

# The Impact of Placement Type on Educational and Health Outcomes of Unaccompanied Refugee Minors

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The full journal article is free online: O'Higgins, A., Ott, E. M., & Shea, M. W. (2018). What is the Impact of Placement Type on Educational and Health Outcomes of Unaccompanied Refugee Minors? A Systematic Review of the Evidence. *Clinical Child and Family Psychology Review*. <http://doi.org/10.1007/s10567-018-0256-7>

Unaccompanied refugee minors are defined here as young people under the age of 18 who are outside of their country of origin, unaccompanied by a parent or customary caregiver and who have undertaken forced migration. This includes those fleeing violence and those who have been trafficked.

Record numbers of unaccompanied refugee minors have been arriving in high-income countries in recent years. In 2015, 95,205 asylum applications were

recorded for unaccompanied or separated children in European countries. Many unaccompanied refugee minors have complex needs and often suffer from mental health problems which result from experiences of war and violence. To ensure the best outcomes for unaccompanied refugee minors, care strategies should be based on evidence.

**This systematic review examines the evidence on the relationship between placement (accommodation) type and the educational and health (physical and mental) outcomes of unaccompanied refugee minors. It explores whether the type of placement they are offered plays a role in mitigating the effects of forced migration and improving outcomes.**

## Call to Action

### Policy and practice

- Note that unaccompanied refugee minors often suffer from poor mental health, and rates may be higher for those not placed in family foster care
- Focus on ensuring that the educational, mental health, and physical health needs of these young people are met
- Invest in the provision and quality of all placement types until more conclusive evidence can be reached on the best type of accommodation for unaccompanied refugee minors
- Reconsider how foster carers are recruited to ensure that more ethnically or culturally matched carers are available, ensure all carers are culturally sensitive, and expand the provision of culturally adapted social activities

### Research

- Design more longitudinal, experimental, and quasi-experimental studies to examine impact
- Examine physical health and educational outcomes
- Further explore how to improve outcomes in placement, whether through better matching with placement type or foster family, through everyday practices, or through targeted interventions

## What did we do?

We completed a systematic review and meta-analysis of the evidence on the relationship between care placement type and the educational, mental health and physical health outcomes of unaccompanied refugee minors. We searched ten databases and identified 3,877 citations, which were screened for inclusion. Nine studies were included in the final review, with seven included in the meta-analysis. Eight studies examined the link between accommodation type and mental health outcomes, and two analysed the relationship between accommodation type and education. There were no studies looking at physical health outcomes.

## What did we find out?

### **Mental health varied by accommodation type**

In general, young people living alone or in large-scale detention centres had worse mental health than young people living in family foster care, with relatives, or in other placements with dedicated support. Our exploratory meta-analysis found overall better mental health for unaccompanied refugee minors in family foster care compared with those in other types of accommodation (standard difference in means of 0.33,  $p=0.027$ ). This may be because family foster care improves mental health or because those with better mental health are more likely to be placed in family foster care.

### **Youth living with people from the same ethnic background had better mental health**

Geltman et al. (2005) found that unaccompanied refugee young people living in group homes with youth from the same ethnicity fared better than peers living in foster care with white American families. Porte and Torney-Purta (1987) found that youth living in ethnically matched foster families had better mental health and educational outcomes than children placed in non-ethnically matched homes.

### **Educational outcomes may be better for young people in family foster care**

Kalverboer et al. (2017) found that minors in family foster care were more likely to attend an ordinary Dutch school than those in living units, living groups, or campuses and had a better subjective judgment on the quality of education than those in campuses. Porte and Torney-Purta (1987) found that minors in ethnically matched family care had better grade point averages than those living with white American families. Qualitative research has documented the ways in which foster carers connect unaccompanied refugee minors with academic opportunities.

### **The evidence is weak**

All studies were based on observation, and none used randomization or other quasi-experimental methods better designed to determine the effects of accommodation decisions. Measures could also be improved.

## Further information

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Find out more about Rees Centre research on unaccompanied asylum-seeking children in foster care

<http://reescentre.education.ox.ac.uk/research/unaccompanied-asylum-seeking-children-in-foster-care/>

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