



Presidency of Italy
Council of Europe
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Présidence de l'Italie
Conseil de l'Europe
Novembre 2021 - Mai 2022

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National Institute for Health
Migration and Poverty

AGE ASSESSMENT OF UNACCOMPANIED MIGRANT CHILDREN: promoting a human rights and multidisciplinary approach

VALUTAZIONE DELL'ETÀ DEI MINORI STRANIERI NON ACCOMPAGNATI: promuovere un approccio multidisciplinare e rispettoso dei diritti umani

30 March 2022 - 30 marzo 2022

Hybrid meeting - Riunione ibrida

INMP, Via di San Gallicano 25/a - 00153 Rome, Italy

Age assessment of unaccompanied migrant children in the broader context of child health

Jozef Bartovic, Technical Officer, WHO

- Broader context of child health
- Assessment of healthcare needs of newly arrived migrant and refugee children
- [WHO EURO Technical Guidance on Health of Refugee and Migrant Children](#)

Technical Guidance-key findings

- Around 20% of the asylum-seeking children in the EU during recent years have arrived unaccompanied by an adult caregiver, most of them boys aged 15–17 years on arrival
- The majority of EU Member States rely on medical examinations, primarily in the form of radiograph of the hand/wrist, collarbone and/or teeth, magnetic resonance imaging
- Factors such as individual variation in age-specific maturity in later teenagers, and unknown variations between children from high- and low-income countries, make these methods unreliable
- Effective, reliable and human rights-based mechanism for estimating the age of a person is a critical step to secure that children can benefit of the specific measures designed to protect their rights
- Complex and at times intimidating age assessments are frequently the first experience children have in the country of destination

Age assessment of UAMs

- Medical procedures "must-s"
- Children's right to participate includes access to child friendly information, procedures, advice and legal representation. It also includes access to spaces and opportunities to influence the design, implementation and evaluation of policies affecting them.
- The best interest of the child principle must be integrated into the age assessment policy and implemented during age assessment procedures

Key policies to promote good health and well-being



Prevailing challenges for public health authorities

- National guidance and protocols missing
- Variability of practices, ad hoc procedures being implemented
- Country specific context, current situation
- Broader issues should not be forgotten (quality of shelter, education, child protection. etc...)
- Vulnerable sub-groups
- Detention and treatment of age-disputed children
- Dedicated pathways for UAMs in the reception system