in these perceptions is the need to understand the special needs of unaccompanied minors and see them neither as an adult on account of the strength demonstrated in their journey, or vulnerable based on their age: they can be both in different parts of their lives. The relevance of age constructs is linked to views of how different models are able to meet rights.

Competing agendas and underlying logics associated with care models

A key question in this research was about the care model best able to meet the rights of unaccompanied minors in respondents’ interpretations of the CRC. Of the 16 responses to this question, the majority saw alternatives such as family-based solutions and SIL as the most appropriate options. Four respondents selected foster care, three SIL and three a combination of both. Just two respondents saw shelters as the best option, while four described a need to focus on other elements associated with rights rather than the model itself. The need to have different care options available was also noted by several participants. The different perceptions and consequential prioritisation of care models is especially pertinent in the Greek context where NGOs play a strong role in shaping care provision (see Chapter 4).

The right to family

Advantages of foster care described by participants included the model’s ability to provide higher standards of care more aligned with children’s rights. For example, the model was described as “the best one because children are entitled to a family, and the family environment is always more protective, and helps the children also to integrate easier” (Interview with Child Protection worker 1, August 16, 2018). Others believed that “each child has to grow up in a family environment” (Interview with NGO Director 2, September 5, 2018). In moving towards wider implementation of

family-based care, the need for foster care to be embedded within an effective framework was highlighted as a caveat to its appropriateness. For example, foster care was positioned as “always an appropriate option, if you safeguard the procedure and evaluate properly the foster family” (Interview with Independent Authority Representative 1, September 3, 2018). Consequently, an openness to foster care was leveled with fears as to how it may be implemented given the underdeveloped system.

Supported independent living

For proponents of supported independent living [SIL], the potential appropriateness of the model for teenagers was highlighted alongside the predominance of adolescent males: “with teenagers, this is the best one” (Interview with Social Worker 2, August 29, 2018). SIL’s positioning as a “very nice initiative” was further described in-line with 16 to 18-year-olds having unique needs: “they don’t need to go into a facility that provides them with bedding, food, and a social worker and a psychologist, and that’s it. They need to learn independent living skills to know how to take care of themselves” (Interview with Programme Manager 1, August 16, 2018). It was also felt SIL could help support integration, considering one of the main problems with unaccompanied minors is “they are not properly adjusted in the Greek society, and they feel weak, they are not properly encouraged” (Interview with Independent Authority representative 1, September 3, 2018). SIL from this perspective has some potentially empowering effects, which participants often described alongside the disempowering consequences of the current shelter system.

Criticisms of the SIL again link to ideas of protection, with a perception the model is a devolution of responsibilities since the child is not able to access 24/7 care. The appropriateness of the model was questioned in relation to unaccompanied minors’ age and experiences, leading one to conclude they’re “not too sure it’s okay to put them in an apartment” in a situation where “you don’t have any duty” (Interview with Social Worker 3, August 29, 2018). According to Child Protection Worker 2, these arguments were evident in working group discussions on SIL, where some care actors reportedly argued the model “further exposes children to harm, exploitation, abuse” due to feelings “the only safe way to care for an unaccompanied child is in a shelter with 24/7 supervision” (Interview, September 5, 2018). Addressing these arguments,

this participant instead felt the gradual empowerment of a young person does not increase risks, but decreases them, as SIL offered an opportunity to give more individualised support to mitigate risks like absconding.

Local support for residential care

The argument against SIL also speaks to care worker's arguments for residential care. Around-the-clock care was positioned as a protective factor against the decreased access to support workers in SIL, something perceived to help young people feel "that they are in a safe place" (Interview with Social Worker 3, August 29, 2018). Another described how "if all kids could be in shelters that would be the ideal", but called for greater consideration to grouping children who are settling in Greece and those who are leaving because as it was felt they required different support (Interview with Fieldworker 1, September 13, 2018).

Demonstrating how residential care permeates locally, two participants referred to a case study of a children's institution burning down in recent fires in the Attica region¹⁰ as evidence of cultural assumptions about residential care. For example, it was described "the attitude is that we have to raise money in order to fix the building", when instead "all the children should be in foster care" (Interview with Independent Authority representative 2, September 3, 2018). The lack of oversight was also questioned in relation to the children's interim care arrangements: "Where did the children go? The Ministry did not have the right to ask". The absence of public oversight again emerges as a compounding safeguarding concern.

A local orientation towards residential care was further demonstrated in the funding directed towards increasing shelter spaces. Commenting on plans to increase shelter capacity, Child Protection Worker 2 felt while they are personally "not a proponent of institutional care", and felt it was not the best option for young people, they acknowledged it was the main model in Greece (Interview, September 5, 2018). This perception outlines the status quo in provision of care for unaccompanied minors, with continuing investment in institutional care resulting from the model's local

¹⁰ Deadly wildfires swept through Attica region around Athens in July 2018 (BBC news, 2018). An Orthodox residential care institution was also burnt down in the fires (Kokkinidis, 2018).

dominance. Furthermore, the financial crisis and desire for job security was tabled as a possible factor influencing resistance to a change in model by Child Protection Worker 2, something which begins to speak to the way in which policy can shape care in multiple ways.

Policy, practice and care provision

The susceptibility of care to politics was highlighted by participants who noted the entanglement of migration policies and care practices, pertinently summarised in the following quote: “the problem, whether we like it or not, is political. It's political from its roots to the very conditions of everyday life and on the field” (Interview with Independent Authority representative 1, September 3, 2018). The politics of care are further detailed in this section, including migration policies’ direct effect on care provision in the compromises taken to move forward care in a constricting environment. Findings on rights violations in reception and the effects of a lack of capacity are presented. Restrictive policy is seen to both push unaccompanied minors away from the care system, and pave the way for further exclusion. Evidence of discriminatory practice is also presented.

Rights violations in reception systems

Rights violations and risks were described to permeate reception facilities and approaches, with the use of detention deplored by participants. The experience of being held in detention caused one young person to feel he was “unable to speak about me and about my rights” (Interview with Unaccompanied Minor 1, September 10, 2018), with a sense of powerlessness emerging from his containment. NGO workers further denounced detention as “traumatic” (Interview with an Independent Authority representative 1, September 3, 2018), “brutal” (Interview with Child protection worker 2, September 5, 2018) and as “the worst thing that could happen to you” (Interview with Informal care Worker 1, September 11, 2018). Inappropriate treatment in detention was recalled by Programme Manager 1 who saw “children with handcuffs...and be treated like they were detainees” (Interview, August 16, 2018). A lack of information also contributed to the creation of a confusing situation for minors. For example, Child Protection Worker 2 described a “young girl maybe fifteen, sixteen, in tears because she didn’t understand why she was detained”

(Interview, September 5, 2018). Research corroborated children may spend extended periods of time in detention, for example Unaccompanied Minor 1 described being held in detention for three and a half months, and Lawyer 2 had seen cases where young people were held for five to seven months.

Revealing both detention's impact on mental health and the lack of capacity to respond to psychological needs, Independent Authority Representative 1 detailed how some children experienced serious mental and psychological problems in detention, some acting violently. Comparatively and perhaps cyclically, Child Protection Worker 2 outlined that if children's mental health or psychiatric conditions led to any symptoms of violence, they may end up in police cells given a lack of capacity for specialised care. These anecdotes show detention's firm positioning outside of the realms of a child's best interests.

When it came to so-called safe zones (see Chapter 4), a constricting environment and a lack of protections was further evidenced. In Moria refugee camp, on the hotspot island of Lesbos, Programme Manager 2 described how minors were locked up in two different sections, accessible through three different fences and guarded by police officers. Boys and girls were housed together. The Independent Authority also inspected the Moria hotspot in October 2018, finding that "the conditions of living in the hotspot of Moria are inappropriate and we believe that multiple violations of children's rights occur there" (Interview, October 18, 2018). The reception system is further proven to be incapable of responding to children's needs, strengthening arguments for investment into alternative care models better able to meet unaccompanied minors' rights.

Policy as a push factor away from care

Migration policies were seen by some research participants as influential in how young people interacted with the care system. For example, NGO Director 1 revealed how fears of returns to first port of entry under the Dublin Regulation (see also Chapter 4) had led people, including unaccompanied minors, to avoid authorities in order to be able to realise their plans. The use of mechanisms such as detention was seen to further complicate care accessibility, for example Fieldworker 1 described

how mentions of police and custody can “scare people” into not wanting to engage in the system (Interview, September 7, 2018). These push factors are significant given young people may be pushed to dangerous situations: fears of registration had led unaccompanied minors into “the hands of traffickers or in abandoned houses” (Interview with NGO director 1, August 27, 2018), and consequently away from the formal care system.

Further pushing unaccompanied minors away from the care system are slow processing times for family reunification. Programme Manager 1 detailed how the time needed to complete reunification procedures had increased from six months to more than one and a half years over a short period of time. Three NGO workers also outlined how these delays can lead young people to bypass the system and take irregular migratory paths. Fieldworker 1 had experienced reunification cases taking up to two years, and seen children give up before they receive the final decision, as evident in the following case:

We had one boy that we were working with quite closely and he actually absconded right before he got a positive decision. He had been waiting I think 18 months, and he had had several rejections, and he had just kind of given up hope (Interview, September 7, 2018).

Delays in reunification are a significant consideration for care workers given the flow on effect on wellbeing, as detailed above. Family reunification was also a focal point for unaccompanied minors I met during fieldwork, who regularly turned conversations to be about their parents. Despite the CRC stipulating entitlements to swift family reunification processes (UN, 1989, Article 10), Lawyer 2 described seeing increases in the number of rejections, and procedures becoming increasingly difficult. These barriers are important given a focus on care should start with the viability of reintegration with family, as described by Programme Manager 2: “Every child should be raised by its family, not by shelters, not by an NGO... the European countries, they’re doing their best to delay the process (Interview, August 24, 2018). This quote shows family cannot be replaced, and in cases where a child is awaiting reunification, to delay the process and keep them in care is a gross misuse of power.

Paving the way for further exclusion

Raising further issues related to the use of power, the securitisation over humanitarian approach to migration was seen to influence societal divisions. The surrounding rhetoric used to justify restrictive policy was also seen as detrimental to the care situation of unaccompanied minors, as Lawyer 2 explained:

We fear the EU-Turkey deal has opened the road for more exclusionary policies, against the refugees, against the unaccompanied minors, and giving emphasis on detention centres, giving emphasis on their own rhetoric, which is not centred around rights, but around xenophobia (Interview, September 16, 2018).

The EU-Turkey deal was said to have the potential to normalise exclusionary policies and rhetoric, and decentralise rights. Furthermore, both Fieldworker 1 and Informal Care worker 1 correlated a shift from a more welcoming approach to asylum seekers in island locations to an increasingly hostile one with the worsening conditions and therefore increased incidences of problems at camp locations. The situation is described as being capitalised on by right-wing and anti-immigration proponents, with the informal care worker saying the social change is “creating hate among the people” and is “a gift to the far right” (Interview with Informal Care Worker 1, September 11, 2018). The effects of policies of containment are demonstrated here to have the capacity to cyclically reinforce anti-immigration sentiment.

Unequal access to care

Divisive attitudes were also seen to characterise access to the care systems, with constructions of ‘deservingness’ permeating through ideas of what constitutes an authentic asylum claim. Three participants discussed how children’s country of origin could affect their asylum claims. The state was said to “build their policies and treatment of people as to where they are coming from” (Interview with Informal Care Worker, September 11, 2018). Despite the CRC calling for the care of all children without discrimination, Lawyer 2 described how children from countries like Pakistan and Bangladesh faced large barriers to accessing care. Many of the claims of such

minors were reportedly rejected under the interpretation they were economic refugees, despite evidence being presented they were escaping rights abuses in their origin countries. Rejections were further described to increase such children's vulnerability due to a lack of legal status, rendering them also unable to access care and connected services like education. To address this issue, a plan is being developed to create a humanitarian status permit to allow children denied international protection to stay until they meet the age of the majority, according to Independent Authority Representative 1.

Troubling practices in relation to contentious age assessments were also revealed. Lawyer 1 noted the prevalence of police not following due processes: "Police are doing whatever they want, and most of the time, particularly in the islands, the result is always the person's above 18, like 98% [of the time]" (Interview, August 23, 2018). Another participant involved in representing unaccompanied minors' rights described being approached by unaccompanied minors as young as 12-years-old, with papers saying they were 18. The participant felt authorities wanted to record the children as adults in order "to not have responsibility for minors and leave them free on the street" (Interview with NGO Director 1, August 27, 2018). In this example, inaccurate recording was used to relinquish the task of finding unaccompanied minors somewhere safe to stay. Comparatively, Programme Manager 2 noted there were cases of older people claiming to be unaccompanied minors in dedicated areas for children in camps, revealing further safeguarding risks. Challenging inaccurate age assessments was also seen as complicated. For example, Lawyer 2 described how even in cases where a birth certificate was provided to challenge the recorded age of a child, the birth date was not changed. For those without any documentation, it was much worse:

The age assessment is not based on a procedure that really respects children's rights but based on what the police thinks about their age...There are children, for example, in detention centres together with adults when they are really unaccompanied minors. We take in some cases like that. (Interview, September 14, 2018).

The quote above shows how not only is the age assessment procedure ill-aligned with children's rights, but it can ultimately serve to further strip them of protections they should be afforded under the CRC by placing them in vastly inappropriate living conditions. The Independent Authority is also intervening in a recently identified problem whereby camp administrators do not accept age assessments completed by the Ministry of Health's KEELPNO (Hellenic Center for Disease Control and Prevention)¹¹ team, particularly in cases where FRONTEX¹² has recorded the children as adults on arrival, and is sending children back to hospitals for examination. These additional examinations have led to a backlog of cases on the islands, with unaccompanied minors left living under poor conditions as a result.

Compromises to meet capacity needs

NGO workers described pressure to respond to urgent and immediate care requirements was leading to a backslide in standards. Shelter spaces were increased from 300 to 1000 over a short period of time, an achievement that helped get children "out of detention, off the streets", but further embedded a residential care response (Interview with Child Protection Worker 2, September 5, 2018). Safe zones were seen by the same worker to no longer be talked about as an interim care measure, with a situation developed whereby children were spending up to a year, sometimes more, in these sites.

These factors have led some care workers to feel conflicted in the compromises taken to move care forward. There was a sense care workers were "forced to fire fight" with concerns emerging as to "where we go to next as an interim solution, especially as funds decrease and it becomes more and more complex to put in place quality interim solutions" (Interview with Child Protection Worker 2, September 5 2018). The focus on these interim solutions was further described by Child Protection Worker 1 as diverting attention from expanding the spectrum of care options: "It would be better if we were discussing about family-based care and independent living before 2015...now we have to split our energy and work on different things when the

¹¹ KEELPNO is a private-law entity funded and supervised by the Ministry of Health, whose focus is on protecting and promoting public health (World Health Organisation, 2015)

¹² The European Border and Coast Guard Agency

needs of the children are huge at the moment” (Interview, August 16, 2018). The tensions between immediate needs and longer-term solutions such as family-based care and SIL are evident in this quote, with the crisis level of operation serving to restrict capacity to invest in expanding these services.

Relationships and responsibilities: Funding, cooperation and competition between care workers

The lack of a standardised approach to delivering care in Greece has also led to a lack of clear responsibilities, compartmentalized approaches, competition for funds, shortcomings in collaboration, and a lack of mandate for furthering desired or required changes. Competing agendas, conceptions of what care should look like, and the impact of the financial crisis also emerged as key issues. This section presents findings on the impact of the delegation of the state’s care responsibilities to NGOs, and how this has shaped relationships and responsibilities between care actors.

Delegation of state responsibilities and lack of mandate

The delegation of state responsibilities (see Chapter 5) has led to shifting dynamics and tensions between Greek authorities and NGOs. NGO Director 2 identified the biggest gap in care provision as the lack of collaboration between civil society and the state, citing disagreement between NGO and government officials in recent times as creating an uncooperative climate. Evidencing tensions, Informal Care Worker 1 argued if informal settlements can provide better standards of care than the state with far fewer resources, then the inadequacies that permeate the reception system are a problem of political will: “If you don’t do it, it does not mean that you don’t have the possibility, but you choose to not do it” (Interview, September 11, 2018). Social Worker 2 and Programme Manager 2 also reflected on the lack of political will to further care provision, with Informal Care Worker 1 additionally feeling “Greece is not Greece’s”, but rather is susceptible to wider regional influences (Interview with Informal Worker 1, September 11, 2018).

The resumption of some responsibilities by the state has contributed to the creation of a complicated care landscape for navigating responsibilities. For example, Child

Protection Worker 2 was waiting on clarity of next steps from officials: “if it was just clear to me that it was our responsibility, then we just go” (Interview, September 5, 2018). In corresponding these facets to expanding care options, the child protection worker described how the transition period has led to questions as to whether it is helpful to have humanitarian funding flow into alternative care programming or wait for the government to be able implement it under their own financial plans.

Competition and collaboration between NGOs

The importance of collaboration and the prevalence of competition emerged as key themes throughout interviews. Tensions between NGOs were heightened during the 2015 migration peak. The situation was described as a chaotic, with Programme Manager 2 outlining how INGOs “couldn’t understand at the beginning that they had to be in direct communication with the government...that they couldn’t act independently”. Questions of how effectively funds were being used also emerged in relation to INGOs: “If they get money from European Union, do they use them right? Or do they make them just salaries? (Interview with Programme Manager 2, August 24, 2018). Programme manager 2 felt some INGOs did direct funding into salaries, with these organisations then choosing implementing partners to the result of “many kinds of problems” in relation to service quality and effectiveness. This perspective outlines both the lack of transparency and accountability inherent in the system, and questions the effectiveness of the trickle down of funds to local NGOs.

Issues of collaboration are compounded by new NGOs being “started all the time so having an up to date registry is a challenge” (Interview with Lawyer 2, September 14, 2018) and feelings there “isn’t a real incentive for NGOs to properly work on things together” (Interview with Fieldworker 1, September 7, 2018). With little oversight and monitoring, Independent Authority Representative 1 described how it was not surprising competition had emerged between NGOs: “they are competitive to one another because of their funding and their ambitions and their willingness to ensure their survival” (Interview, September 3, 2018). These factors were seen by the representative as contributing to a weak culture of advocacy between NGOs due to competition for the same resources.

Issues of funding and competition are also tied to the prioritisation and destabilisation of different models of care. For example, NGO Director 2 noted the larger funding resources and philanthropic support for residential care against a lack of funding for deinstitutionalisation. This participant further described how “money is power” and in order to combat these larger funding budgets, partnership with the public sector is required. Comparatively, two organisations commented they would be interested in supporting SIL if they had the resources available. A reliance on short-term funding also adds to instability for unaccompanied minors. For example, Informal Care Worker 1 described how the closure of some shelters led to the return of unaccompanied minors to their previous temporary accommodation. The effects of funding are ultimately for unaccompanied minors to bear, with the participant aptly asking, “why should they trust you again?” in response to children being subjected to such instability (Interview, September 11, 2018).

In moving forward collaboration, NGOs in Greece do have regular child protection meetings, which are described as information sharing events. Participants also described preferred partners they had good functioning relationships with. While there are clear challenges in collaboration, this does not mean there is not positive examples of coordination, or acknowledgement of its importance. Increasing collaboration therefore emerges as an opportunity, with further areas for moving care forward identified by participants in the following section.

Moving care forward: Opportunities identified

Greece has a wealth of technical expertise, as one child protection expert explained: “I’ve never worked in a refugee context, with so many child psychologists, so many social workers, so many specialised lawyers. It’s an extraordinarily professionalised environment in so many ways” (Interview with Child Protection worker 2, September 5, 2018). This statement offers a hopeful counter-perception to issues of appropriately trained staff, and shows the high-levels of capacity, which can be built on. In capitalising on this expertise to bring care forward, several areas of focus were identified by participants.

Building capacity in the care sector and community

A current gap exists in community education initiatives around refugee issues. Programme Manager 2 made calls for more locally distributed information on “what it means to be refugee, what it means that our country has to host families and unaccompanied minors, what it means to become a foster parent” (Interview, August 24, 2018). Two organisations are working to address gaps in community education, including through information evenings on foster care. NGO Director 2 described how seminars for foster carers aimed at helping families understand “how they can help the child” through delivering information on things like attachment theory. This participant further described how “our social services are not trained in foster care, because for lots and lots of years, it was in the backstage”, concurrently evidencing training needs at the state level (Interview, September 4, 2018).

In order to adequately support young people in care in Greece, the need for integration emerged as a repeated theme across interviews. For example, NGO Director 1 explained: “Protection should be together with a plan for integration, otherwise again [they] will end up on the street” (Interview, August 27, 2018). Suggested areas by participants to aid integration included greater connection with Greek peers, increased participation, and a focus on enhancing life prospects to steer minors away from flirting with criminality.

In further building a system for addressing the needs of young people, another step identified was an exploration of the kind of informal support structures that already exist for children on the move, and what challenges and opportunities exist. Child Protection Worker 2 outlined the need for such mapping alongside their experience that sometimes children prefer to stay in safe zones over moving to a shelter “because they were closer to their community” (Interview, September 5, 2018). Informal Care Worker 1 also described unaccompanied minors approaching the shelter due to the desire to be connected to a community. These anecdotes highlight the importance of considering unaccompanied minors’ views and needs in care planning.

Prioritising participation

A cornerstone of the CRC is the right to be heard, however, three participants described a lack of integration of children's voices in planning. Variability in tactics to integrate children's voices emerged in interviews, with responses ranging from informal cues to a need to recognise children's views in every care decision. It was also felt that children were not adequately informed of their rights (NGO Director 1; Lawyer 2; Community Group Representative 1), a precondition for meaningful participation (UNHCR & UNICEF, 2014). The lack of effective care provision can also compromise participation; it can be hard for young people to have the patience to understand such a bureaucratic system when "they ask all the time for shelter and the official answer is we can't do anything" (Interview with Lawyer 2, September 14, 2018). A lack of capacity in the care system is shown to undermine participation.

Alongside shortcomings was recognition by multiple care actors (Lawyer 1, NGO Director 1, Former Unaccompanied Minor 1), of the importance of hearing children's voices. Lawyer 1 positively reflected on how the new laws regarding foster care also held provisions for asking about children's views. In looking at additional tools to protect children's rights and ensure their voices were heard, Outside Expert 1 detailed their 'Trusted Junior' approach. The approach facilitates links between children from refugee backgrounds to speak with newly arrived minors. The 'trusted junior' is able to explain the guardianship system to the new young person, and help identify issues regarding their relationship with their guardian. The relationship therefore acts as a safeguarding measure.

Time and space for building trust

Participants gave weight to the importance of generating trust with unaccompanied minors in order to conduct correct screening of the children and represent their interests. Child Protection Worker 1 described the need to spend time building trust in an appropriate space so young people are able to "release all the information on and all the issues that are related to their case" (Interview with Child Protection Worker 1, August 16, 2018). Cross-cultural competency emerged as an associated factor, with Outside Expert 1 explaining some children may have had different experiences on

when they can and should express their views. This need is juxtaposed against the effects of under-resourcing described by Social Worker 2, who felt some shelter centres did not have the capacity to build relationships with the children in their care and that a lack of continuity in care can also hinder trust. Legal representatives further outlined some of the complexities of building trust, given the asylum application duration, and that some minors had been taken advantage of.

Conclusion

Providing care that both protects young people's interests and respects their agency begins with the acknowledgement of their unique age identities, experiences and consequently distinct needs. Participants demonstrated commitment to the welfare of unaccompanied minors. However, different ideas emerged of what this commitment could look like emerged when considering ideas of vulnerabilities, childhood, protection and empowerment. In addressing these divergences, a shift towards understanding young people as active participants over passive victims is required alongside investment into building trust and increasing participation.

Further complicating care provision, participants demonstrated how the exercise of rights is subject to both internal and external policies and power dynamics, shifting prerogatives, and social processes. These findings show that policies of securitisation and deterrence have served to weaken children's rights through a focus of control over care. A conflicting position for care workers emerged in the need to address immediate and long-term care needs over investing in strengthening systems.

Issues of resourcing have contributed to both creating competition and undermining collaboration. Together with an influx of NGO workers at the height of migration in 2015, came questions as to how effectively funds were being spent, the level of expertise of certain actors and therefore the quality of care available to unaccompanied minors. Steps to forward collaboration are evident, but the overarching gap continues to be a need for external monitoring and sector-wide commitment to standards of care.

CHAPTER 7: A DISCUSSION ON THE DYNAMICS OF CARE PROVISION

Introduction

The Convention on the Rights of the Child [CRC] captures a common ambition around improving children's wellbeing and place in society (Hanson, Poretti, & Darbellay, 2014). As discussed in Chapter 2, the CRC's focus on durable solutions sets the standard for protection of refugee children in an otherwise fragmented landscape of legal instruments and policy frameworks (Kaime, 2013) and informs the state's minimum obligations to children, regardless of legal status (Pobjoy, 2015). However, gaps between the CRC's rhetoric and practice have been shown to permeate care provision (see Chapters 5 & 6), with a socio-political rights framework adopted in this study to understand unaccompanied minors' disparate access to sometimes desperate care structures (see Chapter 2).

Rights-based approaches [RBAs] to development have a greater chance of maintaining their social and political relevance when they explore the underlying norms, values and logics implicit in understandings of rights (Reynaert et al., 2012). Therefore, in viewing findings through a socio-political frame, this chapter first discusses the dynamics of care in the context of control, and the resulting negotiation of power and agency. These negotiations exist over multiple levels of care provision, from regional politics to the field. Post-development thought is also reintroduced through these sections, and used to deconstruct some of the dominant discourse and power dynamics defining and informing practice. Perceptions of care provision are then levelled against the principles of the CRC to further explore local interpretations of rights, and the capacities of different models to meet the rights of unaccompanied minors. The relevance of a RBA to the situation of unaccompanied minors is then discussed in reference to the opportunities to build capacity and address the barriers to accountability between rights holders and duty bearers. A post-development view of rights is returned to in order to highlight the power systems shaping knowledge on care provision, and finally, to map strengths in care practice.

Socio-political processes affecting rights provision

According to Moser and Norton (2001), understanding how rights claims are processed into outcomes through power and control structures can be achieved through an analysis of the surrounding social and political processes. In analysing the relevant socio-political phenomenon, this section examines the emergency frame of migration and its flow on effect for care practice. The power dynamics between NGOs are then discussed in relation to their potential to perpetuate certain ways of caring. The logics underscoring participant's perceptions of different care models are further explored through their relationship with constructions of childhood and vulnerability. Finally and importantly, the agency unaccompanied minors demonstrate in relation to constricting structures is seen to challenge dominant narratives.

Care provision's emergency frame

Boin et al. (2009) argue emotive labels like crisis imply a disconnection from the status quo and generate framing contests between political actors attempting to distance themselves from public opposition, or capitalise on anti-immigration sentiment. Study participants also described the way in which the ultranationalist far-right political party, Golden Dawn, exploited social problems that arose from containment to create identity distinctions and influence a frustrated public on hotspot island locations (see Chapter 6). The visibility of such movements is consistent with rising nationalism across Europe (Postelnicescu, 2016), a trend that can lead to further restrictive policies (Coman, 2018; McLaughlin, 2018). My findings showed similar concerns, for example, Lawyer 2 revealed fears the EU-Turkey deal was paving the way for more exclusionary policy against refugees and unaccompanied minors, and focussed on xenophobia over rights. The lack of humanitarian response can be seen in participants' examples to contribute to a nationalisation of the issue alongside the rationalisation of policy (Rheindorf & Wodak, 2018), by creating social boundaries and distinctions between locals and asylum seekers (see Bendixsen, 2016). Munck and Hyland's (2014) argument that a human rights discourse can conjure up depictions of otherness is also evident; with the application of 'universal' rights shown to be selectively applied when it comes to people outside of the states of which they are a national.

According to Cabot (2014), governments may use a crisis frame to suspend their responsibilities and allow service delivery to remain focussed on basic needs. This study evidenced this suspension of responsibility through the reliance on the charity sector to implement care solutions with no oversight, and the lack of shelter capacity (see also Fili & Xythali, 2017; EKKA, 2018). The lack of space in shelters means children may be held in reception and detention facilities for extended periods of time (Digidiki & Bhabha, 2017; UNICEF, 2017a). Additional and urgent child protection concerns consequentially emerged, and NGO participants described their own challenges in being able to move past an emergency response as a result. A focus on immediate needs was also described by participants as compromising their capacity to give due attention to expanding alternative care models. This research also speaks to claims made by Tolfree (2003) that residential care can become further embedded in emergencies. For example, the reactive nature of the emergency status of care provision meant investment was largely stemmed into residential care, given it is the country's pre-existing model for children, further entrenching it as the primary response. Indeed, skewed investment in residential care over deinstitutionalisation by private and public stakeholders was noted generally by NGO participants.

Two interesting points intersect with claims of how an emergency response has further embedded residential care. Firstly, several participants identified basic needs as an area that should be of first focus, rather than new care models. Secondly, models were justified relationally to urgent child protection needs, rather than on their own merits. For example, a shelter was described as low in standards, but was better than living on the street (see Chapter 5). Reynaert et al., (2012) argues critical children's rights studies can help uncover where the different prioritisation of rights sits on a scale of detrimental to beneficial. In applying this perception to the rationalisation of sub-standard care as 'better than nothing', rights provision is seen to become focused at the basic needs level over the full rights that should be enjoyed under the CRC. Combined, these viewpoints also speak to the difficulties of setting priorities between short-term humanitarian imperatives and more sustainable longer-term goals (Duffield, Macrae, & Curtis, 2001).

Competition and collaboration between care actors

The influx of resources into Greece in 2015 was both welcome and destabilising for local NGOs. As stated by McKinnon (2007), imbalances in power emerge in tensions based on the perceived development level of a state, and between those that ‘do’ development and the communities that are the subject of their attention. These tensions were evident in Greece in the mistrust between care actors and the power associated with funding. For example, participants described organisations with no previous child protection experience diversifying to access funds and an inundation of NGOs to the region. Questions were consequently raised as to the quality and accountability level of these NGOs to refugee communities. Further tensions between INGOs and local actors were apparent in the funnelling of EU funds to international salaries, leaving resources to trickle down to implementing partners. Issues of collaboration were also described with a feeling INGOs were coming in and acting independently of the authorities. Furthermore, the power of residential care institutions was noted by participants amid their international support, and it was felt there needed to be stronger state collaboration with local civil society organisations to fulfil a deinstitutionalisation mandate. However, dynamics between the state and NGOs were also characterised by mistrust on account of the perceived development level of the authorities to undertake care requirements. Finally, the susceptibility of Greece to international politics was levelled in a participant’s argument that Greece had little control over the situation against EU-migration policy.

Power dynamics can be seen in the above examples to perpetuate certain ways of caring. Alternative models like foster care, supported independent living [SIL] and informal arrangements are challenged by preferences towards residential care and migration control prerogatives, complicated by competition and subject to the mandates of better resourced organisations. These dynamics highlight how issues of hegemony critiqued in post-development thinking are not unique to relations between Western and Southern states, but exist in many ideological struggles (McKinnon, 2007).

Childhood and vulnerability: Deconstructing “deservingness”

Assumptions associated with childhood remain vastly unexplored in children’s rights studies (Reynaert et al., 2012). This gap is significant given arguments that much of development theory starts with ideological and often Euro-centric ideas (Ziai, 2007) and that power is constituted through accepted forms of knowledge (Foucault & Gordon, 1980). It therefore becomes useful to consider underlying constructions of childhood and vulnerability implicit in research interviews, and how these dominant conceptualisations affect care access and provision. For example, it was felt by Child Protection Worker 2 that the predominance of unaccompanied minors in their adolescence contributed to disengagement of donors who perceived teenagers need less support. This view is aligned with assertions made by Lawyer 2 that children need to conform to normative childhood constructions in order to access opportunities, and that unaccompanied minors are often seen as victims to be saved. The level of support deemed appropriate was therefore described by participants in this context to hinge on assumptions of vulnerability. These findings link to De Graeve’s (2017) argument that normalising ideas of childhood are tied with discourses of belonging and worthy investment. Furthermore, synergies with binary perceptions of refugees presented in Chapter 2 also emerge, with teenage boys seen to be less easily absorbed into assumptions of vulnerability (see Fassin, 2001). These different constructions are significant given NGOs’ role in best interests determinations (The Greek Ombudsman, 2017). Research therefore also concurs with Eastmond and Ascher’s (2011) argument that the subjectivity of the best interests clause means it had the capacity to be mobilised for different ends.

When it comes to accessing care, Humphries’ (2004) research showed how service providers may act defensively in situations where resources are short, especially for adolescents perceived to be on the cusp of adulthood. Similarly in research, multiple references were made by participants about inaccurate age assessments, including allegations authorities were not following correct procedures and registering young people above 18 the majority of the time. Intrinsic in this process is the attempt to stop seeing young people as children, with a culture of disbelief then apparent around those claiming to be under 18 (see Crawley, 2007; Kohli, 2006; McLaughlin, 2018).

This was not the viewpoint of all participants, but is more indicative of how age constructs are presenting in wider care processes.

In the above example, deservingness appears linked to normative ideas of childhood when instead, the diversity in childhood across context and culture should be acknowledged (e.g. De Berry & Boyden, 2000). This diversity was seen in research to translate into different care needs, as intrinsic in discussions on the unique age identity of unaccompanied minors in Chapter 6. Furthermore, the importance of accounting for cultural diversity and connection appeared implicit in examples of children seeking connection to their communities, with instances of children wanting to stay in camps over shelters and approaching squats to access these networks. Assim & Sloth-Nielsen's (2014) argument that appropriate care cannot be achieved without consideration for cultural and religious factors is pertinent to these findings.

Additional evidence demonstrating how rights access can be subject to constructs of deservingness and vulnerability is apparent in the situation of children who are from countries such as Pakistan and Bangladesh (see Chapter 6). Chauvin and Garcés-Mascreñas (2014) show how legal status can hinge on successful performance of deservingness. In research, participants described the likelihood such children will be labelled economic migrants, despite often escaping rights abuses back home. The economic migrant label can therefore be seen in this case example to undermine the legitimacy of claims. As discussed in Chapter 2, unaccompanied minors are often categorised as either vulnerable victims or adults looking to exploit services (De Graeve, 2017). The economic migrant label arguably positions these young people in the ill-constructed category of the latter. Crock (2013) details how the denial of rights is often justified by using disabling notions that seek to undermine the legitimacy of rights claims, as appears evident in this example. This label is also significant given it undermines access to care provision; participants described how children in this situation are often left in flux until they can access legal status. The CRC stipulates the right to care and protection without discrimination and regardless of legal status (UN, 1989). However, this finding instead speaks to arguments that the failure of governments to deliver on obligations is derivative of deep-seated inequality (Schmitz & Mitchell, 2016). Harris-Short's (2003) assertion that the state is uniquely placed to

interpret and enforce international law is also relevant to this finding, with care provision becoming collateral to migration policy.

Perception and prioritisation of rights

Discriminatory access to care shows how constructs of deservingness can influence the prioritisation of certain rights. Reynaert et al. (2012) call for recognition of the interpretative subjectivity of the CRC, and therefore a need for more research on how underlying norms are shaping practice. In contributing knowledge on different rights perceptions, there are some other notable findings from participant interviews including divergences and synergies between the perceptions of rights holders and duty bearers. In my study, young people identified the following rights as important considerations: freedom, safety, protection, to live with their family and be treated equally. These appear to mark a balance between their agency and need for protection. In analysing these views in relation to participating care providers, some interesting correlations and tensions emerge. For example, shelters were seen to offer the most comprehensive approach to care to some, while others expressed the need for deinstitutionalisation, and investment in structures able to provide individualised support that respects agency. The latter view appears to sit closer with young people's prioritisation of freedom as an important right, especially against evidence from several participants that the controlling environments of shelters could contribute to children absconding. By acknowledging these different interpretations, Reynaert et al. (2012) argue greater comprehension of the wider children's rights framework can be understood by showing whose perspective or agenda certain interpretations channel.

Exercising agency

In emphasising the challenges young people face, it should not be inferred that they themselves are powerless. Findings concur with literature that shows children on the move find ways of coping even within constrained environments (see De Graeve & Bex, 2016; Gustafsson, Fioretos, & Norström, 2012; Long, 2001). Young people were shown to be active participants who find ways to exercise their agency. Agency becomes reflected in *if* and *how* unaccompanied minors choose to engage with the child protection system. Case study examples detailed by participants include children

absconding to achieve goals by more irregular means. Watters (2008) detailed how young people have a vision of what they want to achieve and will take a lot of risks to make it happen, as further evidenced in these risky and irregular responses. The importance of taking unaccompanied minors' agency into account when making care decisions in a receiving country is therefore centralised.

Care assessed against the cornerstones of the CRC

The plethora of care actors and the resulting disparate care provision has translated into different levels of rights afforded to children across centres. However, some synergies do emerge. In applying these localised perceptions of care to the CRC's principles, this section first discusses reception and temporary structures, before moving to the mainland models of shelters, foster care and SIL. Next, the frictions that exist in the CRC's principles in practice are reflected on.

Inappropriate reception systems

Young people arriving in Greece have the right to survival and development (Article 6) (UN, 1989). The right to survival encapsulates civil, social, cultural, political and economic aspects of life, and dictates states should ensure adequate standards of living for children. Comparatively, the right to development incorporates children's spiritual, moral and social growth alongside physical needs (Kaime, 2013). A denial of these factors is then outside the best interests of the child (Article 3) (UN, 1989). However, as noted in Chapter 6, participants described young people being subjected to gravely inappropriate conditions in detention centres and reception facilities, in situations that compromise their wellbeing. The use of detention was further decried for the negative effects it can have on children. These are just two examples of how unaccompanied minors' right to life and development are undermined, and the best interests prerogative abandoned. Furthermore, the CRC has specific considerations around protecting children's liberty (UN, 1989, Article 37), but this research has provided additional evidence that young people instead are held in these inappropriate situations for extended periods of time.

The shelter system

The low standards of living described in some centres undermine a child's best interests and right to an environment that supports their wellbeing (UN, 1989). It is clear that a spectrum of standards exists across shelters and, although definitive assertions of how certain models meet rights is not possible within the scope of this study, some troubling practices that sit outside the CRC's recommendations exist. For example, rights are at risk due to the multitude of care actors operating with little monitoring. Varying capacities for meeting rights also emerged between shelters: disparities were recorded in the level of expertise, resources and access to vital support staff, and an alignment with negative institutional characteristics was apparent in some instances. Tolfree's (2003) outline of the characteristics of institutional care included factors like a focus on basic needs over individualised care, and increased risk of child abuse. Both these characteristics, alongside others, presented in findings: participants described the lack of individualised care as an ongoing gap, and instances of neglect were evidenced in the form of unsafe environments. Of additional concern, are situations where people with no training in child protection have been starting shelters. Further questions arise about the competency of some workers to implement procedures in-line with the CRC. The UNHCR (2008) Guidelines on Determining the Best Interests of the Child states suitably qualified personnel with cross-sector expertise should be involved in the determination process.

Several characteristics are evident in the Greek care system that lends to what Wardhaugh & Wilding (1993) describe as an environment where corruption of care could take place. Firstly, corruption of care has been described to take place in contexts where the work is difficult and the resources are short. In Greece, the complexity of the work becomes evident in the politicisation of care given its intersection with migration, funding issues and ineffective supporting systems. Secondly, care corruption is more likely to occur in private, insular organisations (Wardhaugh & Wilding, 1993) as a lack of external monitoring means violations may go unnoticed (Lumos, 2016). Participants listed the lack of external monitoring as a key concern. Finally, Wardhaugh and Wilding (1993) describe how the disempowering elements in care provision including high staff turnovers and instability can also create a situation that makes staff feel vulnerable. The

corresponding competing sentiments of power and powerless can create a dangerous sense of ambivalence. These pressures are seen in the Greek context where participants described their susceptibility to short-term contracts and funding. Shelter staff's desire for job security was also outlined as a potential factor influencing resistance to expanding care options.

Foster care

Shortcomings in the shelter system are evident. It is therefore arguable the CRC's prioritisation of family-based solutions for children requiring alternative care is strengthened. The CRC stipulates that children deprived of their family environment are entitled to state care and protection, and that "such care could include, inter alia, foster placement, kafalah of Islamic law, adoption or if necessary placement in suitable institutions for the care of children" (UN, 1989, Article 20). The prioritisation of institutional care over other alternatives in the Greek context, therefore not only sits against recommendations made in the convention, but also outside of the models participants felt were best situated to meet rights. Advantages of family-based care identified by participants included children's rights to family and the comparatively protective environment offered. This assertion is built on in multiple studies. For example it was discussed in Chapter 5 that family-based care can help compensate for losses in family connection due to immersion in a new, supportive, social system (Kalverboer et al., 2017); provide stability, individual care and emotional support (Sirriyeh, 2013); and have lower incidences of self-destructive and suicidal behaviour when compared to large reception facilities (Schippers et al., 2016). This research further underpins the rationale for the prioritisation of family-based placements through its potential to provide a more protective and individualised care environment comparative to shelters.

Family-based care is not, however, an automatic panacea with a central factor influencing a successful placement being how valued and cared for young people feel in this context (Sirriyeh, 2013). Tolfree (2003) describes how foster care needs to incorporate the local community, and be overseen by an agency with an astute understanding of children's rights. He further details that while monitoring and support of foster parents may be challenging, both are important aspects of

safeguarding children's rights. Responding to such needs, hopeful practices were shown to be emerging in the Greek context via NGOs but they remain small-scale and serve only a fraction of children. The need for wider external systems of support and accountability remains critical across all care models, as also discussed later in this chapter.

Supported independent living

Retrak (2015) propose that SIL can be a more appropriate alternative for older children, especially if they have been living independently for some time prior to entering the care system. In Greece, a child protection and field worker described how shelters could be overbearing in some instances, which can push children away from the system. Comparatively, SIL programmes are valued by participants for their capacity to provide a supportive environment to nurture independence skills and aid transition to adulthood. One of the biggest gaps in care provision was seen to be the provision of safe accommodation that accounts for the unique identities of young people. Therefore, further expansion of SIL appears beneficial from a best interests perspective.

Supporting policies and practices for ensuring rights

Family-based care and SIL may be generally perceived as the best models for meeting rights according to participants, but this is only if they are implemented within a comprehensive framework. In considering how rights are met in different models, the supporting processes for assessing and monitoring placements also need to be considered in order to meet the protective and participatory elements of the CRC. This section explores how current systems and processes compound rights risks.

Ensuring the best interests of children

The UN Committee on the Rights of the Child (2005) stipulate a child's best interests should be respected during all stages of the displacement cycle. UNHCR (2010) further comment that all actions relating to children's care require a best interests determination or assessment. Independent Authority representative 1 described how

the person conducting the best interests assessment should be the legal guardian. However in reality, NGO assessments are often relied upon due to system shortcomings. Given disparities in mandate, conceptions of rights and level of expertise expressed by participants, questions are consequently raised as to how this process is being applied by different actors. These findings concur with arguments by The Council of Europe (2016) that the best interests principle is inevitably flexible, development dependent and contextually construed (Eastmond & Ascher, 2011). The Council of Europe (2016) further suggests the background, knowledge and communicative skills of those who conduct best interest assessments is one of the most important aspects. This view becomes juxtaposed against the findings of this research that there is a lack of resources and skilled staff in some facilities. The lack of resourcing to conduct thorough assessments is linked to another important element highlighted by participants – the importance of building trust.

The UNHCR Guidelines for Determining the Best Interests of the Child emphasise the need to develop trust (UNHCR, 2008). Numerous studies have pointed to difficulties refugee populations may have in trusting (Bjornberg, 2011; Hynes, 2009; Kohli, 2006; Miller, 2004) and the need to allow sufficient time to build trust (Ní Raghallaigh, 2013). Such preconditions for building trust were not present in reception processes, which was instead characterised by a lack of resources and questionable practices around age assessments and detention. Participants also described how a lack of continuity of care negatively affected trust, as well as the difficulties young people may have trusting following adverse experiences such as detention. Comparatively, the integration of children's and their family's plans into care programming, was seen by participants to help build trust and reduce the risk of absconding. These examples demonstrate how trusting relationships can also act as a protective factor and are a necessary precursor for meaningful participation, a key principle of the CRC (see UN, 1989).

Integrating young people's voices into programming

The right of unaccompanied minors to be heard makes up a central part of a best interests assessment in order to determine the most suitable course of action. Consequently, the child needs to be actively and meaningfully involved (Kaime,

2013). According to Cornwall and Nyamu-Musembi (2004), the focus of a right-based version of participation should be to shift the frame of assessment from the needs of beneficiaries to enable to citizens who are better able to claim their rights. Therefore, another prerequisite for effective participation is support through child-friendly information and processes, and access to interpretation and counselling services (UNHCR & UNICEF, 2014). Unfortunately in the Greek context, multiple participants described a situation where they felt unaccompanied minors were not adequately informed of their rights, therefore undermining participation.

With no external state monitoring, Ruiz-Casares et al.'s (2016) questions as to how participation is being defined and how meaningfully it is being enacted become pertinent. Variability in the ways in which young people were incorporated into monitoring and evaluation were evident. At one end, participants described opportunities for children to provide feedback through formalised one-on-one conversations, and at the other end, feedback was received through informal cues such as smiles. The latter is much more subjective to internalised constructions of childhood and communication (also discussed above). White's (2002) argument therefore becomes relevant: childhood constructions and child-adult communication varies socially and culturally. These factors influence participation, and do not appear to be adequately accounted for across all facilities. Distinctions also need to be made between participation and consultation, defined by Hill, Davis, Prout and Tisdall (2004) as "direct involvement of children in decision making" versus "seeking views" (p.83). Three participants felt minors' views were not taken into account in programming and few examples were yielded as to how unaccompanied views had shaped programming. This study therefore suggests participation more consistently appears in the consultation realm.

Accessing equal standards of care

With commitment to the CRC, also comes an obligation to prevent all forms of discrimination (Williamson et al., 2016). Article 2 of the CRC details how state parties should adhere to the convention's directives without discrimination of any kind. Article 22 further enforces protections for refugee minors, reaffirming how they should be able to access all rights (UN, 1989). Despite these stipulations, different

treatment comparative to local children is exemplified through the use of detention for unaccompanied minors. Connolly (2015) describes how the restriction of movement reinforces disparities with other children, becoming a metaphor for difference, separation and discrimination. Detained children are entitled to the rights stipulated in the CRC on an equal basis with non-detained children (Smyth, 2013). However, participants described further restrictions of rights experienced by these young people such as a lack of access to education. This reflects research from other sources such as the CRC country reports, which also suggest children often experience difficulties accessing basic services in destination countries (McLeigh, 2013).

Linking post-development and rights in care provision

A rights-based approach [RBA] was selected in this study due to its capacity to call the state to account for rights violations, and to explore the structural conditions affecting rights provision (see Chapter 2). In further examining these conditions, a post-development view of rights will be applied. A post-development lens is used to uncover systems of power (see Eyben, 2005), and is utilised in this section to show how such dynamics arguably define care provision. According to Long (2001), post-development should also acknowledge the agency of social actors. Therefore, an important next step is exploring how the capacity of rights holders can be built so they are better able to claim their rights, and so duty bearers can better meet international commitments (see Cornwall & Nyamu-Musembi, 2004). To aid this exploration, hopeful post-development ideas are adapted from Gibson-Graham (2005) in order to map the strengths and opportunities in care provision. In the context of this research, opportunities for reconfiguring power towards a more bottom-up approach are presented in an effort to empower alternative worldviews.

Placing the spotlight on systems of power

Post-development challenges the idea of objective knowledge delinked from power. Instead, understandings of the world are argued to be contingent on time, space and the systems of power shaping relations and lives (Eyben, 2005). Throughout this discussion, participants identified some of these power and knowledge systems and

their effects on care provision. Significantly, the framing of a border crisis has shifted vulnerability from those fleeing conflict and impoverishment, to the vulnerability of national frontiers (see also Andersson, 2016a). The EU's consequential subscription to deterrence migration policies may be justified under the guise of humanitarian action (Feldman, 2011), but in reality participants have described how it has severely weakened children's right to care and left them to languish in inappropriate conditions. These perceptions have also been perpetuated on the ground: care actors are caught between power in their capacity to interpret rights and influence models, and powerlessness to wider regional influences. The nationalisation and rationalisation of these migration policies (Rheindorf & Wodak, 2018), and the surrounding crisis framing contests it generates politically to appease, capitalise or antagonise public opinions (discussed above), further shows how different knowledge systems are underpinned by different mandates. The rationalisation of securitisation policies also ignores the reality of injustice as situated in the different life chances between countries (Brannan et al., 2016). De Graeve (2017) shows how criteria for the acceptance of rights claims in the migration context may be presented as universal and apolitical, but in reality is aligned with a neo-liberal world order and migration policy. Therefore, rather than being objective, knowledge is seen throughout this research's examples to epitomise power through undermining rights according to EU migration prerogatives over subscription to international rights conventions.

Escobar (1997) argues systems of relations define the conditions within which different ideas and concepts are incorporated into discourse. Firstly and vitally, the voices of unaccompanied minors appear largely missing. Power is further enacted therefore through the (lack of) processes for participation, as discussed earlier in this chapter. Secondly, the deficiency of external monitoring is arguably another process influential in defining care discourse, and consequently the perpetuating certain ways of caring. As was described by NGO Director 2 in Chapter 6, power becomes situated with the most well resourced organisations. Funding and private support has also been shown to prop up residential care over alternatives to also viably become another factor influencing the system of relations defining care discourse.

In further considering the influence of NGOs, these organisation's implicit constructions of childhood and vulnerability can be seen to also carry their own

power. For example, where De Berry and Boyden (2000) described how culture and context can influence variances in childhood experiences, evidence from participants suggests the legitimacy of this diversity may be obscured in current programming. As described earlier in this chapter, some participants felt the unique age identities of unaccompanied minors were not well catered for in care provision and that the overarching tendency was instead to victimise and pathologise children over recognising their agency. Previous research has also highlighted how unaccompanied minors can become confined to definitions of passive victims (De Graeve, 2017; Giner, 2007; Kanics, et al., 2010), something that appears evident in the above understandings of vulnerability. Such a construct is described by Escobar (1995) to contribute to ‘othering’, with understandings embedded in a network of power relations that reproduces otherness as pathology and frames subjects as in need of reconstruction. According to Block et al. (2013), a bottom up approach can help address internalised constructions of childhood, with a reorientation towards this approach discussed in the next section.

Injecting hope into a rights-based approach

Where the post-development view of rights has helped highlight some of the negative impacts of development, a hopeful post-development view seeks to offer solutions through the empowerment of alternative views and voices (McGregor, 2009). By viewing rights through this lens, hopeful post-development’s reorientation from needs and limitations to capacities and opportunities offers a useful starting point to identify the solutions for better empowering care actors. In looking to ways to strengthen alternative voices, avenues for re-calibrating power towards rights holders are explored in this section. Examples of hopeful practices identified by care actors will also be mapped and discussed.

Building capacity of rights holders

A RBA positions unaccompanied minors as rights holders over objects of charity (UNICEF, 2009). In supporting this positioning, Jonsson (2005) explained that a RBA to development should contribute to closing or reducing gaps between rights holders and duty bearers through actions aimed at increasing responsibility, resources and

capabilities of each. Approaches for increasing the capacity of young people were identified in Chapter 6. For example, an outside participant described a mechanism for integrating unaccompanied minors' voices into planning through peer-to-peer feedback opportunities, an approach that could be trialled in the Greek context. The peer-to-peer approach's success also speaks to the effectiveness of children accessing the experiences and views of other children (see also Scheyvens et al., 2014). Additionally, some positive examples of participatory practices also emerged. For example, the integration of children and their parent's aspirations into care planning also gives space for children and families to narrate their own visions. According to Cornwall & Nyamu-Musembi (2004), creating additional platforms for achieving positive transformation of power relations helps rights-based approaches maintain their meaning. Barker and Weller (2003) further argue that by taking a bottom-up approach, power dynamics between adults and children in research can also start to be addressed. The above examples of ways to incorporate young people's views into care provision provide a practical starting point for how this change in dynamics can be achieved.

In further strengthening care systems and generating more platforms for participation, a reorientation away from top-down implementation can also help mitigate misalignment between the formal and informal care aspects of child protection systems (Wessells, 2015). In the context of the care of unaccompanied minors in Greece, an interesting finding emerged from one care provider who had seen instances where children may prefer to stay living in a camp over a shelter due to the community connection and support. The participant also identified a need to better understand the kinds of informal care structures that exist for unaccompanied minors locally, and the challenges and opportunities around them (see Chapter 6). Implicit in the need to map informal care structures, is also a shift to widen the field of credible experience. The recognition of different ways of approaching development is a key feature of post-development thought (Gibson-Graham, 2005). In applying this to children's right to care, the shift beyond a purely professionalised system to better acknowledge some of the care initiatives concurrently taking place within different communities could help meet rights through increased facilitation of continuity of care (see Chapter 5).

Towards a hopeful mapping of care provision

Many challenges to care provision permeate the Greek care landscape, but this does not mean it is remiss of positive practices. McGregor (2009) details how hopeful post-development encourages the reimagining of places in terms of opportunities and capacities. As results have shown, hopeful practices are present in the improvements made to cater to unaccompanied minors needs, participants' own critiques of the care landscape and desires to strengthen the child protection system. Opportunities for strengthening care are reflected in the successes of the small-scale foster care and SIL projects, the ongoing commitment to supporting their implementation, the openness to their expansion and calls for a more robust framework to ensure all children's rights were protected. This buy-in is important as for foster care to succeed, the benefits need to be understood by care actors (see Family for Every Child, 2015).

In holding the state to account for their commitment to provide care for all children (see UN, 1989), additional hopeful practices were evident in Lawyer 2's work with under-represented and consequently increasingly vulnerable children from Pakistan and Bangladesh. The value of a RBA to position problems as violations, as described by Jochnick (1999), is concurrently highlighted. In Greece, there have been some advances in legislation in relation to foster care. These advances dually speak to how emergency situations can also offer opportunities to strengthen child protection systems (IAWG-UASC, 2013; UNHCR, 2017b). The effectiveness of these new laws remains to be seen in practice, but the increased institutional support potentially provides some additional leverage for those working to protect unaccompanied minors.

Conclusion

This discussion outlines findings in relation to the application of the CRC to the care of unaccompanied minors, and the social and political processes affecting care provision. The CRC's principles were shown to be compromised within the current care system. The ongoing use of arbitrary detention emerges as one of the most significant violations, compromising the best interests principle (Article 3), right to life (Article 6), development and right to liberty (Article 37) (UN, 1989). The lack of

spaces in the shelter system also places young people at additional risk of exploitation and abuse. Other problem areas observed in this study include the perceived lack of integration of children's voices into programming and unequal care access. Rights risks are compounded by the absence of external monitoring and unstandardised care provision, with different views and levels of resources consequently characterising the care landscape. The lack of monitoring, therefore, presents a challenge to the best interest principle in practice and can contribute to an environment where corruption of care can take place.

Socio-political processes further complicate the provision of alternative care. In acknowledging external influences like migration policy, this study both aimed to uncover some of the underlying tensions in rights implementation and centralise rights' political nature. Here, events such as the EU-Turkey deal and the closing of borders have been shown to contribute to care provision's emergency frame, due to the creation of urgent needs. Models perceived to be better equipped to meet rights, including foster care and SIL, become undermined in favour of the status quo of residential care. The need for collaboration and the reality of competition between NGOs for funds dually strengthens calls for greater state leadership and investment in child protection issues.

In looking to increase the capacity of unaccompanied minors as rights-holders through a more equal distribution of power, some hopeful practices and approaches were identified. A better understanding of current modalities in place for community-based support of unaccompanied minors and wider adoption of key practices purported to be working well by participants, could also further support young people's protection. These entry points build on gaps already outlined in previous sections, to reveal a more hopeful, albeit introductory, mapping of positive practice on the ground in Greece.

CHAPTER 8: CONCLUSION

Introduction

Greece faces many challenges to expanding the spectrum of care options. As explained throughout this thesis, the country's positioning on the migration route, pre-existing culture of institutionalisation and stretched child protection system intersect with the impacts of wider EU migration policy and the financial crisis. A complicated environment for bettering care is created to the effect unaccompanied refugee and asylum seeking minors in need of protection are met with woefully inadequate structures for meeting their rights and needs. Instead, many live in situations that exacerbate their vulnerability to abuse and exploitation. The lack of capacity in the care system exists in contradiction to Greece's commitment to the Convention of the Rights of the Child [CRC], which stipulates children's entitlement to appropriate care arrangements until the age of 18. Family-based alternative care should also be prioritised over institutions, yet residential care remains the dominant model (UN, 1989). Despite the challenges, examples of positive practices have emerged in the form of small-scale foster care and supported independent living [SIL] for unaccompanied minors.

In acknowledging the complicated environment within which rights provision takes place, this research aimed to explore alternative care approaches for unaccompanied refugee and asylum-seeking children in Greece from a socio-political rights-based perspective. As described in Chapter 2, the socio-political construction of rights was selected for two main reasons. Firstly, the mainstreaming of children's rights comes with the risk that complex social and political concerns become reduced to technical issues of compliance. Secondly, this study aimed to contribute to understandings on how rights are locally construed and implemented. The socio-political framing attempts to address some of the CRC's limitations as the universal tool for assessing children's rights, to instead conceptualise their implementation as a negotiation of power and agency. Through this framing, some of the belying influences affecting rights access and provision have been presented. In combining these ideas, three key research questions underpinned this study:

- 1) How does the CRC apply to alternative care options available to unaccompanied minors in Greece?
- 2) What social and political processes are influencing the implementation of unaccompanied minors' right to appropriate alternative care in Greece?
- 3) How are alternative care approaches working in practice in the Greek context?

In answering these questions, qualitative research techniques were applied including semi-structured interviews, online questionnaires, surveys and field journal, alongside attendance at relevant events and informal interactions with people involved in providing and receiving care. Participants included unaccompanied minors with experience of the care system and key NGOs engaged in their welfare. In summarising findings from this research, this chapter will first address the research questions before detailing the relevance of findings and concluding remarks.

The CRC and care models in Greece

In exploring how the CRC applies to the care options available to unaccompanied minors in Greece, this research uncovered some concerning admissions surrounding discriminatory practices pertaining to care access. It also further evidenced the lack of quality and capacity for caring for unaccompanied minors within the Greek care system. While much of the research discusses rights violations, some positive practices also emerged alongside the commitment of care professionals to further care provision in what has already been revealed to be a complicated and challenging environment. Findings recorded below also start to respond to research question three as to how alternative care approaches are working in practice. Key findings are highlighted in italics and then explained.

The use of detention violates the right to liberty and best interest principles, while a lack of spaces in shelters places minors at risk of abuse and exploitation: Unaccompanied minors' rights are undermined in current care provision through a lack of monitoring and resources to ensure care access, let alone quality care (see

Chapter 5). Securitisation over humanitarian approaches have characterised the reception system and contributed to the use of detention, alongside deteriorating and dangerous conditions in reception facilities (see Chapter 3). These situations were shown to be incompatible with unaccompanied minors' best interest, right to life and development, and right to liberty (see UN, 1989). Participants showed how the rights of young people in this situation are further at risk due to diminished access to other rights requirements, including education. NGOs attempting to address shortcomings in the system have created alternatives in the form of temporary alternatives, which have also been subject to significant critique. The alternatives appear to be taking more permanent root despite providing insufficient standards of protection.

The unavailability of a standardised shelter approach, monitoring and effective guardianship present a challenges to the best interests principle in practice: Risks to children's rights have been shown to be prevalent throughout the shelter system, with disparate standards of care described by study participants (see Chapter 5). In levelling residential care's capacity for meeting rights against the CRC, the spectrum of variability across shelters needs to be acknowledged. This study therefore has not intended to paint all facilities with the same brush, but highlight some of the shortcomings evident within certain centres, as identified by care workers and receivers. Some shelters were described to have inexperienced staff, limited resources and a lack of access to wider social and legal support staff. These gaps in care both underscore rights at risk and concurrently highlighted the lack of effective guardianship and monitoring systems, and therefore accountability. Young people should have adequate representation and their views heard, as the CRC's principles of participation and best interests outlines (UN, 1989). Internal monitoring is both dangerous in principle and practice (Wardhaugh & Wilding, 1993). External regulatory bodies are therefore needed to ensure appropriate standards are in place to protect children's rights and needs.

The importance of family, freedom and safety: In centralising the views of participating unaccompanied minors, the rights revealed to be most pertinent included the right to live with their family, to be safe and to have freedom. As demonstrated above, these views of rights are undermined in current care provision due to the inadequate standards of care available in reception, no monitoring of shelters and a

lack of care options for young people arriving in Greece. As discussed in Chapter 7, the lack of freedom afforded in a residential care environment contributed to some young people leaving the system. Comparatively, family-based care and SIL could offer greater capacity for supporting agency through the provision of more individualised care.

The importance of family was a central element in my visit to a shelter, where young unaccompanied minors were awaiting reunification. The barriers and delays in reunification experienced by young people sits in contradiction to the CRC, given the importance of the family unit (UN, 1989). Delays were also described to increase the risk of children absconding (see Chapter 6). The best care option for young people is usually to be supported within their families (United Nations, 2010), with the models discussed meant to be short over long-term interim solutions in these cases. Unfortunately, regional politics are again undermining the child's best interests in this regard given the long delays and unpredictability of outcomes.

Family-based care and supported independent living remain underdeveloped but generally perceived as the best models for meeting rights, if implemented within a comprehensive framework: Building on the need for strong supporting processes in the child protection system, fears around implementation of alternative models to residential care were mostly centred on the need for a comprehensive and well-resourced framework. Amidst some concerns and attachment to current ways of delivering care, there was a general openness that models such as foster care and SIL could offer better solutions to care needs. Reasons for looking at alternative models to residential care included shelter's institutionalising effect. In regards to foster care, children's right to family and the protective elements of family were recognised by participants. Comparatively in SIL, participants saw potential in the model's wider scope to respect children's agency and support the transition to adulthood. Within current programming, care providers engaged in foster care described some comprehensive internal processes for ensuring children's rights were protected throughout their foster care placement. One outside concern emerged in regards to the quality of matching and the capacity of the organisation to respond to these issues. Additional recruitment issues may be tied to issues of matching, including difficulties

recruiting foster families of similar backgrounds to unaccompanied minors and who are open to hosting the older demographic of children.

Perceived lack of effective integration of children's voices into care provision: While due weight should be given to children's views in accordance with their age and maturity (Article 12) (UN, 1989), participants felt there was a perceived lack of integration of children's voices into care provision, and the opportunities for young people to provide feedback on programming varied across shelters. The distinction between consultation and participation consequently emerged, with much of the processes described appearing to sit in the latter (see Chapter 7). A key facet of effective participation is adequate information on rights (Ruiz-Casares et al., 2016), as is also stipulated in Article 42 of the CRC (UN, 1989). However, some participants felt young people were not well informed of their rights. Furthermore, participation is a core requirement of a best interests assessment. As discussed in Chapter 7, a best interests determination helps to identify a durable solution for unaccompanied minors. This process requires sufficient time to develop trust and create a comfortable environment to enable young people to share their stories. However, resourcing issues are prevalent in Greece leading to this process being undermined.

Discriminatory access to care: The CRC clearly outlines its principles are applicable to all children, and states are to respect and ensure these rights are applied as such without any discrimination (Article 2) (UN, 1989). However, disparate treatment between local and migrant children is evidenced in the prominence of detention and dangerous conditions in reception facilities. Further discrimination appears visible in evidence from participants on the barriers to accessing care within different groups of unaccompanied minors, based on their countries of origin.

Social and political processes shaping rights provision

Issues around discrimination show how different interpretations and prioritisations of rights can affect rights provision. In further exploring the underlying social and political process affecting rights implementation; migration policies, different constructions of childhood, and perceptions of foster care were identified as influencing care provision. With the reception system riddled with rights violations

and a lack of capacity, care workers also described feeling constrained to an emergency level response. Competition in securing resources between NGOs was also seen to contribute to collaboration issues.

Policies of containment, and the constructions used to justify them, compromise care and can push young people to avoid the system: The negotiation of power and agency are evident in the barriers to accessing care. Migration policies of containment, such as EU-Turkey deal, are met with young people's agency in how they choose to engage with the system. There are limited channels for exercising agency given the restrictive environment care operates in, with some young people choosing to abscond as a result and attempt to achieve their goals outside of the system. Bureaucratic delays in asylum claims and family reunification were further shown to push young people from the system, and undermine their wellbeing.

Constructions of deservingness become entwined with interpretations of rights and normative ideas of childhood, and can serve to draw the lines of what constitutes an authentic asylum claim, as discussed in Chapter 7. Age constitutes an important factor in determining access to care. Rudimentary practices pertaining to age assessments have been detailed in the Greek context, with findings aligning with wider literature detailing a culture of disbelief in relation to those claiming to be under 18 (Crawley, 2007; Kohli, 2006; McLaughlin, 2018). Potentially implicit in this process is the ill alignment of adolescent teens that have demonstrated incredible agency in migrating, with constructions of the vulnerable child in need of saving and protection (Fassin, 2001). Arguments for or against different models were also largely centred on different ideas of protection in relation to age groups (see Chapter 6). The indeterminate nature of rights and prioritisation of different principles of the CRC (see Chapter 2), then becomes evident across these diverging interpretations.

A focus on immediate needs over longer-term solutions permeates care provision: Cabot (2014) describes how an emergency frame can be used to suspend government responsibility, and allow care provision to remain at the emergency level. In Greece, policies of containment have also had negative effects on the standards of care available to unaccompanied minors. A consequential focus on basic and urgent needs was described by participants, and correspondingly, a lack of capacity for NGOs to

focus on more sustainable care solutions. Consequently, sliding standards of care were reported in an effort to maximise the reach of programmes.

Tensions between care actors in relation to funding, responsibilities and mandates, complicate care provision: The tension between competition for funds and collaboration for effective outcomes emerged as a key concern in research. Further tensions affecting care provision included disparities in power and resources between incoming INGOs at the height of the crisis, and local organisations who did not have the same access to funding. Gaps in trust between NGOs and the state were also detailed in Chapter 6. In tabling how these factors influenced care provision, participants described questionable qualifications of care actors. As discussed in Chapter 7, a deficit of qualified staff becomes a child protection risk. A lack of mandate to collaborate also emerged in the findings, particularly given care workers operate within a resource-constrained environment. The power dynamics between NGOs is further significant in the influence these organisations wield in shaping care provision through the prioritisation of certain rights. These factors also show how the local NGO needs to be viewed in relation to other constitutive actors, including state and transnational networks and that care responses are conceptually and relationally embedded.

Foster care construed locally as a pathway to adoption: Some interesting findings emerged as to how foster care is locally constituted and understood in Chapter 5. Participants felt the public perceived foster care as a pathway to adoption, over an interim care measure. This understanding creates some unique challenges to wider implementation, especially given the principles of kafala relevant to some children's placements. This finding needs to be viewed in-line with community capacity building opportunities described by participants.

Meeting problems with solutions: Alternative care practices

Alongside addressing the rights violations and gaps in care provision detailed previously, participants detailed some positive practices and possible areas for further

support. Practices for integrating children's voices into planning were shown to have a protective factor. Capacity building opportunities were presented at the professional, public and community levels.

Need for greater institutional support for children's agency and participation: Participants identified both gaps in participation, as described earlier in this chapter, and examples of the advantages of supporting young people's agency, plans and ambitions. Positive practices identified included the 'Trusted Junior' method for getting feedback. Participants also described the successes in integrating children and their families into care planning as an important factor in building trust. Care arrangements to support children's agency and life stage were stipulated as important by others.

Capacity building opportunities exist at the community, professional and state level: In mapping the strengths of the Greek care system, participants identified a strong technical capacity in Greece to be built on, alongside a commitment to acting in the best interests of unaccompanied minors they represent. The level of technical capacity points to strong foundations in moving the child protection system forward. Participants also highlighted capacity building opportunities at both the professional and community level in relation to expanding the care options. For example, success in some existing strategies and training aimed at furthering community and state awareness of care issues, show there is interest for wider dissemination. There is also a need for greater exploration of the existing community initiatives that support children on the move.

Supporting continuity in care: A gap in existing foster care programming was identified in the diversity of the pool of participants young people can be placed with. In again recognising the importance of the continuity of care discussed in Chapter 5, families with similar backgrounds to young people in need of care can be a protective factor in relation to mental health and wellbeing (see also Geltman et al., 2005). A barrier to this group of potential foster parents' participation in foster care was identified as their stage of integration. Evidence from the outside expert suggests there is a lot of openness from ethnic families to provide interim care, meaning wider integration support also has the potential to widen the pool of foster parents.

Relevance of findings

This research has detailed rights violations in relation to care provision in the Greek context, alongside some of the perceptions and practices shaping rights denials. Research has therefore contributed to knowledge on the social and political processes underscoring rights implementation in Greece, the barriers to wider implementation, and the constraints within which care actors are operating. Greater understanding on how such violations may be addressed is also generated. This study concurrently sought to map examples of positive practices and learnings from care actors in Greece, to aid context specific knowledge and practice exchange. Importantly, this study has ensured young people's voices and opinions on rights prioritisations and experiences of the system are recorded. Findings consequently contribute to gaps in country-specific knowledge on the practices and policies shaping unaccompanied minors' care and rights.

Final conclusions

This thesis has revealed a number of rights violations in relation to protecting unaccompanied minors in Greece. The denial of the right to appropriate care has been shown to begin beyond borders through attempts to limit those arriving on Europe's shores (see Andersson, 2016a ; Andersson, 2016b; Barbulescu, 2017; UNICEF & REACH, 2017; Vice News, 2015), and is further evidenced through the use of inappropriate and dangerous facilities including police-cells and overcrowded camps (see Fili & Xythali, 2017; Human Rights Watch, 2016a; UNICEF, 2017b). Participants have shown how this denial culminates in the absence of a monitoring mechanism for care providers and a lack of investment in strengthening alternative care options. Belying rights violations are a number of social and political processes that affect the quality of care young people arriving in Greece are able to access. Wider migration policies have been shown to complicate care provision, create conflicting mandates between care and control, and influence accommodation standards. In an attempt to respond to urgent needs, participants described feeling tied to an emergency level response. Consequently, their capacity to strengthen more sustainable solutions like foster care and supported independent living was compromised. Social processes have also played a role in maintaining the status quo

of residential care, with some attachment to current ways of providing care demonstrated alongside fears of new models, particularly given the need for supporting systems.

The predominant residential care model for unaccompanied minors has been shown to be problematic due to its institutional characteristics. Numerous rights violations and risks were revealed by participants. There were some examples of positive practices, with divergences in standards across shelters again representative of wider issues and a need for external monitoring. However, the majority of participants felt foster care and supported independent living were better able to meet children's rights in most instances. These views were expressed under the caveat that wider implementation of these models should take place within a strengthened child protection framework.

There are many challenges to expanding the spectrum and quality of care options, but participants' commitment to bettering care and protecting children's welfare provides a hopeful starting point to address these. In building on this capacity, there is a need for increased state leadership in aligning care provision within a common set of standards and safeguards to ensure unaccompanied minors rights are protected. Protecting unaccompanied minors cannot be done in isolation from migration policy. There is a concurrent urgency to redirect investment towards a humanitarian response that respects the rights of children, regardless of their legal status.

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APPENDICES

Appendix 1: Full ethics approval letter



Date: 11 July 2018

Dear Liselle Finlay

Re: Ethics Notification - SOB 18/33 - Fostering a new approach: How alternative care models in Greece are meeting unaccompanied minors' rights

Thank you for the above application that was considered by the Massey University Human Ethics Committee: Human Ethics Southern B Committee at their meeting held on Wednesday, 11 July.

Approval is for three years. If this project has not been completed within three years from the date of this letter, reapproval must be requested.

If the nature, content, location, procedures or personnel of your approved application change, please advise the Secretary of the Committee.

Yours sincerely



Associate Professor Tracy Riley, Dean Research
Acting Director (Research Ethics)

Appendix 2: Example of an information sheet: NGOs [English]. Note additional information sheets created for outside experts and foster carers (not included).



***Fostering a new approach:
How alternative care models in Greece are meeting unaccompanied
minors' rights***

INFORMATION SHEET – NGO Staff

Greetings,

My name is Liselle Finlay, and I am currently conducting research about how the care models available to unaccompanied refugee minors in Greece are meeting their rights. I aim to highlight the positive work being done in this space, and to explore the suitability of and challenges to implementing family-based solutions. Participants who are involved in the provision of care for unaccompanied minors are invited to participate in the study. Reflections will also be sought from those receiving care.

I would like to invite you to participate in this research in your role as an experienced worker in this field. Your insights and contributions to the project would be greatly appreciated. Areas I would like to discuss with you include the policy, process and practice of protecting unaccompanied minors' rights, and the challenges of implementing family-based care in the Greek context. If you would agree, then I would like to invite you for an interview lasting up to one and a half hours. Your information will be handled carefully and treated with confidentiality. You can also request to cease participation at any time, and you will be provided with the opportunity to review your interview transcript. Please also allow sufficient time (1 hour suggested) to complete this review.

You are under no obligation to participate. If you decide to participate you will have the rights to...

- Provide information on the understanding that your name will not be used;
- Ask any questions about the study at any time during participation;
- Decline to answer any particular question;
- Ask for the recorder to be turned off at any time during the interview.
- Withdraw from the interview;
- Make changes to the interview transcript;
- Be given access to a summary of the project findings when it is concluded;

Data collected in interviews will be used for the purpose of my Master's thesis. Results may be published as a working paper or journal article, and presented at conferences. Data collected will be securely stored, identifying features removed from transcripts and identification codes stored separately. At the end of the storage period, data will be securely destroyed. I would like you to note that even though every effort will be made to protect your identity, you may be identifiable by association to your employer, METAdrasi, who will be named in this study.

Thank you so much for your participation! If you have any questions, please contact me or my supervisors, You will find contact details on the second page.

Liselle Finlay

Contact details:

Liselle Finlay (Researcher)

International Development Master's Student
Massey University
Email: [REDACTED]
Phone NZ: [REDACTED]
Phone Greece: TBA

Dr Maria Borovnik (Supervisor)

Senior Lecturer in Development Studies
School of People, Environment and Planning
College of Humanities and Social Sciences
Massey University
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Dr Sharon McLennan (Co-Supervisor)

Lecturer in Development Studies
School of People, Environment and Planning
College of Humanities and Social Sciences
Massey University
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Palmerston North 4410
New Zealand
Email: S.McLennan@massey.ac.nz
Phone: 06 – 356 9099 ext 836

This project has been reviewed and approved by the Massey University Human Ethics Committee: Southern B, Application 18/33. If you have any concerns about the conduct of this research, please contact Dr Gerald Harrison (Acting Chair), Massey University Human Ethics Committee: Southern B, telephone 06 356 9099 x 83570, email humanethicsouthb@massey.ac.nz



Προώθηση νέας προσέγγισης:
Πώς τα μοντέλα εναλλακτικής φροντίδας στην Ελλάδα πληρούν
τα δικαιώματα των ασυνόδευτων ανηλίκων.

ΣΕΛΙΔΑ ΕΝΗΜΕΡΩΣΗΣ – ΜΚΟ

Χαίρεται,

Ονομάζομαι Λιζέλ Finlay, και επί του παρόντος διεξάγω έρευνα για το πώς τα μοντέλα φροντίδας που διατίθενται στους ασυνόδευτους ανηλίκους πρόσφυγες στην Ελλάδα πληρούν τα δικαιώματά τους. Στόχος μου είναι να επισημάνω τη θετική δουλειά που γίνεται σε αυτό το χώρο και να διερευνήσω την καταλληλότητα, και τις προκλήσεις της εφαρμογής εναλλακτικών λύσεων. Οι συμμετέχοντες που εμπλέκονται στην παροχή φροντίδας για τους μη συνοδευόμενους ανηλίκους καλούνται να συμμετάσχουν στη μελέτη.

Θα ήθελα να σας προσκαλέσω να συμμετάσχετε σε αυτή τη μελέτη στο ρόλο σας ως εργαζόμενο στον τομέα αυτό. Οι απόψεις και οι συνεισφορές σας στην έρευνα θα εκτιμηθούν σε μεγάλο βαθμό. Οι περιοχές που θα ήθελα να συζητήσω μαζί σας περιλαμβάνουν την πολιτική, τη διαδικασία και την πρακτική για την προστασία των δικαιωμάτων των ασυνόδευτων ανηλίκων και τις προκλήσεις της εφαρμογής οικογενειακής φροντίδας στο ελληνικό πλαίσιο. Εάν συμφωνείτε, τότε θα ήθελα να σας προσκαλέσω για μια συνέντευξη διάρκειας έως 1 ώρας. Εάν συμφωνείτε, τότε θα ήθελα να σας προσκαλέσω για μια συνέντευξη διάρκειας έως 1 ώρας (online μέσω Skype ή ηλεκτρονικού ταχυδρομείου). Οι πληροφορίες σας θα διαχειριστούν προσεκτικά και θα αντιμετωπιστούν με εμπιστευτικότητα. Οι πληροφορίες σας θα διαχειριστούν προσεκτικά και θα αντιμετωπιστούν με εμπιστευτικότητα. Μπορείτε

επίσης να ζητήσετε να σταματήσετε τη συμμετοχή ανά πάσα στιγμή, και θα σας δοθεί απομαγνητοφωνημένη η συνέντευξή σας . Παρακαλείστε επίσης να έχετε επαρκή χρόνο (προτείνεται 1 ώρα) για να ολοκληρώσετε αυτή τη μελέτη.

Δεν έχετε υποχρέωση συμμετοχής. Εάν αποφασίσετε να συμμετάσχετε, θα έχετε τα δικαιώματα να ...

- Παρέχετε πληροφορίες σχετικά με την κατανόηση ότι το όνομά σας δεν θα χρησιμοποιηθεί,
- Ρωτήσετε οποιαδήποτε ερώτηση σχετικά με τη μελέτη οποιαδήποτε στιγμή κατά τη διάρκεια της συμμετοχής σας,
- Απορρίψετε την απάντηση σε συγκεκριμένη ερώτηση,
- Ζητήσετε να απενεργοποιηθεί το καταγραφικό ανά πάσα στιγμή κατά τη διάρκεια της συνέντευξης,
- Να αποχωρήσετε από τη συνέντευξη ,
- Να κάνετε αλλαγές στο αντίγραφο της συνέντευξης,
- Να έχετε πρόσβαση σε μια σύνοψη των πορισμάτων του έργου όταν ολοκληρωθεί,

Τα δεδομένα που συλλέγονται σε συνεντεύξεις θα χρησιμοποιηθούν για τους σκοπούς της διατριβής του Μεταπτυχιακού μου. Αποτελέσματα της οποίας μπορεί να δημοσιευθούν ως άρθρο εργασίας ή περιοδικού και να παρουσιαστούν σε συνέδρια. Τα δεδομένα που συλλέγονται αποθηκεύονται με ασφάλεια, αναγνωριστικά χαρακτηριστικά που αφαιρούνται από τις απομαγνητοφωνήσεις και τους κωδικούς ταυτοποίησης αποθηκεύονται μεμονωμένα. Στο τέλος της περιόδου αποθήκευσης, τα δεδομένα θα καταστραφούν με ασφάλεια.

Σας ευχαριστώ πολύ για τη συμμετοχή σας! Εάν έχετε οποιεσδήποτε απορίες, παρακαλώ επικοινωνήστε μαζί μου ή με τους προϊστάμενούς μου. Θα βρείτε τα στοιχεία επικοινωνίας στη δεύτερη σελίδα.

Liselle Finlay

Στοιχεία Επικοινωνίας;

Liselle Finlay (Ερευνήτρια)

International Development Master's Student

School of People, Environment and Planning

Massey University

Email: [REDACTED]

Τηλέφωνο NZ: [REDACTED]

Τηλέφωνο Ελλάδας: TBA

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Δρ Sharon McLennan (Συνδ. Επόπτης)

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Αυτό το έργο έχει αναθεωρηθεί και εγκριθεί από την Massey University Ethics Committee Human: Southern B, Αίτηση 18/33. Εάν έχετε οποιαδήποτε ανησυχία σχετικά με τη διεξαγωγή της έρευνας αυτής, παρακαλώ επικοινωνήστε με τον Δρ Gerald Harrison (Αντιπρόεδρος), την Massey University Ethics Committee Human: Southern B, τηλέφωνο 06 356 9099 x 83570, email: humanethicsouthb@massey.ac.nz



***Fostering a new approach:
How alternative care models in Greece are meeting unaccompanied
minors' rights***

INFORMATION SHEET – FOCUS GROUP

Greetings,

My name is Liselle Finlay, and I am currently conducting research about the different kinds of care available to unaccompanied young people in Greece. My research aims to highlight the positive work being done to further care options, and explore how different care options meet young people's rights.

I would like to invite you to participate in this study as someone who has experience of care in Greece and therefore understands best what is needed. Areas I would like to discuss with you are the ways you think it is best to provide care to other young people arriving in Greece, and how you think different models are meeting the rights of young people. If you would agree, then I would like to invite to participate in a small focus group with 3-5 other people lasting up to one hour. Your information will be handled carefully and treated with confidentiality. You can also request to cease participation in this focus group at any time. Support staff will be accessible during the session if you are feeling like you would like to talk to someone about any topics raised. Please also see below for contact details if you would like to speak to someone following the focus group.

You are under no obligation to participate. If you decide to participate you will have the rights to...

- Provide information on the understanding that your name will not be used;
- Ask any questions about the study at any time during participation;
- Decline to answer any particular question;
- Ask for the recorder to be turned off at any time during the focus group.
- Withdraw from the focus group;
- Be given access to a summary of the project findings when it is concluded;

Data collected in this focus group will be used for the purpose of my Master's thesis. Results may also be published as a working paper or journal article, and presented at conferences. Data collected will be securely stored, identifying features removed from transcripts and identification codes stored separately. At the end of the storage period, data will be securely destroyed. Every effort will be made to protect your identity unless it is revealed you are in some way at risk of harm and would benefit from additional support services. Guardian consent is also required for participation.

Thank you so much for your participation! If you have any questions, please contact me or my supervisors, You will find contact details on the second page.

Liselle Finlay

Contact details:

Support Staff - TBA

If you have any concerns or would like to discuss topics raised in this focus group session, then please feel free to contact your support person at anytime:

[insert contact details]

Liselle Finlay (Researcher)

International Development Masters student
School of People, Environment and Planning
Massey University
Email: [REDACTED]
Phone NZ: [REDACTED]
Phone Greece: TBA

Dr Maria Borovnik (Supervisor)

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This project has been reviewed and approved by the Massey University Human Ethics Committee: Southern B, Application 18/33. If you have any concerns about the conduct of this research, please contact Dr Gerald Harrison (Acting Chair), Massey University Human Ethics Committee: Southern B, telephone 06 356 9099 x 83570, email humanethicsouthb@massey.ac.nz

Appendix 5: Individual participant consent form [English]



MASSEY UNIVERSITY
COLLEGE OF HUMANITIES
AND SOCIAL SCIENCES
TE KURA PŪKENGĀ TANGATA

***Fostering a new approach:
How family-based care meets unaccompanied refugee
minors' rights in Greece***

PARTICIPANT CONSENT FORM

I have read the Information Sheet and have had the details of the study explained to me. My questions have been answered to my satisfaction, and I understand that I may ask further questions at any time.

I agree/do not agree to the interview being sound recorded.

I wish/do not wish to have the transcript of the interview returned to me.

I agree to participate in this study under the conditions set out in the Information Sheet.

Signature: _____ Date: _____

Full name (in print): _____



**Προώθηση μιας νέας προσέγγισης:
Πώς η οικογενειακή φροντίδα αντιμετωπίζει τα
ασυνόδευτα δικαιώματα ανήλικων προσφύγων στην
Ελλάδα**

ΦΟΡΜΑ ΣΥΝΑΙΝΕΣΗΣ ΣΥΜΜΕΤΕΧΟΝΤΟΣ

Έχω διαβάσει το ενημερωτικό δελτίο και μου έχουν εξηγήσει τα στοιχεία της μελέτης. Οι ερωτήσεις μου απαντήθηκαν προς ικανοποίησή μου, και καταλαβαίνω ότι μπορώ να ζητήσω περισσότερες ερωτήσεις ανά πάσα στιγμή.

Συμφωνώ / δεν συμφωνώ με την ηχογράφηση της συνέντευξης.

Επιθυμώ / δεν επιθυμώ να μου επιστραφεί απομαγνητοφώνηση της συνέντευξής μου.

Συμφωνώ να συμμετάσχω σε αυτή τη μελέτη υπό τους όρους που καθορίζονται στο Αρχείο Πληροφόρησης.

Υπογραφή: _____ Ημερομηνία _____

Πλήρες όνομα: _____

Appendix 7: Participant consent form created for focus groups



Fostering a new approach: How family-based care meets unaccompanied refugee minors' rights in Greece

FOCUS GROUP PARTICIPANT CONSENT FORM

I have read the Information Sheet and have had the details of the study explained to me. My questions have been answered to my satisfaction, and I understand that I may ask further questions at any time.

I understand that I have an obligation to respect the privacy of the other members of the group by not disclosing any personal information that they share during our discussion.

I understand that all information I give will be kept anonymous, and the names of all people in the study will be kept confidential by the researcher.

I agree/do not agree to the interview being video recorded.

I agree/do not agree to the interview being sound recorded.

I agree to participate in the focus group under the conditions set out in the Information Sheet.

Signature: _____ Date: _____

Full name: _____

Appendix 8: Transcript release form [English]



***Fostering a new approach:
How family-based care meets unaccompanied refugee
minors' rights in Greece***

AUTHORITY FOR THE RELEASE OF TRANSCRIPTS

I confirm that I have had the opportunity to read and amend the transcript of the interview(s) conducted with me.

I agree that the transcript and extracts from this may be used in reports and publications arising from the research *without changes*.

OR

I agree that the *edited* transcript and extracts from this may be used in reports and publications arising from the research as attached (NB: please attach your edits if you have made changes).

Signature: _____ Date: _____

Full name (in print): _____



MASSEY UNIVERSITY
COLLEGE OF HUMANITIES
AND SOCIAL SCIENCES
TE KURA PŪKENGĀ TANGATA

**Προώθηση μιας νέας προσέγγισης:
Πώς η οικογενειακή φροντίδα αντιμετωπίζει τα
δικαιώματα των ασυνόδευτων ανήλικων προσφύγων
στην Ελλάδα**

Επιβεβαιώνω ότι είχα την ευκαιρία να διαβάσω και να τροποποιήσω τη μεταγραφή των συνεντεύξεων που διεξήχθησαν μαζί μου.

Συμφωνώ ότι η μεταγραφή και αποσπάσματα από αυτή μπορούν να χρησιμοποιηθούν σε εκθέσεις και δημοσιεύσεις που προκύπτουν από την έρευνα χωρίς αλλαγές.

Ή

Συμφωνώ ότι η τροποποιημένη μεταγραφή και αποσπάσματα από αυτή μπορούν να χρησιμοποιηθούν σε εκθέσεις και δημοσιεύσεις που προκύπτουν από την έρευνα όπως επισυνάπτεται (Σημείωση: Παρακαλείστε να επισυνάψετε τις τροποποιήσεις σας εάν έχετε κάνει αλλαγές).

Υπογραφή: _____ Ημερομηνία _____

Πλήρες όνομα: _____



MASSEY UNIVERSITY
COLLEGE OF HUMANITIES
AND SOCIAL SCIENCES
TE KURA PŪKENGĀ TANGATA

***Fostering a new approach:
How family-based care meets unaccompanied refugee
minors' rights in Greece***

CONFIDENTIALITY AGREEMENT

I agree to keep all information concerning this project confidential. I will not retain or copy any information involving this project.

Signature: _____ Date: _____

Full name: _____

Appendix 11: Confidentiality agreement for transcribers



Fostering a new approach: How family-based care meets unaccompanied refugee minors' rights in Greece

TRANSCRIBER'S CONFIDENTIALITY AGREEMENT

I agree to transcribe the recordings provided to me. I agree to keep confidential all the information provided to me. I will not make any copies of the transcripts or keep any record of them.

Signature: _____ Date: _____

Full name: _____

Appendix 12: Interview guideline example: NGO programme staff. Additional guidelines created for fieldworkers, expert contributors and foster carers [not included].

***Fostering a new approach:
How alternative care models in Greece are meeting
unaccompanied minors' rights***

Interview guideline

Purpose

The purpose of this interview is to generate insights into the positive work being done to further care options for unaccompanied minors, and how family-based care protects unaccompanied minors' rights. Data collected in interviews will be used for the purpose of my Master's thesis. Results may be published as a working paper or journal article, and presented at conferences.

Informed consent

Participants will be reminded they are under no obligation to participate and their rights if they decide to proceed with the interview.

If they do decide to participate, they will have the rights to...

- Provide information on the understanding that their name will not be used;
- Ask any questions about the study at any time during participation;
- Decline to answer any particular question;
- Ask for the recorder to be turned off at any time during the interview.
- Withdraw from the interview;
- Make changes to the interview transcript;
- Be given access to a summary of the project findings when it is concluded;

Time will then be allocated to answer any questions about the research project and surrounding processes. Participants will then be asked if they would like time to consider their participation, or if they are happy to proceed.

Timeframe

Interviews will take place between 15 August - 15 September 2018 and last no more than one and a half hours.

Interview guide questions:

Interviews conducted will be semi-structured and as such, the below will serve as a guide only. Additional lines of questioning may be pursued based on participant responses.

Interview type: Semi structured interview Participant type: NGO programme staff Participant code: Interview time: Interview location:	
Research questions: <ol style="list-style-type: none"> 1. How does the UNCRC apply to the care options available to unaccompanied minors in Greece? 2. What social and political processes are influencing the implementation of unaccompanied minors' rights in Greece? 3. How can a local organisation respond to the challenges of meeting unaccompanied minors' rights 	
Question	Link to research questions
Professional background of participant	
Can you please describe your role in the organisation to me? What first made you want to work for this organisation? How long have you worked in this role? Did you do something similar before? Are there any rewards? What about challenges?	Background information to both build rapport, establish level of experience and scope of role.
Programme information	
How many children does your programme currently serve in terms of care provision? How many of those children are currently in family-based care? Do you follow up on these families? How? What kind of support do you offer them?	Discuss key programme information and ease into policy surrounding the support available to unaccompanied minors and consequently, processes for protecting their rights.
Safeguarding policies	
Do you have a child protection / safeguarding policy and communications / privacy policy? Would you allow me to see this?	Gain understanding into programme policies and local interpretations of rights (R1)

<p>Can you talk me through each of these policies?</p> <p>What information do prospective employees who have direct contact with minors required to provide?</p> <p>How do you reference check prospective employees and volunteers?</p>	
Interpretation of the best interests principle	
<p>How do you assess what is in a child's best interests?</p> <p>What do you think are the key considerations when assessing a child's best interests in relation to care options?</p> <p>To what degree do you feel minors' best interests are met in current programming?</p> <p>Are there any challenges? What are these?</p> <p>How are you working to address these challenges?</p> <p>What kind of support does your organisation receive to address the best interests of minor refugees?</p>	<p>The best interests of the child is a central principle of the UNCRC, with questions aiming to uncover local interpretations and practices surrounding the principle (R1) as well as challenges to implementation (R2)</p>
Logics associated with family-based care	
<p>Can you give me some examples of when you think family-based care is the best option?</p> <p>Can you give me some examples of when you it is better for a minor to live outside of family-based care?</p> <p>What is the demographic of unaccompanied minors you work with? Does this have any effect on the care models you provide?</p> <p>How does this the number of children you work with affect your model of care?</p> <p>Can you talk me through the process of deciding if a minor will be supported in family-based care, supported independent living or another model?</p> <p>How central is the minors views in this decision?</p> <p>Is METAdrasi prioritizing investment in one of these particular models? Why has this approach been selected?</p> <p>How do these models support each other?</p>	<p>Aims to both understand the logics surrounding a best interests determination in relation to the care model selected, and how this aligns with principles such as non-discrimination, best interests of the child and prioritisation of family-based care, as well as how different models are being defined (R1). Also looks at how perceptions of these models affect recommendations and personal practice (R2)</p>

Referral and case management of unaccompanied minors	
<p>How are unaccompanied minors selected for or referred to your services?</p> <p>What percentage of referrals are you able to place in family-based care?</p> <p>Have you had situations when you could not place a child in family-based care even though you wanted to? If so, what happened?</p> <p>What systems are in place for those you cannot incorporate into METAdrasi's programme?</p> <p>What other organisations do you work with?</p> <p>What processes do you have in place for managing referrals?</p>	<p>Aims to look at both how the non-discrimination principle is applied and the rights of children protected regardless of if the organisation can care for them in their system (R1). Will also discuss the social and political barriers to placement decisions and how other organisations are collaborated with (R2)</p>
Foster carer recruitment and support	
<p>How are foster families selected and vetted?</p> <p>Do you have set criteria for assessing suitability? Can you describe these to me / can I see this policy?</p> <p>Are police checks conducted?</p> <p>Do you prioritise placement in particular kinds of families?</p> <p>Do you think placement in a family with a similar cultural background or placement with an indigenous family is better for the minor?</p> <p>How are foster families supported following placement?</p> <p>How are these follow-ups structured?</p> <p>Who makes these visits?</p> <p>Is there any other support provided you can think of?</p>	<p>Adequate training and support to foster carers are vital components for safeguarding children, so processes as to how successfully conducted are important to understand the capacity of the programme to protect rights (R1). Also touches on how interpretations of best interests potentially intertwine with social biases and aim to touch on how these interactions are structured to uncover inherent power dynamics (R2)</p>
Ensuring a protective environment	
<p>What kind of issues do you most commonly see within family-based placements?</p> <p>What processes are in place for responding to these issues?</p>	<p>Minors should be provided a safe and protective environment, free from exploitation and abuse. Questions aim to highlight</p>

<p>Why do you think these incidents occur?</p> <p>Are some of these issues serious in your opinion?</p> <p>If so, what is particularly serious?</p> <p>How often do you see incidences like this?</p>	<p>the severity and frequency of issues in family-based care and therefore how the programme is protecting rights in practice (R1).</p>
<p>Programme monitoring and systems of accountability</p>	
<p>Do you have any indicators in place to monitor your programme?</p> <p>If so, what are these indicators?</p> <p>How were these indicators developed?</p> <p>How are these indicators monitored?</p> <p>What learnings you can you share from these evaluations?</p>	<p>Detail processes for monitoring minors' welfare and ensuring rights are protected in practice (R1)</p>
<p>Participation of minors and the right to be heard</p>	
<p>What do the young people say about the family-based care model?</p> <p>How are children's voices integrated into your programming and evaluation?</p> <p>What channels do unaccompanied minors have for feeding back about the programme or raising concerns?</p> <p>What processes are in place for responding to these?</p>	<p>Aim to understand how central are unaccompanied minors' views to programming, and the processes for including their voices (R1) and potential social / power dynamics that may characterise if and how these views are incorporated (R2).</p>
<p>Local challenges</p>	
<p>Why do you think foster care is underdeveloped in Greece?</p> <p>How do you think public opinions on foster care have been shaped?</p> <p>What additional challenges are there for implementing family-based care for unaccompanied minors?</p> <p>How receptive to family-based care for unaccompanied minors have you found the public to be?</p> <p>What strategies of engagement are you finding work the best?</p> <p>How would you describe the local climate to migration</p>	<p>Challenges pertaining to surrounding social and political environments to be discussed (R2). Potential areas for development may also be uncovered (R3).</p>

<p>issues more generally?</p> <p>What do you identify as some of the key political policies or events that have influenced care provision for unaccompanied minors?</p> <p>How did you see these same policies or events affect your work directly?</p> <p>And how have you seen these policies or events affect care provision more generally?</p>	
Entry points for action	
<p>What is your strategy for furthering access to family-based care?</p> <p>What are the areas you need support in the most to make this happen?</p> <p>What do you see as the biggest challenges to implementing family-based care and why?</p> <p>How do you attempt to address these challenges in your model?</p> <p>What advocacy activities are you currently involved in?</p> <p>Are you doing any advocacy work on the policy level?</p> <p>What is the strategy behind this?</p> <p>What successes have you had so far?</p> <p>What are your biggest challenges in regards to advocacy work?</p> <p>Does your programme currently receive any state support?</p> <p>If not, why do you think this is?</p> <p>If so, what parts of your work have you received support for?</p>	<p>Explore how the organisation is responding to local challenges and learnings on their activities (R3)</p>
Is there anything you would like to add?	Open

***Fostering a new approach:
How alternative care models in Greece are meeting
unaccompanied minors' rights***

Focus group guideline

Purpose

The purpose of this focus group is to generate insights into how young people would structure the care system, and uncover the rights they associate with different models.

Timeframe

Focus groups will take place between 16 July - 17 August 2018 and last no more than one hour.

Prompt questions:

I will take a moderator role in this interview. The below will serve as a guide only. Additional or different prompts may be appropriate based on participant responses.

Interview type: Focus group

Participant type: minor

Participant code:

Interview time:

Interview location:

Welcome:

Thank you for agreeing to participate in this discussion about care models available to unaccompanied young people in Greece. My name is Liselle and I am a student completing a Masters of International Development with Massey University in New Zealand. In my research I am interested in how young migrants are being cared for. I also am looking at different options of care, for example, foster care with families, homes that host small or large groups. And I am interested in how young people's needs and rights are met with these different models of care.

As people who have experienced care in Greece, you are the experts and I want to make sure your views are central to my research. I am going to ask you questions about how you would structure care for other young people arriving in Greece, what you think does and does not work, and how you think needs and rights are met under different models. I am here to moderate and help keep things on track.

I want you to know your identity will be protected in this study. I will not be using your name or any identifying details. If you like, you can choose a different name

yourself to be used in the research. Please note, this research is independent of METAdrasi and I will not be identifying you have said unless I believe you are at risk of harm.

With your permission, I will also be recording the session, so please speak clearly, try to voice everything and try not to speak over each other.

You are welcome to decide not to participate at anytime, or choose not to answer a question. You do not need to tell me why. If you would like a break at any time throughout the session, I have set up an area in [x location] with drinks and snacks.

Do you have any questions so far?

Please take a moment to have a think if you would like to participate. If you don't think you would like to right now, then please feel free to go and have a break over at [snacks location] or let myself or [research assistant] know you would prefer not to. Please feel free to talk amongst yourselves for the next few minutes.

[use time to individually approach participants and see if they have any questions they might not have been comfortable asking in front of the group, reaffirm they do not have to participate and confirm they would like to participate]

Are you happy to continue now? [ensure confirmation from each participant].

Let's start by introducing ourselves before we start recording. I will then tell you more about the research and what we're doing today. I will then ask you to introduce yourself on the recording stating only your age and your country of origin, if you want to choose your own pseudonym you can also say this now.

[Personal introductions take place]

[Voice test recorded including age, origin and pseudonym]

Introduction to the session

Today I want you to reflect not only on the models of care available in Greece, but what they could be.

Please imagine you are the person planning the kind of reception a young person would receive when arriving in Greece – and the kinds of support you think will best meet their needs.

Let's start by discussing the different models you might choose and some of their key characteristics.

Poster shown [to be translated as required]:



Question / prompt outline

Kreuger's (2000) categories	Questions	Corresponding research question(s)
Opening question	<p>Would you add or change anything to the definitions shown here?</p> <p><u>Sub questions</u></p> <p>What do you think is a small group home and what is a large one?</p> <p>What do you think the child/young person to carer ratio should be?</p> <p>Do you think a person living independently needs support? What kind?</p> <p>Describe the kinds of families you think would be best?</p>	<p>Involve minors in discussing the defining elements of different models and contribute to discourse understandings. Questions also aim to gain insight into their logics for these definitions.. Correlate with organisation's own approaches to see how well minors' perceptions fit with their own definitions of models and corresponding support needs (R2)</p>
Introductory questions	<p>What words come to mind when you think of rights?</p> <p>Note: Rights / needs described written on post-it notes with a freehand picture depicting what it is</p>	<p>Gauge understanding of rights and prioritization / interpretation of those rights. Correlate with organisational findings (R1) to also uncover</p>

	<p><u>Sub questions</u></p> <p>What specific needs do you think the young person arriving in Greece will have?</p> <p>Give prompts on certain rights if/where needed:</p> <ul style="list-style-type: none"> - What should they be free to be able to do? - Is it important to listen to what the young person wants or decide what's best for them? - What other services do you think they should be able to access? - What should a home be? - What kind of words would you use to describe a happy home - 	potential entry points for action (R3)
Transition questions	<p>How would you decide which model of care is best for young people arriving in Greece?</p> <p><u>Sub questions</u></p> <p>What words come to mind when you think of [living with a family / living alone but having support / living in an institution]</p> <p>What do you think are the advantages and disadvantages of each model of care?</p> <p>What is the ideal model to you and why?</p>	Explore logics underscoring model selection and constructions of what that ideal model looks like (R1). Look for possible parallels in ideal constructions / advantages and disadvantages to METAdrasi / family-based care (R3)
Key questions	<p>Which model would you place each of the rights you previously discussed on?</p> <p>[List one-by-one, place on poster]</p> <p><u>Sub questions</u></p> <p>How do you think [model] meets [each associated right]?</p>	Explore appropriateness of different models from a rights based perspective by understanding the logics and linkage of rights to these models (R1)
Key questions	<p>How do you feel about the care you have received through METAdrasi?</p> <p><u>Subquestions</u></p>	Insight into how minors feel rights are being met in relation to the organisation and their

	<p>What rights you mentioned above do you feel are being met?</p> <p>Are there any others?</p>	<p>experiences of family-based care (R1) to also explore how well organisation has implemented rights in its own programming (R3)</p>
Ending question	<p>How would you make the care system in Greece better?</p> <p><u>Sub questions</u></p> <p>What are the good things you would include?</p> <p>What are the bad things you would want to address?</p>	<p>Understanding of how care would be ideally provided from the view of refugee minors and why and how this corresponds to the models provided (R1).</p>

Closing

Is there anything else you would like to add you don't think we discussed today?

Thank you so much for sharing your views with me. You've taught me a lot and I hope this was an interesting discussion for you also. I will share a summary of my findings with you at the end of the research.

It's been a pleasure to meet you all and I look forward to sharing more with you on this research soon.

Appendix 14: Online questionnaire for unaccompanied minors

Preamble:

Fostering a new approach: How alternative care models in Greece are meeting unaccompanied minors' rights

Greetings,

My name is Liselle and I am a student completing a Masters of International Development with Massey University in New Zealand. My research is about care models available to unaccompanied young people in Greece, and these meet young people's rights and needs.

As someone who have experienced care in Greece, I would like to invite you to participate in this study as an expert on the local situation. Your insights and contributions to the research would be greatly appreciated. Areas this questionnaire covers include: how you would structure care for other young people arriving in Greece, what you think does and does not work, and how you think needs and rights are met under different models. Your information will be handled carefully and treated with confidentiality.

You are under no obligation to participate. If you decide to participate you will have the rights to...

- Provide information on the understanding that your name will not be used;
- Ask any questions about the study by emailing me on [REDACTED]
- Decline to answer any particular question;
- Be given access to a summary of the project findings when it is concluded

Data collected in interviews will be used for the purpose of the Masters thesis. Work may be published as a working paper or journal article, and presented at conferences.

By proceeding with the questionnaire you are confirming you consent to participation.

Thank you so much for your valuable insights! If you have any questions, please contact me or my supervisors on the following details:

Liselle Finlay (Researcher)

Master of International Development student, Massey University

Email: [REDACTED] / Phone NZ: [REDACTED] / Phone Greece: TBA

Dr Maria Borovnik (Supervisor)

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Email: M.Borovnik@massey.ac.nz / Phone: 06 – 356 9099 ext 83643

Dr Sharon McLennan (Co-Supervisor)

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This project has been reviewed and approved by the Massey University Human Ethics Committee: Southern B, Application 18/33. If you have any concerns about the conduct of this research, please contact Dr Gerald Harrison (Acting Chair), Massey University Human Ethics Committee: Southern B, telephone 06 356 9099 x 83570, email humanethicsouthb@massey.ac.nz

Questions:

Question	Question type
What words come to mind when you think of rights?	Open
What specific rights or needs do you think need to be considered when choosing a care option for young people arriving in Greece?	Open
How would you rate the care received when you arrived in Greece?	Scale [1-10]
Why did you select this rating?	Open
What kinds of care have you been able to access since arriving in Greece?	Multi-choice: Models with brief descriptors listed. Includes 'other' option
What do you think care providers are doing well?	Open
What do you think care providers could do better?	Open
How old are you?	Open
What is your gender?	Open
How long have you been in Greece?	Open
Is there anything you would like to add?	Open

Concluding page:

Thank you so much for your contribution to this research! If you have any additional comments, feedback or would like to receive a link to read the study once it is complete, please email me on [REDACTED].