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Forced repatriation of unaccompanied asylum-seeking refugee children

– Towards an interagency model

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Abstract

Introduction Not all children seeking asylum without parents or other relatives are entitled to residence permits. In the last few years, more than one in four unaccompanied asylum-seeking refugee children have been forced to repatriate, either to their home country or to a transit country. Mostly the children refuse to leave the country voluntarily, and it becomes a forced repatriation. Five actors collaborate in the Swedish child forced repatriation process: social workers, staff at care homes, police officers, Swedish Migration Board officers and legal guardians. Social workers and police officers have a legal responsibility for the children until the last minute before they leave Sweden. That makes them key actors in forced repatriation, as they carry most of the responsibility in the process. Further, they often work with children who are afraid what will happen when they return to their home country and often express their fear through powerful emotions. Being responsible and obliged to carry out the government's decision, despite forcing children to leave a safe country, may evoke negative emotional and mental stress for the professionals involved in forced repatriation. The overall aim of this study is to explore and analyse forced repatriation workers' collaboration and perceived mental health, with special focus on social workers and police officers in the Swedish context.

Materials and methods The study combines a qualitative and quantitative research design. First, a qualitative case study methodology was used in one municipality in a middle-sized city in Sweden. Semi-structured interviews were conducted with a total of 20 social workers, staff at care homes, police officers, Swedish Migration Board officers and legal guardians. A thematic approach was used to analyse the data. Second, a national survey of social workers ($n = 380$) and police officers ($n = 714$), with and without experience of forced repatriation, was conducted. The questionnaires included sociodemographic characteristics, the Swedish Demand-Control Questionnaire, Interview Schedule for Social Interaction, Ways of Coping Questionnaire and the 12-item General Mental Health Questionnaire. Factor analysis, correlational analysis, and univariate and multivariable regression models were used to analyse the data.

Results The qualitative results showed low levels of collaboration among the actors and the use of different strategies to manage their work tasks. Some of them used a teamwork pattern, and were willing to compromise for the sake of collaboration. Others tended to isolate themselves from interaction and acted on the basis of personal preference, and some tended to behave sensitively, withdraw and become passive observers rather than active partners. The quantitative results showed that poorer mental health was associated with working with forced repatriation among social workers but not among police officers. Psychological job demand was a significant predictor for mental health among social workers, while psychological job demand, decision latitude and marital status were predictors among police officers. Furthermore, both social workers and police officers reported relatively high access to social support. Social workers used more escape avoidance, distancing and positive-reappraisal coping, whereas police officers used more playful problem solving and self-controlling coping.

Conclusion In order to create the most dignified forced repatriation, for unaccompanied asylum-seeking refugee children and with healthy actors, a forced repatriation system needs: overall statutory national guidance, interagency collaboration, actors working within a teamworking pattern, forced repatriation workers with reasonable job demands and decision latitude, with a high level of social support and adaptive coping strategies. The point of departure for an interagency model is that it is impossible to change the circumstances of the asylum process, but it is possible to make the system more functional and better adapted to both the children's needs and those of the professionals who are set to handle the children. A centre for unaccompanied asylum-seeking refugee children, consisting of all actors involved in the children's asylum process sitting under the same roof, at the governmental and municipality level can meet the requirements.

Keywords collaboration, coping, forced repatriation, interagency collaboration, mental health, social support, social workers, Sweden, police officers, psychosocial job characteristics, unaccompanied asylum-seeking refugee children

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