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Getting it Right? The role of children's services with families with precarious immigration status.

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Abstract

This thesis describes a qualitative exploratory study examining the wellbeing of children in families where members have precarious, unsettled or uncertain immigration status. These families are subject to a range of competing, even contradictory policy provisions – hostile, colonial immigration policy, an apparently more supportive devolved approach to migration and to child wellbeing – and actors at multiple levels (reserved, devolved and localised). Through interviews with parents and third sector practitioners and eco-mapping approaches with children, all in Scotland, the project explores the wellbeing impacts of precarious status and the key sources of support for families. Adapting anticolonial critiques of migration policy and Bourdieu's capitals, it explores how the immigration system systematically prevents the accumulation and conversion of important resources that might be mobilised into economic, social, cultural and emotional capitals. Family life occurs in a site of nonbeing and necropolitical exception where routes to wellbeing are closed off because of status. The study finds several impacts: extreme material deprivation; temporal uncertainty and hypermobility; pressures towards isolation; and lives patterned by ontological insecurity. These have significant impacts on parents' and children's mental health and emotional wellbeing, social networks, sense of belonging and ability to construct liveable lives. The study then uses the candidacy framework of Dixon-Woods et al (2005) and Honneth's (2004) recognition theory to explore interactions between family members and services. Capital dynamics in services lead to inaccessibility, inadequate responses and feelings of discrimination, hostility and exclusion. The existence or presentation of a need is not sufficient for it to be met; instead, persistence, advocacy and crises are required to secure support from services poorly aligned to families' circumstances. Throughout, the thesis describes tactics and strategies used by family members to resist nonbeing, accumulating and mobilising resources to support wellbeing and a more liveable life.

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Contents

List of figures

List of abbreviations

ACEs	Adverse Childhood Experiences
EHRC	Equalities and Human Rights Committee
ESOL	English for Speakers of Other Languages
GIRFEC	Getting it Right for Every Child
HAC	Home Affairs Committee
HSCP	Health and Social Care Partnership
JCHR	Joint Committee on Human Rights
JST	Joint Support Team
LLR	Limited Leave to Remain
NASS	National Asylum Support Service
NHS	National Health Service
NRPF	No Recourse to Public Funds
PEF	Pupil Equity Funding
PTSD	Post-Traumatic Stress Disorder
RTA	Reflexive Thematic Analysis
S22	Section 22, Children (Scotland) Act 1995
S4	Section 4, Immigration and Asylum Act 1999
S95	Section 95, Immigration and Asylum Act 1999
SHANARRI	Safe, Healthy, Active, Nurtured, Achieving, Respected, Responsible, Included – wellbeing indicators within GIRFEC
UNCRC	United Nations Convention on the Rights of the Child

Chapter 1: Introduction and Background

This thesis explores the lives of migrant families in Scotland whose members have unsettled, uncertain and precarious immigration status, and the role that different services in public, private and third sector play in supporting them. Through in-depth, qualitative interviews with parents, children and third sector practitioners, the research considers the following questions:

1. How is child wellbeing considered by the various actors involved with families with precarious immigration status – families themselves, public sector professionals and support organisations?
2. How is child and family wellbeing affected by immigration status?
3. What place do services have in supporting wellbeing under these circumstances?
4. What happens when families need extra support – how and when do they approach services, and how do services respond?

This introductory chapter outlines the rationale for the research and locates in the context of policy and political developments relevant to migrant children and their families.

Who is this research about?

This project explores the wellbeing of children and families where family members have precarious, uncertain, or unsettled immigration status. The boundaries between migrants and non-migrants are difficult to define (Candappa 2019), and oft-used categories of refugee, asylum-seeker, undocumented or (il)legal migrant are problematic. These terms contain value judgements and are examples of "categorical fetishism" (Crawley and Skleparis 2018, p. 49) or "black boxing" (Bailey 2009, p. 410); definitions created to distinguish, divide and discriminate between different types of movement. They do not account for the realities of migration - how people move in steps, stages and cycles, often between spaces and forms of status over time (Crawley and Skleparis 2018; Moskall and Tyrell 2016; Sheller and Urry 2006). A person might never claim asylum but still have a fear of violence or oppression; similarly, a household may contain people with different forms of status, or children who have never migrated but are still considered migrants (Griffiths 2021; Sigona and Hughes 2012). Using these categories without question would be a form of "methodological nationalism" (Wimmer and Glick-Schiller 2002, p. 217), recreating ideas of states as stable, self-contained, spaces of sedentary citizens disrupted by certain kinds of movement (Anderson 2019). Through a process of "migrantisation" (ibid, p. 2), people are defined and positioned as migrants, rendered problematic and subjected to specific government practices.

Research in migration should focus on how these different terms and labels connect to regimes of power with impacts on rights, entitlements, identities, relationships and, ultimately, on wellbeing. To explore whether the experience of being migrantised had common effects despite the diversity of individual biographies, trajectories of movement and forms of immigration status, this thesis required a definition that accounted for both unity and diversity. Sigona and Hughes (2010; 2012) argue that terms like "irregular migrant", while encompassing a broader range of people, similarly contribute to ideologies of ordered/legitimate and disordered/illegitimate movement (also Bloch et al 2009; 2011). They propose "undocumented-ness" as a…

> "…non-homogeneous status to which different levels of access to rights and entitlements can be attached, as well as obligations and levels of deportability." (Sigona and Hughes 2010, pp. 11-12).

However, many family members in my project had documents, but still experienced difficulties related to impermanence. Other authors use "deportability" to encompass anyone at risk of physical removal (De Genova 2002; 2013). I chose instead to focus on *precariousness*, which refers to:

> "The absence of any of the following elements normally associated with permanent residence…(1) work authorization, (2) the right to remain permanently in the country (residence permit), (3) not depending on a third party for one's right to be in [country] (such as a sponsoring spouse or employer), and (4) social citizenship rights available to permanent residents (e.g. public education and public health coverage)." (Goldring et al 2009, pp. 240-241)

The families discussed in this research have been migrantised in ways that render their immigration status unsettled, uncertain or precarious. This provides space to critically appraise how the state uses different forms of migration status, while exploring how status acts as part of the structure within which people live their everyday lives (Castles 2010).

Rationale

While there has been growing interest in children's migration in policy, research and public discourse, often this is related to the ways in which their lives and experiences deviate from hegemonic, normative ideas of childhood (Bailey 2009). Fass (2005) argues that mobility in childhood transgresses norms of childhood as a space of stability and residential stability, innocence and dependence (also White et al 2011). The wrong types of movement make children visible in ways that are problematic, creating concerns

about their wellbeing and vulnerability, or about wider society and the social order (Bailey 2009; Sheller and Urry 2006).

Most visible are children whose movement is most transgressive, as they travel independently - unaccompanied refugee children, trafficked children or children who move independently for other reasons. Research and policy attention has been paid to the needs, experience, care and support of unaccompanied and separated children in the asylum system (Chase et al 2008; Chase 2010; 2013; Groark et al 2011; Hopkins and Hill 2008; 2010; Kohli 2006; 2007; Rigby et al 2018), or of children who have been trafficked (Rigby et al 2020; Stanley et al 2016). These children might be positioned as vulnerable, but also as threatening, visible in narratives around risk posed by "bogus adults" pretending to be unaccompanied minors (Sirriyeh 2014, p. 72; Crawley 2011; Crawley and Rowlands 2007). Research critiques the ways in which these children are othered and positioned as transgressive, troublesome or different from other children by focusing on their agency and experiences (Chase 2010; Kohli 2006; Ni Laoire et al 2010 2012). Other approaches seek to normalise mobility as a part of childhood for all children, or to explore contexts where children's independent migration is an expression of agency within circumstances that make it socially and culturally acceptable (Hashim 2005; 2007; Torsten and Hashim 2011).

Children who travel within families have not received equivalent attention; they remain "unseen (with) their stories untold" (Raghallaigh 2018, p. 22). Children in families are often reduced to "luggage" (Orellana et al 2001, p. 572), "appendages" (Kanics 2016, p. 18), "extensions of their parents" (Sigona and Hughes 2010, p. 18), or "things transported by adults" (Dobson 2009, p. 356). The UK-based research that does focus on children within families is typically focused on England where law, policy and institutions around migrant childhoods differ from those in Scotland (e.g. Bloch et al 2009; Dexter et al 2016; Dickson 2019; Jolly 2018a, 2018b; Sigona and Hughes 2010; 2012). Existing research in the UK context also predates several significant changes in immigration law (particularly the 2014 and 2016 Immigration Acts). This project aims to provide a localised, contextualised understanding of the wellbeing of children in families in Scotland to address these gaps.

The research is also rooted in my own professional experiences. I wrote my Masters thesis on social work age assessments of unaccompanied children, gaining an initial understanding of the problematic intersections between migration, child wellbeing and children's services (Lindsay 2019). I then joined a collaborative research project, focused on policy attempts to produce "seamless" children's services. During an absence from

this project, I began working with a large refugee support organisation, working with individuals and families with complex needs. I witnessed the harms of the immigration system, but also saw harms caused by the policies and services designed to provide support and care. I saw too how children and parents navigated these systems to build their lives, and the positive role of some services in making those lives better. I felt that I was in a unique position to bring insight into these areas, to explore the seams between immigration policy, wider social policy, and children's wellbeing. Carrying out research while working as an advocate and source of support required careful reflection and reflexivity (Fox et al 2007; Lunt and Fouché 2010), discussed further in the methodology chapter. Now, I turn to the policy context to provide important background for what follows.

Policy context

Migrant children and families are subject to several policy streams incorporating *immigration* policy, - the rules governing who may enter and remain in a country - and *immigrant* policy which governs how other areas of social policy – health, education, social welfare - apply to migrants (Mulvey 2018). Literature on children and migration often identifies tension, and even outright contradiction, between policy ideas designed to protect and support children, and restrictive or hostile policies related to immigration (Crawley 2007; Giner 2007; Hardwick and Hardwick 2015; Hek et al 2012). Immigration and immigrant policies are also "transversal" (Mulvey 2018), incorporating supranational, national, devolved and local government and a range of non-governmental actors. While immigration is reserved to the UK government, policies in health, education, social care and other key areas are devolved to the Scottish Government and local authorities. Huijsmans (2011, p. 1314) argues that research on children's mobility and wellbeing must be mindful of this "interpenetration of scales" and explore interactions between factors from the transnational to the local to the individual. This section explores tensions between reserved immigration policies and devolved child and family policies, but also points of coherence that render both problematic spaces for migrant children and their families.

Immigration policy and coloniality

Anticolonial perspectives on migration have argued that colonising states use immigration systems to continue colonial modes of government (El-Enany 2020; Grosfoguel et al 2015; Gutiérrez Rodríguez 2018; Mayblin 2014; 2019a; 2021). This "coloniality of power" (Quijano 2000 p. 216) is evident within systems of inclusion and exclusion that are institutionalised within law and policy. Through categorical fetishism, some categories of migrant are positioned as legal, legitimate and deserving; others are

illegitimate, undeserving and illegal (Crawley and Skleparis 2018). The anticolonial perspective argues that these categories are rooted in a "colonial, racially and culturally hierarchical worldview" (Mayblin 2021, p. 26) and "a practical regime of differential humanity" (Mayblin 2019, p. 173) where colonial populations are granted a lesser humanity, even dehumanised entirely. Racialisation and ethnicity are central here, but colonial power also contains significant class-based, gendered and age-related hierarchies and stratifications (Grosfoguel et al 2015; Kotouza 2018). The presence of 'non-human' colonised people in colonising states represents a form of "contamination" that must be managed, even removed, through punitive action (Kalir 2019).

Theorists outside the anticolonial tradition have explored how migrants or refugees become the justified target of state violence. For Agamben (2020, np), the refugee figure is a "disquieting element" for state, nation and sovereign power whose presence is tolerated through inclusion by exclusion; physically permitted but subjected to neglect and harm. By positioning migration as a crisis, a "state of exception" (Agamben 2005) emerges where regular norms of government might be suspended, and the refugee subjected to "bare life" – reduced to a rights-less biological entity who can justifiably be subjected to violence and neglect, or even killed (Agamben 2000, p. 16; Kotouza 2018).

For Butler (2009), all life is precarious; the question is in how precarity might be worsened, maintained or alleviated by government action. Some categories of migrant are forced into "unliveable life" (2004, p. 39); their lives are not recognised as lives and thus their "loss is no loss":

> "Such populations are "lose-able" precisely because they are framed as being already lost or forfeited; they are cast as threats to human life as we know it rather than as living populations in need of protection…When such lives are lost they are not grievable since…the loss of such populations is deemed necessary to protect the lives of "the living.""

Anticolonial extensions of these approaches argue that state processes that produce bare, unliveable lives need to be placed in the historical context of coloniality (Danewid 2017; Davis and Isakjee 2019; Kotouza 2018). Migrant children and their families are placed below an "abyssal line" (De Sousa Santos 2007 pp. 45-46) separating those granted full humanity from those considered less-than-human. Fanon (1967) argues that colonial power separates the world into a zone of being - occupied by those granted full humanity, permitted access to freedoms, rights and equality – and a zone of nonbeing where racialised and colonised populations are denied humanity individually and collectively, subjected to violence, oppression and dispossession (see also De Sousa

Santos 2007; Grosfoguel 2012; et al 2015). For Mayblin (2021, p. 29) this influences who is migrantised and how:

> "Above the line of the human…movement across borders is unconstrained, they have access to human rights, and racial privilege…Those in the zone of non-being are racialized as inferior, are the subject of policies of geographical containment, and do not have access to the full suite of human rights."

Fanon describes the application of categories, classifications and delineations to be part of colonial domination, acts of reductionism akin to the categorical fetishism outlined above (see Garrett 2021). Mbembe (2003, p. 40) argues that the form of power displayed in coloniality is *necropolitical* – power that reduces racialised populations to "conditions of life conferring upon them the status of living dead" (see also Bhatia 2020a; Mayblin 2017). By removing the conditions through which a person might be permitted to live, life is made bare and unliveable, and death becomes a natural extension of state power (Fanon 2003). Farmer (2021) argues that this "necropolitical exception" is at the heart of the UK immigration system.

This perspective supports a historically contextualised exploration of the "vulnerabilisation" (Anderson 2012; Lind 2019a) or "precaritisation" (Squire 2021, p. 141) of migrant people by immigration regimes and structures. Vulnerability is not a quality of migrants themselves; it is "bestowed upon them" by systems that undermine their ability to survive and build a liveable life (Lind 2019a p. 342). The Platform for International Cooperation on Undocumented Migrants (PICUM; Bicocchi and LeVoy 2008, p. 6) refers to undocumented children possessing a "triple vulnerability" – as children, as migrants, and undocumented (see Sigona and Hughes 2010); more accurately, children are multiply vulnerabilised, a consequence of being marginalised as children and being migrantised within a colonial system of differential humanity.

Coloniality in policy and practice

The UK's migration system has been described as complex and incoherent - "an impenetrable jungle of intertwined statutory provisions and judicial decisions" (Supreme Court cited in York 2018, p. 16). Yet there are threads, traces and patterns that provide some coherence and a context for this research. This section focuses on policy developments in the late 20th and early 21st centuries, particularly those around refugee and asylum law and those governing so-called "illegal" migrants. It explores how "welfare chauvinism" (Guentner et al 2016, p. 391) and "everyday bordering" (Yuval-Davis et al 2019) are central to law and policy around migration. There exists a complex relationship between migration policy and concepts of child welfare, wellbeing and best interests that

govern policy and practice towards children in general – a relationship marked by tension, outright conflict and points of coherence.

The last 30 years have seen a significant growth in both immigration and immigrant policies that have institutionalised lives in nonbeing for migrantised children. Children's welfare, wellbeing and best interests are subsumed by immigration control priorities; children treated as migrants first and children second (Crawley 2007; Giner 2007; Hardwick and Hardwick 2015; Hek et al 2012; Sigona and Hughes 2012). Upon signing the United Nation Convention of the Rights of the Child (UNCRC) in 1991, the UK submitted reservations against article 22, which requires that states provide "appropriate protection and humanitarian assistance" to asylum-seeking and refugee children. The reservation states that the UK…

> "... reserves the right to apply [the CRC] insofar as it relates to the entry into, stay in, and departure from the UK of those who do not have the right under the law of the UK to enter and remain…" (cited in Crawley and Rowlands 2007, p. 7)

Faulkner and Nyamutata (2020) argue that reservations were applied only by European states against postcolonial states, demonstrating the continued coloniality of power.

This reservation was later replaced by S55 of the Borders, Citizenship and Immigration Act 2009, which requires that any immigration body must "carry out its existing functions in a way that takes into account the need to safeguard and promote the welfare of children in the UK" (UK Visas and Immigration, n.d p. 3). Children's welfare is "a primary, although not the only consideration" (ibid, p. 3) – far from the paramountcy afforded to children's welfare and best interests by child-specific legislation such as the Children (Scotland) Act 1995 (Hardwick and Hardwick 2015; Hek et al 2012). As the UK Parliament's Joint Committee on Human Rights (JCHR 2015, s.152) argues, "the Home Office seems still to prioritise the need to control immigration over the best interests of the child" in their policies and practices. Concepts of wellbeing, welfare and best interests are ignored or "adapted" to fit immigration priorities, with the courts frequently finding the government acting unlawfully in their duties around children's best interests (Giner 2007, p. 257; Brittle 2020). Migrantised children are "children of exception" (Meloni et al 2014, p. 305), considered in policy in ways that make them *less* than their non-migrant counterparts. Theirs are lives not recognised as lives; in many respects, they lack the "right to have rights" (Bhabha 2009, p. 410) because they do not fit accepted categories of rights-bearing citizen children.

Asylum policy and welfare chauvinism

Asylum and refugee law is a significant space for the institutionalisation of differential humanity and necropolitical exception. The International Refugee Convention itself can be understood as an expression of colonial self-interest; a means of managing the movement of people in the name of security and sovereignty, where supposedly inalienable rights are in reality granted and guaranteed by states according to their own prerogatives (Arendt 1968; Bhabha 2009; Mayblin 2014). The convention, and the laws emanating from it, have been criticised for ideological understandings of relationships between states and populations, systematically excluding certain persons from international protection (women, children/young people, LGBT communities) (e.g. Anker 2010; Bhabha 1996; Crawley 2000; 2001; Giametta 2017; Redcay et al 2019).

Refugee policy in the UK orients around ideas of authenticity, deservingness and threat. While government statements frequently speak of a "proud history" of protecting "genuine" refugees (Parker 2019, p. 23), this legitimises ill-treatment of unwelcome, "bogus", criminal and threatening asylum-seekers who endanger "social and community cohesion, the welfare state, the sustainability of the labour market, cultural and racial identity, etc" (Huysmans and Buonfino 2008, p. 26). Through the late 1990s and 2000s, policy attention focused on apparent "pull factors" encouraging these illegitimate migrants - access to work, social welfare provisions, healthcare and other social, civil and economic rights - despite scarce evidence that these factors were a significant driver of migration (Bloch et al 2011; Coddington et al 2020; Crawley 2010; Mayblin 2016).

Welfare chauvinism is the process by which "threatening and morally-inferior" outsiders are denied welfare, social and civic rights in ways that are framed as both legitimate and *necessary* to protect the community (Guentner et al 2016, pp. 392-393). During the 1990s, the UK government removed rights to employment, welfare benefits and social housing. In 1999, the National Asylum Support Service (NASS) was created as a parallel welfare system for asylum-seekers; a mode of inclusion through exclusion, support given "begrudgingly as a controlled service rather than through an offer of hospitality" (Sirriyeh 2014 p. 81). NASS (now known as Asylum Support) aims to address the destitution caused by exclusion from labour markets and welfare provisions. The Home Office describes a person as destitute when…

> "…they do not have adequate accommodation or any means of obtaining it (whether or not their other essential living needs are met) or [...] have adequate accommodation or the means of obtaining it but cannot meet their other essential living needs." (Immigration and Asylum Act 1999, S95(3)

Support is only available for those whose cases are under consideration or who have a barrier to their removal; consequently, many asylum-seekers are ineligible and live in destitution. This is part of a politics of deterrence by creating circumstances of "dependence, vulnerability, and impoverishment" for those seeking protection (Coddington et al 2020 p. 1427; Darling 2022; JCHR 2007). The system also produces destitution for families through errors, delay and poor decision-making (McKenna 2018; Pinter 2012; Pinter et al 2020).

The Home Office uses destitution as a means of forcing families to leave the UK. Schedule 3 of the Nationality, Immigration and Asylum Act (2002) prevented local authorities from providing financial support and accommodation to "failed asylum seekers" unless they had barriers to removal or entered the process for voluntary return (Hek 2005a; Pinson et al 2010; Sigona and Hughes 2010). In England, local authority guidance stated at the time that children could be provided with accommodation and financial support in these circumstances, but their parents could not – and that, "if necessary, children will be separated from their families" (cited in Hek 2005, p. 10). Evidence from a pilot scheme showed very few families leaving the UK; instead, families disappeared, forced into destitution and dangerous, exploitative circumstances (Cunningham and Cunningham 2007; Hek et al 2012). Despite being repealed in 2006, similar proposals appeared in 2015 where those whose are appeals-rights exhausted…

> "…are no longer classed as "asylum seekers" for the purposes of eligibility for support…Any risk of destitution could be avoided by the family's departure from the UK (Home Office 2015, s. 29-30).[1]

Children's destitution is framed as the consequence of a family's decision to remain; children the victims of their illegalised, criminalised parents' decisions (Lind 2019b; Squire 2021). Removing support to incentivise voluntary return is seen to serve children's best interests where they have no future in the UK, and where destitution can be alleviated by leaving (Sirriyeh 2015).

Asylum support involves "dispersal" to cities across the UK without choice as to where, and to accommodation managed by private contractors (Hirschler 2021). Privatisation made accommodation more insecure and of lower quality by removing it from state responsibility; in seeking low-cost public services the government created a service marked by discomfort, frustration and a lack of transparency and accountability (Coddington et al 2020; Darling 2016). Asylum accommodation standards are often far

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[1] Similarly, the 2021 New Plan for Immigration seeks to "consult" on whether to increase the use of destitution to encourage removals (see Pinter 2021).

lower than those provided through mainstream homeless provisions, again evidencing necropolitical exception (Bloch and Shuster 2005; Hek et al 2012; Home Affairs Committee 2018; Hynes and Sales 2010; Reacroft 2008). Accommodation is often in areas of multiple and sustained deprivation and histories of racism, with overstretched or limited services (Hek et al 2012; Spicer 2008). Recipients can be evicted on short notice through lock-changes as residents lack the rights afforded to tenants, creating further precaritisation (Karamanidou and Foley 2020; Mainwairing et al 2020).

During COVID-19, hotels, hostels and decommissioned military barracks were used to house applicants despite being described as "impoverished, run-down and unsuitable for long-term accommodation" by the Independent Chief Inspector of Migration, Border and Asylum (2021) and posing risks to health and wellbeing by the High Court (NB & Ors v Secretary of State for the Home Department [2021] EWHC 1489 (Admin); see also Tazzioli 2020). In Glasgow, a new "mother and baby" unit was placed within a decommissioned homeless accommodation unit with concerns raised about space, safety and suitability for children's safety and development (Children's Commissioner 2021). Proposals to open large-scale accommodation centres suggest this approach to accommodation will only become more widespread.

The financial support provided within the asylum support system is lower than equivalent benefits provisions. Section 95 support (S95) is cash-based and provided to initial applicants while Section 4 (S4) is for those whose cases have previously been refused and is provided on a card, creating a condition of "cashlessness" (Mulvey 2009, p. 22) that restricts how and when it might be used. Mayblin (2017; 2019) argues that these provisions constitute reduction to nonbeing as they are intended purely for survival; evidenced by a recent breakdown of a week's support for one adult, provided to the courts by the Home Office:

> "Food and drink: £26.49;
>
> Toiletries/Healthcare/Household cleaning items: £1.52
>
> Clothing including footwear: £2.90
>
> Travel: £4.50
>
> Communications: £3.52
>
> Total: £38.93
>
> Adjustment for inflation at 1.7%: £39.60." (JM v Secretary of State for the Home Department [2021] EWHC 2514)

After the period of data collection, during the COVID-19 pandemic, room and board were provided instead of financial support despite concerns about the quality and safety of accommodation and the impacts of living without money (Armstrong et al 2020; McBride et al 2020).

Support for families was cut significantly in 2015 on the grounds that the amounts provided were too high, with families losing between £15 and £40 per week (Mayblin 2017). This occurred despite evidence in 2013 that support provisions "do not meet the essential living needs of children" (Children's Society 2013, p. 8). The system does not make any additional financial provision for children or family members with additional support needs, disabilities or health problems (Pinter et al 2020; Reacroft 2008). It is also a system of surveillance, where the Home Office monitors how users spend money to assess or curtail support (Coddington et al 2020).

Illegalisation and narrowing routes to settlement

Policy attention has recently broadened, from asylum and refugee issues to wider concerns around "illegal" migration within the loosely connected set of initiatives that comprise the "Hostile Environment" (Griffiths and Yeo 2021; Squire 2021). The Hostile Environment is designed to make life unliveable for "illegal immigrants" – those who are both migrantised and *illegalised,* punished for failing to fit within acceptable categories of mobility (De Genova 2002).

Illegalisation and refugee policy

This is part of a "crimmigration" approach, which ties migration to crime, safety and public protection (Bowling and Westenra 2020; Candappa 2019; Serpa 2021). 2015 proposals to reform asylum support were aimed at "failed asylum seekers and other illegal migrants" (Home Office 2015, p. 1), while the UK's New Plan for Immigration combines "asylum and illegal migration", outlines plans for deporting foreign national offenders and "those with no right to be here", and describes how…

> "…Illegal immigration is facilitated by serious organised criminals exploiting people and profiting from human misery…people are put in the hands of ruthless criminals who endanger life by facilitating illegal entry via unsafe means." (Home Office 2022a, n.p).

Griffiths and Yeo (2021) argue that the hostile environment lacks clear goals and mechanisms for review or accountability, seeing it as a moral exercise justifying punishment of illegalised people to protect the social order (see also Brittle 2020; Serpa 2021).

The process of illegalisation involves narrowing and conditionalizing routes to legality, increasing the time children and families spend in precarity and reducing routes to settlement for those who fall beyond acceptable forms of mobility. A multi-tiered asylum system is emerging, based on whether a person enters via "legal routes" (Home Office 2021, p. 17). Deserving and acceptable refugees arrive via resettlement schemes and are offered significant support. Those who enter "illegally" have their rights curtailed:

> "Those who prevail with claims having entered illegally will receive a new temporary protection status rather than an automatic right to settle, will be regularly reassessed for removal from the UK, will have limited family reunion rights and will have no recourse to public funds except in cases of destitution." (Home Office 2022a, n.p)

Moreover, refugee status lasts for 5 years; where previously a subsequent settlement application might be accepted automatically, now "safe return reviews" are used to assess whether a person might leave the UK (Buxton 2020, p. 16; Kaytaz and Schultz 2021). Protection becomes both tiered and temporary, rewarding the "legal" and punishing the illegal; a form of "discretionary humanitarianism" that serves to conditionalize the right to protection based on political prerogatives (Fassin 2011, p. 213; Karyotis et al 2020).

The 2022 agreement with the Rwandan government to transfer those who arrive "illegally" extends this system to physical exclusion from the UK. The 2022 Ukraine visa system also represents an attempt to institutionalise this hierarchy, providing a legitimate route for acceptable migrants – albeit one with narrow remit and bureaucratic complexity, justified in terms of crime and security (Home Office 2022b). Despite its problems, the fact of this scheme's existence and the general discourse around Ukraine stands in marked contrast to those fleeing other conflicts. Grosfoguel et al (2015, pp. 641-643) argue that there are three categories of migrant in the colonial imagination – "colonial/racial subjects of empire", "colonial immigrants" and "immigrants" – defined according to degrees of racialisation and placed in a hierarchy of acceptability. The visa scheme suggests that Ukrainians fall into the third category, a concession granted to a more acceptable – but not totally acceptable - European population but not extended to racialised Others.

Family migration and human rights

Similar logics are visible beyond asylum. Turner (2015, p. 358) argues that recent developments in family migration visas are based on colonial logics, protecting the social, cultural and financial health of the state by regulating the Other's "intolerably

different" family life, sexuality and intimacy. Hegemonic ideas of family – as nuclear, economically self-sufficient, based on 'genuine' relationships, defined according to culturally and historically-contingent norms (Bonjour and Kraler 2015; Kofman 2018) – serve to restrict access to families who do not conform.

For Gedalof (2018), this is evident in three policy strands. Firstly, the government seeks to define "genuine" or "real" marriages with concern that relationships might be instrumentalised to secure migration rights and access to welfare provisions. Initially, this occurred through refusing visas to Commonwealth citizens because of suspicions that migration was the "primary purpose" of the marriage (Turner 2015; Wray 2015), with virginity testing and other invasive techniques to assess whether arriving women conformed to stereotypical ideas of authenticity (Smith and Marmo 2014). More recently a concern with "sham" marriages, and the conflation of "forced" and arranged marriage, is the justification for narrowing eligibility to those who can evidence acceptability, suitability and therefore deservingness (Bonjour and Kraler 2015; Turner 2015; Wray 2015). The use of extended probationary periods for spouses is framed as a further deterrent against "sham" relationships – and acts as an extension of deportability and precarity (D'Aoust 2017; Smith and Marmo 2014; Turner and Espinoza 2021).

Secondly, policy here seeks to address unacceptable cultural difference introducing and expanding language requirements for family visas (Gedalof 2018). The cultural health of the state is threatened by spouses (stereotypically women) who lack English language skills and who live in family units whose cultural dynamics are seen to prevent their participation or integration into labour markets or communities (Bonjour and Kraler 2015; Turner 2015). The third strand restricts access to public funds and introducing income requirements in response to concerns that spouses and children are dependent on the welfare state (Bonjour and Duyvendak 2017; Kofman 2018). Gender, race, class and coloniality combine to permit access to a certain type of migrant family – one that is genuine, economically independent, socially and culturally integrated (Bonjour and Kraler 2015; Sirriyeh 2015; Wray 2015).

Family life also acts as a route to settlement, typically through Article 8 of the European Convention on Human Rights (the right to respect for family life); a kind of "humanitarian backdoor", albeit one that similarly rests on gendered, culturally contingent, and normative understandings of the family (Bonjour and Kraler 2015, p. 1413; Wray 2015). Recent policy has tried to restrict access to this route, making settlement harder for those who have spent periods in illegality. The 7-year rule – where a family might be granted leave based on a child's residence in the UK for 7 years – no longer holds, and rules no

longer permit relationships established during periods of illegality to have weight in applications (Griffiths 2015; Sigona and Hughes 2012; York 2018). These restrictions are again a response to concerns about instrumentalization and the exploitation of relationships for migratory advantage (Wray 2015).

Where Article 8 applications succeed, they typically result in Limited Leave to Remain (LLR). Families are placed on 5- and 10-year routes to settled status involving applications around 30 months apart, each of which has a significant cost attached - around £31,000 for the 10-year route, a 16x increase since 2010, and £19000 for the 5-year route - a 10x increase) (Dickson and Rosen 2020; York 2018). Limited leave is a temporary reprieve from some aspects of illegality and an extension of deportability; status does not equal settlement and a sense of "permanent temporariness" occurs (Bailey et al 2002, p. 138; Squire 2021). Missed application deadlines, errors or refusals can mean starting the entire process again, increasing the sense of precarity (Makinde et al 2019).

Fees make it harder for those with No Recourse to Public Funds (NRPF) and no right to work, and disproportionately affect those with limited capacity to earn, including families with childcare responsibilities, disabilities, or health conditions (Bawdon 2021). NHS health surcharges - fees applied to family visas, student visas and other applications since 2014 - create an additional financial barrier justified by the need to protect public services from the unsustainable burden of new arrivals (Sumption and Kierans 2021; Dorling 2019; Coddington 2021). Citizenship registration fees of more than £1000 were found to be unlawful, set without due regard to children's best interests (Fernandez-Reino and Sumption 2021). The Home Office has also expanded the use of the "good character" test where citizenship can be denied to a child for criminality, deception, or evasion of immigration controls (ibid).

Narrowing access to justice

Narrowed routes to legality combine with restrictions on legal aid and appeal rights. In England, legal aid cannot be used for several types of application relevant to children and families. The JCHR argued that 2015 proposals to restrict aid to those "lawfully resident" for a continuous 12-month period would…

> "…leave significant numbers of children ineligible…including unaccompanied migrant children, refused asylum seekers unable to return to their country of origin, age-disputed children, children abandoned by parents or carers, undocumented migrant children, and children legally resident for less than 12 months." (JCHR 2015, s.111)

Cuts to legal aid and limited availability of legal advice in some places have resulted in "legal deserts", creating inequalities of access to legal services in different parts of the UK (Burridge and Gill 2017, p. 23).

Appeal rights and judicial reviews have also been restricted in England, with proposals to further restrict access potentially damaging to migrants' access to justice or prospects of resolution (Ministry of Justice 2021b). This occurs as Home Office decision-making is plagued by factually inaccurate, inappropriate and unclear reasons for refusal caused by inexperienced, underqualified decision-makers; disbelieving and interrogatory interviews; and managerial pressures (Neal 2021; York 2018). Around 40% of asylum refusals are overturned by the courts (Refugee Council 2020), and more than half of all immigration appeals are decided in favour of appellants in the UK (56% in 2018/2019; 53% in 2019/2020 – Ministry of Justice 2021a, n.p). Restricting legal aid access, reducing appeal rights and narrowing routes to legality actively create illegality while punishing those living within it.

No Recourse to Public Funds (NRPF)

Evident throughout this chapter is the sense that borders have ceased to be solely geographical. Instead, they have multiplied and are embedded throughout everyday life, carried in the bodies and identities of migrants and in the spaces through which they move (McKee et al 2020; Yuval-Davies et al 2018; 2019). This is evident in the recent increase in No Recourse to Public Funds (NRPF) provisions which contribute further to the "racialised politics of precarity" outlined here (Sanders 2021, p. 3). Introduced in 1971, NRPF applies across a range of migrant categories including work, study, and family visas, asylum applicants, and undocumented migrants (Jolly et al 2022). Since 2012, NRPF conditions are increasingly applied to those with limited leave on private and family grounds (ibid; Turner 2015). Applied to those who have some form of status, the NRPF condition is the apotheosis of inclusionary exclusion through welfare chauvinism (Dickson and Rosen 2021; Guentner et al 2016).

Having or 'being' NRPF precludes access to welfare benefits, social housing and homelessness assistance, crisis funding including the Scottish Welfare Fund, and entitlements including free school meals and school uniform grants (Farmer 2021). While asylum applicants can access asylum support and some with NRPF and some forms of status are permitted to work, for many the consequence is extreme material precarity and destitution (Jolly et al 2022). By law, NRPF conditions should not routinely by applied to LLR for households with children, but evidence suggests that they are and until

recently a condition could only be removed upon application *after* destitution occurs (Fernandez-Reino 2020).

For Farmer (2021), the existence of NRPF shows necropolitical exception by removing migrants entirely from the social safety net. Its intersectional coloniality is evident in its disproportionate impact on working-class, female-headed households from former colonies (Dickson and Rosen 2020; Price and Spencer 2015; Shutes 2017). NRPF creates an unliveable life in deportability designed to deter settlement…

> "…where negatively racialized mothers from former British colonies, and their children, were made to 'pay' for their 'undesirability' through a draconian policy that denied them the means of life." (Dickson and Rosen 2020, pp. 2-3).

NRPF is also an area of overlapping policy scales, as local authority social work departments possess the power to provide accommodation and financial support under S22 of the Children (Scotland) Act 1995. Recent concerns about "NRPF fraud" (see Jolly 2020) suggest a growing crimmigration narrative here and a suggestion that families might seek to exploit local authority support provisions. Chapter 2 explores these provisions and their impacts in greater depth.

Deputization

Everyday bordering also occurs through the "deputization" of public services, social institutions, and private actors into immigration enforcement activities (Griffiths and Yeo 2021). The 2014 and 2016 Immigration Acts created obligations for banks, landlords, employers and health services to more actively enforce limitations on refused asylum-seekers' or illegalised migrants access to health, Further Education (FE), banking, housing and other services, criminally sanctioning organisations for failing to check where they have "reasonable cause to believe" someone may not lawfully access a service (Immigration Act 2016 in Candappa 2019, p. 420; Griffiths and Yeo 2021). There have also been proposals to deprioritise or bar illegalised children from school places in England, although this policy was never instituted (Webber 2019).

This idea of "reasonable cause" creates an obligation based on subjective assessment of whether one *appears* to be illegal, encouraging racial profiling and the refusal of services (Candappa 2019; Leahy et al 2018; York 2018). The High Court recently found Right to Rent checks by landlords to be unlawful and discriminatory as the law "causes them to do [discriminate] where otherwise they would not" (JCWI v Secretary of State for the Home Department (2019) EWHC 452). Illegality becomes less about *being* illegal but about being able to *prove that one is not* - difficult for those with no passport or

documents, as evidenced by the Windrush scandal (McKee 2018; McKee et al 2020). Evidence suggests frequent errors resulting in refusals of bank accounts, jobs, housing and health services to those entitled to access them (York 2018).

Deputization also removes information-sharing "firewalls" between public services and immigration authorities (Hermansson et al 2020; Jolly and Lind 2021). In England, information-sharing protocols were created (then revoked after becoming public) between health and education services and the Home Office (Candappa 2019; Webber 2019). Expectation of information-sharing or the embedding of immigration officers in local authorities and other public services are also signs of deputization (Jolly and Lind 2021; Papageorgiou et al 2020). In the NHS, the charging regime for some migrants requires that debts of more than £200 are reported to the Home Office, becoming grounds for refusal of applicants or immigration enforcement (Migration Scotland, n.d section 4.10). The charging system is complex, ever-changing and asks healthcare staff to make decisions on eligibility, rather than health (York 2018). Through everyday bordering, any service interaction risks a "spectacle of illegality" where services are refused, status and eligibility questioned, and routes to legality and settlement jeopardised (De Genova 2002, p. 493; Bhatia 2019).

Children's policy in Scotland

Huijsmans (2011) argues that research should explore intersections between migration policy and the ways in which childhood is institutionalised. As NASS was being created in 1999, several areas of social policy were devolved to the Scottish Executive (now the Scottish Government) - health and social care, education, criminal justice, local government, and recently elements of social security. There are tensions, even contradictions, between the hostile approach to children and families above and Scottish children's policy where wellbeing, welfare, best interests, and rights are fundamental. This picture is made more complex by conceptual and institutional complexity and chaos in which migrant children are often invisible, or visible only in specific ways. This can create moments of coherence or collusion between immigration policy and immigrant policies around children and families.

Getting it Right for Every Child

Following devolution, several government reports expressed concern that Scotland's children's services were impacted by organisational fragmentation, a lack of interprofessional working, failures in prevention and early intervention, and resource-led competition and protectionism (Scottish Executive 2001; 2003). No single service could meet all needs, and a focus on children' wellbeing was being lost in the seams, pockets

and gaps of system (Coles et al 2016). The Executive sought a new approach that would encourage professionals "to respond to children's needs in a holistic way…within a single coherent system" (Scottish Executive 2001, para8.50).

Getting it Right for Every Child (GIRFEC) was to be the "cross-weaving and recurring pattern of a tartan threading through" policy around children and families (Scottish Government 2012a, p. 6). It proposed a National Practice Model oriented around the unifying concept of wellbeing, defined according to a set of indicators - Safe, Healthy, Active, Nurtured, Achieving, Respected, Responsible, Included (SHANARRI; Scottish Government 2012a). This ecological, holistic, and universal understanding of wellbeing should apply to every child in Scotland and to each child individually by the services working with them (Scottish Government 2008a; 2012a). GIRFEC seeks to create a unified, single pathway to provide support in an appropriate, proportionate, and timely fashion across universal, targeted and specialist services (Aldgate 2008; Scottish Government 2008a). Where needs are identified, the National Practice Model provides a shared language for recording and sharing information, carrying out assessment and engaging in support planning (Scottish Government 2008a; 2012a). GIRFEC contains multiple, often conflicting ideological strands whose roots are made invisible by claims of an apolitical, universal understanding of wellbeing.

Strands of wellbeing in policy and practice

Cairney et al (2015) argue that all policy is chaotic and complex, containing a range of conflicting viewpoints and a diversity of actors and institutional arrangements across multiple scales. Just as Hartas (2014, p. 112) describes children's policy in England as a "cornucopia (of) different and occasionally conflicting ideological strands…riddled with paradoxes", so too is children's policy in Scotland. GIRFEC tries to resolve these paradoxes through its approach to wellbeing, a concept that is "conceptually muddy" and lacking any proper definition (Morrow and Mayall 2009, p. 221; Dodge et al 2012). Axford (2009a; 2009b) outlines six approaches to wellbeing relevant to policy - needs, rights, material resources, quality of life and social inclusion – each of which produces a different policy orientation that might contradict the others. Several approaches exist in Scottish policy in ways that suggest chaos and complexity rather than unity and coherence.

Prior to GIRFEC, Scottish children's policy focused on "medico-social" ideas of need or on "socio-legal" ideas of risk, muddy and ambiguous terms defined by policymakers and professionals (Langan 1998; Rogowski 2012). Socio-legal approaches focus on children "at risk of significant harm and so in need of protection" (Scottish Executive 2003 para16)

and were associated with interventionist, investigatory and protective responses (Gilbert 2012; McGhee and Waterhouse 2007; Vincent et al 2010). Medico-social approaches provide supportive responses in circumstances of "need", where a child…

> "…is unlikely to achieve or maintain, or to have the opportunity of achieving or maintaining, a reasonable standard of health or development [or] his or her health or development is likely significantly to be impaired unless such services are provided." (Children (Scotland) Act 1995, s93(4))

GIRFEC considered approaches to need and risk as too passive and responsive (Scottish Government 2012a; 2013) and sought to redefine these core terms. "Need" became "wellbeing need", defined in SHANARRI terms, part of a continuum with welfare and risk at the more serious end:

> "Welfare, as it relates to children…is often used in the context of identifying a need for compulsory intervention...welfare and wellbeing are different, in that wellbeing is a broader, more holistic concept." (Scottish Government 2021a s.4.1)

Risk continues to underpin child protection guidance and statutory processes, but in such a way that it might be congruent or coherent with the wider wellbeing approach (Scottish Government 2021b). Despite these changes, some authors argue that there is significant continuity between GIRFEC and its predecessors (McCall-Smith 2020), seeing limits to "conceptually repackaged" policy and service provision without more substantive changes in service provision (Hayes and Spratt 2014, p. 618).

Wellbeing or rights?

GIRFEC claims congruence between wellbeing and *rights*, with recent Child Protection guidance rooted "within the UNCRC which, as a whole, underpins the Getting It Right for Every Child approach" (Scottish Government 2021b, s.1.114). Assessment guidance sees the UNRCRC as both "overarching" and "foundational", citing the importance of non-discrimination, the paramountcy of children's best interests, the right to life, survival and development, and respect for the views of the child (Scottish Government 2021a, s.3.2). Through United Nations Convention on the Rights of the Child (Incorporation) (Scotland) Bill, the Scottish Government has incorporated the UNCRC into Scots law, creating duties to ensure legislation is compatible with rights, while increasing the powers of the Children's Commissioner and the courts' ability to strike down non-compliant legislation (McCall-Smith 2020). In 2021, the UK Supreme Court ruled that these proposals exceed devolved powers and could interfere with reserved law – law

that include migration policy (REFERENCE by the Attorney General and the Advocate General for Scotland – United Nations Convention on the Rights of the Child (Incorporation) (Scotland) Bill (2021) UKSC 42).

For some, rights and wellbeing are distinct and potentially contradictory (Lundy 2019). Tisdall (2015a; 2015b) locates a tension in GIRFEC's creation where rights – which are justiciable, create mechanisms of accountability and grant power to children and families – were subsumed beneath the apolitical approach to wellbeing. McCall-Smith (2020) argues that existing approaches to children's rights in Scotland have been inconsistent, tokenistic and subsumed beneath wellbeing and best interests as defined by services, policymakers or practitioners. Tension exists between children's autonomy, participation, and empowerment and the protection-focused, paternalistic discourse around wellbeing, reflecting children's partial citizenship, perceived incompleteness as subjects and their dependent circumstances (Riddell and Tisdall 2021). Claiming a natural congruence in GIRFEC obscures these complex, conflicting policy dynamics.

Prevention, Early Intervention and Social Investment

GIRFEC contains several other ideological strands. It is part of cross-government efforts to invest in prevention and early intervention (Christie 2011), oriented around ideas of *timeliness:*

> "'The right time' is before a child's wellbeing is adversely affected (known as primary prevention) or as soon as possible after an adverse effect manifests itself (known as early intervention)." (Scottish Government 2015 1.4.11)

Hardiker et al (1991) outline three policy approaches to prevention: primary/developmental approaches using structural reform and universal provision to prevent problem emergence; secondary/institutional approaches focus on early identification and intervention; and tertiary/residual approaches intervene after problems emerge. GIRFEC's timeliness involves a complex configuration, with a particular focus on secondary and tertiary approaches grounded in child-focused investment policies.

Within a child-focused orientation, children are individual subjects with their own relationship with the state (Gilbert 2012; Scott et al 2016). The Children (Scotland) Act (1995) created the legal foundations for parental responsibilities alongside parental rights, with children as rights-holders whose views and opinions were significant and whose welfare and best interests became paramount to official proceedings (Kidner 2013). Families become parents-and-children (Morris and Featherstone 2008), evident when GIRFEC guidance advises practitioners to "consider first and foremost the current

and potential effect of continuing adversity on the child, regardless of the parent's intentions" (Scottish Government 2013a, p. 30).

In this strand, families ceased to be private entities and became public concerns, with children's individual wellbeing connected to that of society (Gillies 2011). The child is a "valuable, yet vulnerable" commodity requiring investment for future individual, social and economic returns (Schiettecat et al 2015, pp. 651-2; Vandenbroeck et al 2011). Social investment approaches consider wellbeing in terms of "well-becoming" - children's relationship with the state not as free, independent citizens but as incomplete, dependent, vulnerable and in need of protection and support to become stable, acceptable, responsible citizens (Dixon and Nussbaum 2012; Fattore et al 2017). This is evident in the Early Years Framework (Scottish Government 2008b), inequalities policy (Scottish Government 2015b) and in other provisions aiming to improve children's future outcomes and provide savings for government by focusing resources on early childhood and early intervention (Keating 2014). Investment includes increases in universal childcare provisions and other primary/developmental support; it also includes secondary and tertiary approaches aimed at disciplining deviant families to integrate them into the social mainstream (Frost et al 2015). Child-focused investment approaches often overlap with ideas of parental culpability within a neoliberal orientation with parents targeted for change (Cairney and St Denny 2020; Daniel 2010; Morris et al 2008).

These ideas are evident in the recent policy focus on Adverse Childhood Experiences (ACEs). ACEs approaches claim a scientific basis for interventionist child-focused investment by connecting experiences in early childhood to adult outcomes via neuroscientific and developmental causal pathways (Hartas 2014; Wastell and White 2012). A set of 10 adverse experiences in a child's early life are directly connected to their future health, wellbeing, outcomes and opportunities (Boullier and Blair 2018; Felitti et al 1998). Experiencing four or more ACEs drastically increases the likelihood of future negative outcomes (Bellis et al 2014).
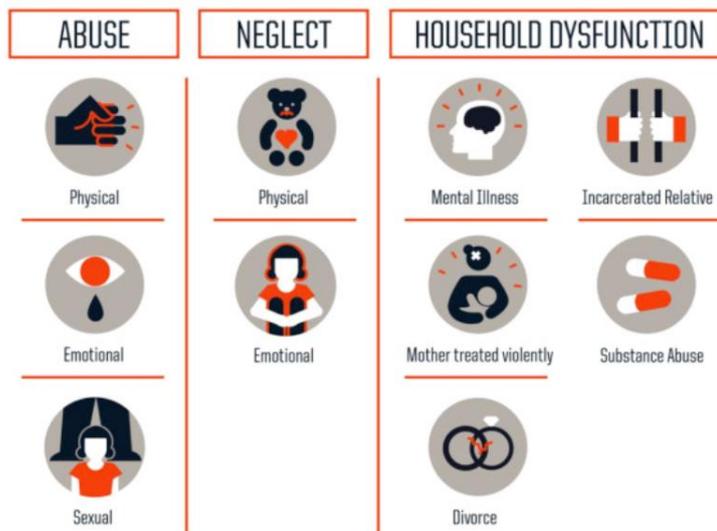
Figure 1: ACEs, from Boullier and Blair (2018, fig1).

These experiences are seen to negatively impact children's stress responses, brain function and even genetics (Asmussen et al 2020). Public Health Scotland describes the evidence as "compelling" (Hetherington 2020, p. 7), with ACEs complementing and deepening the SHANARRI approach by providing a further unifying language and scientific legitimacy (ibid; Burley 2020; Davidson and Carlin 2019). In its Programme for Scotland 2017-2018 (Scottish Government 2017, p. 73), the government intended to…

> "…embed a focus on preventing ACEs and supporting the resilience of children and adults in overcoming early life adversity across all areas of public service."

Critical voices questions have questioned the methodology and evidence base around ACEs (Edwards et al 2017; 2019; Hartas 2019; Kelly-Irving and Delpierre 2019), describing the investment and ACEs agendas as attempts to "regulate disadvantaged families to ensure that they act in ways deemed acceptable by family 'experts' and policy makers" (Hartas 2014, p. 90). Parents are of particular concern, as the site of both problem and solution, culpable for adverse experiences and risks to wellbeing and the state's investment (Davidson and Wright 2020; Featherstone 2006; Hartas 2014; 2019). Pre-ACEs, the National Parenting Strategy described parenting as "*the single biggest influence on a child's education aspirations and attainment*" (Scottish Government 2012b p. 3). Now, the Government echoes ACEs research in describing how…

> "…the single most common factor for children who develop resilience is 'at least one stable and committed relationship with a supportive parent, caregiver, or other adult.'" (Harvard University Center on the Developing Child cited in Scottish Government 2018d p. 3)

Where parents struggle to "inculcate the personal skills, traits and qualifications required in adult life" (Gillies 2012, s.7.7) they become legitimate sites of intervention. Several authors argue that the combination of wellbeing needs, child-focused early intervention and parental culpability in GIRFEC legitimises increased intervention in family life (McKendrick 2015; Parton 2014; Waiton 2015; 2016).

Proportionate universalism or structural change?

The final tension here focuses on the roles ascribed to social structure and to services in Scottish children's policy. GIRFEC's initial focus was on service responses to social issues, evident in the Named Person provision and in moves towards proportionate universalism. The Named Person was a practitioner in universal services tasked with providing information to children and parents, facilitating service access, and recording or reporting wellbeing concerns (Shanks and Peter 2018). The provision was struck down by the UK Supreme Court because of concerns about information-sharing safeguards and proportionality (Christian Institute and others (Appellants) v The Lord Advocate (Respondent) (Scotland) (2016) UKSC 51).

Proportionate universalism targets additional universal service resources and attention to disadvantaged groups or areas (Carey et al 2014; Marmot 2010; NHS Scotland 2014). GIRFEC documents describe universal services as more accessible, more preventive, and less stigmatising than specialist or residual services (Scottish Government 2012a). The approach is visible in the Universal Health Visiting Pathway, which provides more support to those in greater need (Komvoki 2020); the SNIPS midwifery service for vulnerable groups including asylum-seekers (McAdams et al 2018); and in Pupil Equity Funding (PEF) in schools, where additional funding for individual schools targets the poverty-related attainment gap.

Some argue that GIRFEC's service-oriented approach ignores or marginalises structural concerns, such as poverty and inequality (Davies et al 2014; Rowlands 2010; Taylor 2011). Looking again at ACEs, this approach locates all problems within the household; poverty is a "background factor" or contextual feature (Kelly and Delpierre 2019, p. 449). Treanor (2020, p. 476) lists the "wider structural inequalities and discrimination" not considered ACEs:

> "Racism; families with a disability; young carers; children looked after by the state; homelessness; group-based bullying such as LGBT; unsafe neighbourhoods; low quality housing; food insecurity; modern slavery; bereavement; and refugee and asylum-seeking status."

Poverty becomes a cultural issue to be managed or mediated by parents and services, not something requiring structural resolution (Forbes and Sime 2016; Grey 2013). Yet there is evidence that this is again a more complex picture. The Promise (Independent Care Review 2020, p. 17), the most significant development in children's service provision since GIRFEC's inception, discusses poverty extensively:

> "When a family lacks financial resources, when they face sub-standard service provision, when the streets they walk are less safe than in other parts of town, when homes are cramped and when keeping food on the table is a struggle [it is] hardly surprising that some families, without supportive resources to turn to, are simply unable to be the parents they want to be and that their children deserve."

The above shows the "cornucopia" (Hartas 2014, p. 112) of approaches to children and families within the umbrella of GIRFEC – including welfare, wellbeing, need, rights, risk, investment, early intervention, parenting, poverty, ACEs – that exist in chaotic and contradictory relationships. This is further complicated by the devolved and reserved policies around migration and migrant children.

Where are migrant children in Scottish policy?

Several differences exist between Scottish policy related to migration and the hostile environment of the UK government. Legal aid restrictions and Right to Rent rules have not been extended here (Leahy et al 2018; McKee et al 2020). Asylum-seekers, including those who are fully refused, have greater access to further and higher education, healthcare, nursery, and childcare (Galandini et al 2019; Mulvey 2015; 2018; Pollard and Howard 2021). Yet the wider picture is more ambiguous, involving dynamics of invisibilisation and exclusion for migrant children and their families.

The primary policy document around migration in Scotland is the New Scots strategy, which focuses on *integration* – another contested and complex term, explored further in Chapter 2 (Scottish Government 2018e). Mulvey (2015; 2018) argues that Scottish approaches talk of "integrating" asylum-seekers at point of arrival by ensuring rights to services, while the English approach reserves integration activities for refugees, who are accepted as legitimate and deserving. While the language of New Scots is less explicitly exclusionary, ideas of integration rely on the management of difference, where integration requires "positive change in both individuals and host communities" (Scottish Government 2018e, p. 10). For Rigby et al (2018) this suggests a colonial civilising mission, transforming the Other into a functioning part of society by reducing unacceptable cultural difference. Children make only a passing appearance, with reference to the "additional support to access the services they need and opportunities

to participate in society" (Scottish Government 2018e, p. 17). The nature of integration is also relevant; for Mulvey (2013) asylum-seekers in Scotland are asked to integrate, but only into circumstances of poverty and deprivation.

The presence of migrant children and families in Scottish policy is limited. Most policy attention mirrors the concerns above around trafficked, unaccompanied, and separated children – children made visible by their deviance from accepted norms. The JCHR has praised the Scottish government for "a far greater commitment to embedding" the UNCRC in this area (2013 s.52). The Scottish Government has funded an independent Guardianship service[2] and introduced specific legal duties relating to child survivors of trafficking, while the 2014 National Guidance for Child Protection (Scottish Government 2014) focused significant attention on trafficked and separated children and their needs.

A further domain of visibility is in NRPF policy. As this research was being conducted, the Scottish Parliament's Equalities and Human Rights Committee published *Hidden Lives – New Beginnings* (EHRC 2017) to explore the impact of destitution in the context of migration. *Hidden Lives* informed the 2021 Destitution Strategy (Scottish Government 2021c) and recent attempts to lobby the UK government to change immigration policy to reduce destitution (Scottish Government and COSLA 2021). This contributes to greater visibility for migrant families, although this visibility continues to be limited. The current National Guidance for Child Protection recognises how risk and harm are exacerbated by "intersecting contextual factors" including…

> "…immigration status anxieties, insecurities in relation to leave to remain in the country, access to funds and housing…Many migrating families and their children face exceptional stress, due to immigration status, poverty and accommodation concerns. They may experience feelings of isolation, separation, alienation, anxiety, disappointment, frustration and confusion." (Scottish Government 2021b ss.4.32-4.471)

This one paragraph stands in contrast to entire sections for trafficked and unaccompanied children, suggesting a continued imbalance.

Within wider policy, migrant children and their families are completely invisible; their presence reserved for areas like NRPF policy that directly concern them. A 2018 government evidence review on child and adolescent health and wellbeing makes no mention of migration, refugees or asylum-seekers while focusing particular attention on

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[2] In England, the government was "not persuaded that a Guardianship service would add value" on top of existing services (quoted in JCHR 2013 p. 48).

ACEs (Scottish Government 2018a). The current Child Poverty Strategy (Scottish Government 2018b, p. 8) mentions refugee and asylum-seeking families once, but not NRPF or migration more generally despite identifying "minority ethnic" families as a priority group. For Forbes and Sime (2016, p. 11) the universalist approach to poverty in Scotland renders other influences invisible, including migration status:

> "To ameliorate the interplay of socio-economic factors (including poverty) for different social intersections, such as new migrant children, poverty needs to be explicitly coupled to structural inequalities in society."

While Scotland's children's policies may be less explicitly exclusionary than migration policy more widely, the dynamics of (in)visibility here risk migrant children's needs going unseen, reducing them to the status of "luggage" transported by their parents (Orellana et al 2001, p. 572). Universalist policies like GIRFEC contain ideological strands that struggle to account for diversity or the specific needs and circumstances of migrant children (Williams and Graham 2013; 2014).

Institutional and local contexts

As transversal policy issues, children's policy and migration policy are implemented by a range of actors (Mulvey 2018). GIRFEC seeks seamlessness through integrated service planning and multi-agency collaboration incorporating education and health services, social work and social care, and other local authority departments (Scottish Government 2012a). Service provision also relies on voluntary and private sector organisations, often commissioned by public bodies (McCall-Smith 2020). Glasgow Health and Social Care Partnership's Service Plan 2017-2020 (Glasgow HSCP 2017, p. 24) details the services involved in Early Years Joint Support, using language of investment focused on parenting as it seeks to "secure positive outcomes for children by increasing the self-efficacy and resilience of families." Relevant services include:

> "Education services, health visitors, third sector organisations, housing and, when required, addiction and other community services. Third sector organisations…offer a wide range of assistance, such as parenting programmes." (ibid, p. 24)

Each organisation has its own structure, rules, practices and working cultures, resource concerns and localised conditions, impacting how policy is perceived and enacted and the dynamics of multi-agency interactions (McCrystal 2000; Tisdall and Plows 2007).

The immigration sphere similarly contains a range of actors. Glasgow's two decades as a dispersal area has seen several private companies awarded accommodation and

asylum support contracts (Coddington et al 2020). Third sector services have emerged to provide English classes, integration support, advice, and advocacy (Hirschler 2021; Piacentini 2015; Ramachandran 2020; Wren 2007). The Scottish Government's destitution strategy relies on supporting a "non-statutory safety net (of) voluntary and community organisations" to provide housing, financial and food support (2021c, p. 19). Mayblin and James (2019) and Hirschler (2021) describe how non-governmental organisations are forced to address the gaps left by the state's abandonment of asylum-seekers and other migrants. Their arguments echo Hek (2005, p. 6), who found asylum-seeking children's needs being met by…

> "…inadequate mainstream services, ad hoc specialist services operating with constrained budgets or by refugee community organisations (which) have increasingly found themselves in the position of providing for basic needs."

Deputization has also drawn other services into the immigration sphere, including services involved with children and families. Finally, policy is interpreted and enacted by individual practitioners - "street-level bureaucrats" who make vague, contradictory or uncertain provisions into concrete practice within specific local contexts (Evans 2011; 2015; Lipsky 2010). Abstract discussion of policy must be matched with insights from the everyday experience of children and families and the services they encounter.

Summary

While it is often accepted that migrant children are caught in tensions between supportive, wellbeing-focused children's policy and hostile, exclusionary immigration policy, the picture presented above is more chaotic. GIRFEC incorporates several competing and even conflicting ideological strands, a range of policy approaches and a diversity of institutional actors. Its claimed universalism disguises an ideological focus on specific types of need that risk excluding or invisibilising the children and families in this study. Wellbeing is an incoherent concept; the SHANARRI indicators providing domains but no clear definition, such that wellbeing must be explored in practice. There are questions as to whether the rhetorical commitment to supporting migrants in Scottish policy has meaningful everyday outcomes (Mulvey 2018). This project contextualises these issues in the everyday experiences of children, parents and service providers as they attempt to navigate the policy, institutional, organisational and local issues outlined here.

Summary of the introduction and structure of the thesis.

Recent years have seen a growth in interest around migrant children, yet this interest has often excluded children who move within families. These children live within a

colonial immigration context that broadens and deepens their vulnerability and precarity and renders their welfare and best interests secondary to necropolitical forms of immigration control. They also live within a Scottish policy context that aspires to a universal, holistic understanding of wellbeing but which is patterned by definitional, institutional and contextual complexities. This thesis explores the everyday lives and circumstances of children and families and identifies the impact of immigration status on wellbeing through a capitals perspective. It then explores the role of services and the nature of service dynamics via the candidacy framework, providing insights into the interaction between families as candidates and the services designed to support wellbeing. In doing so, it provides a localised, contextualised insight into the structural and causal dynamics of wellbeing in the context of migration.

Chapter 2 provides a reading of academic literature that explores understandings of migrant child and family wellbeing from a range of perspectives. Chapter 3 considers the research design and methodological framework including data collection, data analysis and the ethical considerations underpinning the research. Chapters 4, 5 and 6 present the findings. Chapter 4 is concerned with the impacts of immigration status on everyday life and the wellbeing of children, parents and families more generally. Chapters 5 and 6 explore different dimensions of help and support and provide examples from across the service spectrum. Finally, chapter 7 provides a discussion and set of conclusions for the research.

Chapter 2: Literature Review and Key Concepts

Wellbeing in migration

As outlined above, wellbeing in policy is an open-ended, contested concept where definitions may be in outright contradiction (Axford 2009a; 2009b; Morrow and Mayall 2009). The same is true of how wellbeing has been defined and explored in research. Eraut and Whiting (2008) and Amerijckx and Humblet (2014) provide a set of definitional binaries. Wellbeing can be considered in *salutogenic* terms – the positive presence of being well – or in *pathogenic* terms, in terms of the absence of negatives. *Generalist* approaches consider wellbeing as a holistic concept, while others focus on specific *domains*. *Objective* accounts rely on objective measures, indicators or indexes, often gathered through proxy data like health statistics or attainment numbers (e.g Ben Arieh 2008; Bradshaw et al 2006; Bradshaw and Richardson 2009), while *subjective* approaches tie wellbeing to a person's understanding of their own circumstances (e.g Fattore et al 2017).

Tension exists too between wellbeing as a hedonic concept – focused on the subjective experience of immediate happiness – or as a eudaimonic concept rooted in a deeper sense of self, identity and fulfilment or flourishing (Deci and Ryan 2008; Dodge et al 2012; Ryan and Deci 2001). In child wellbeing this is particularly salient in approaches to wellbeing in childhood versus well-*becoming* and children's growth and development into "well" adults, however defined (Ben Arieh 2005; Uprichard 2008). As Fattore et al (2017; 2019) argue, different meanings are attached to wellbeing by different people in different times and spaces, different social positions and for different purposes. This literature review explores these definitional issues. It begins by exploring two prominent approaches to migrant child wellbeing – one future-oriented and objectivist, the other quantitative, pathogenic and focused on health. It then explores more qualitative and subjective understandings of wellbeing through a capitals perspective.

Acculturation research and wellbeing-as-integration

The first prominent approach to migrant child wellbeing focuses on "acculturation", "assimilation" or "adaptation", defined according to children's embeddedness within social, cultural and economic systems post-migration (e.g Gans 2006; Portes and Rivas 2011; Portes and Rumbaut 2001; Rumbaut 2014). Wellbeing here is often about well-becoming, with quantitative, objectivist indicators exploring educational, health or employment outcomes and other markers of adult social, cultural, and economic inclusion. Authors explore patterns related to a range of causal variables including demographic characteristics of children and families (age at migration, gender,

country/culture of origin, generational cohort, class position), their access to resources and features of the "context of reception" (Portes and Rumbaut 2001, p. 231; Asad 2014) or policies of incorporation in the host society (Garcia Coll et al 2012).

These approaches typically explore whether children "assimilate" upwards or downwards as they grow into adulthood; whether they enter mainstream socioeconomic processes and achieve upward social mobility, or whether they face economic exclusion, marginalisation and downward mobility (Portes and Rivas 2011; Portes and Rumbaut 2001; 2014). One such pattern is the "immigrant paradox", where those who are less "acculturated" achieve better outcomes in education and health than their more acculturated peers (Garcia Coll et al 2012, p. 160; Marks et al 2014). Ideas of "selective acculturation" or "segmented assimilation" speak to the perceived advantages of maintaining links to cultures and communities of origin while making connections to access broader social and cultural resources (Waters et al 2010, pp. 1168-1170; Portes and Zhou 1993).

"Risk factor" approaches and wellbeing-as-health

A second prominent approach to migrant child wellbeing explores risk and protective factors, a salutogenic, perspective seeking patterns and causal dynamics related to mental and physical health or psychological wellbeing. These include quantitative analyses based on self-reported mental health scores or surveys, as well as several systematic reviews (e.g Fazel et al 2012; Fazel and Betancourt 2018; Reed et al 2012). Most focus on the relationship between health and pre-migration, migration and post-migration stressors for "refugees and asylum-seekers" but focus exclusively on adults (Carswell et al 2011; Hynie 2018; Li et al 2016; Silove et al 2007) or include studies on children without addressing their specific needs (Porter and Haslam 2005). Those focused on children's experiences often consider refugees and asylum-seeking children in cross-national contexts (Ehntholt and Yule 2006; Emerson et al 2021; Fazel and Stein 2002; Hodes and Vostanis 2018; Kadir et al 2019; Lustig et al 2004) or differentiating low/middle-income countries (Reed et al 2012) from high-income countries (Fazel and Betancourt 2018; Fazel et al 2012). Some studies explore patterns according to demographic variables including gender, age, country of origin, and cultural background (Bronstein and Montgomery 2011; Curtis et al 2018; Fazel et al 2012; Reed et al 2012; Samara et al 2020).

Hodes and Vostanis (2018) argue that there is strong empirical evidence for the "risk factor model" that emerges from these studies, linking pre-, during- and post-migration factors to symptoms or indicators of poor mental health or psychological and emotional

wellbeing. Increased incidence and severity of pre-migration traumas are associated with higher PTSD, anxiety and depression scores among refugee children and youth (Ehntholt and Yule 2006; Fazel and Stein 2002; Hodes and Vostanis 2018; Kadir et al 2019). Consequently, some children report improved post-migration circumstances – safety from violence, improved quality of life, improved diet, better health and education services and life prospects (McCarthy and Marks 2010; Samara et al 2020). More often, studies find that post-migration stressors have a negative influence on health, often related to policy contexts around migration.

Repeatedly, studies and reviews have found that rapid resolution of claims and stable forms of status have positive psychological impacts, while long periods with unresolved status contributes to worse outcomes in mental or psychological health for children (Ehntholt and Yule 2006; Fazel et al 2012; Reed et al 2012; Samara et al 2020;). Poverty, status uncertainty, turbulence or frequent transitions in housing and education, experiences of racism and discrimination, inadequate or poor-quality accommodation, social isolation and challenges in cultural adaptation are associated with poorer mental health and emotional, psychological or behavioural wellbeing (Ehntholt and Yule 2006; Fazel and Stein 2002; Fazel et al 2012; Korp and Stretmo 2020; Zwi et al 2017). While studies typically focus on refugee and asylum-seeking children, Stevens (2020, table 2 p. 192) include undocumented migrant children in their review of "factors influencing child health needs":

Table 2 Factors influencing child health needs throughout all stages of migration

Premigration	Transit	Postmigration
▶ Inadequate healthcare in country of origin	▶ Long physically demanding journeys	▶ Long and complex legal immigration process
▶ Poverty	▶ Dangerous modes of transport	▶ Uncertainty of asylum application outcome
▶ Famine	▶ Physical and sexual violence	▶ Challenge of adopting a new culture
▶ Endemic disease	▶ Overcrowded refugee camps	▶ Challenge of learning a new language
▶ Sexual and physical violence	▶ Exploitation by traffickers	▶ Delay in accessing education
▶ Torture	▶ Limited access to adequate food, sanitation and healthcare	▶ Detention
▶ Persecution		▶ Loneliness and isolation
▶ Witnessing violence/torture/death		▶ Loss of identity and status
▶ Living in fear for the safety of themselves and their family		▶ Absence of family
▶ Loss and bereavement		▶ Lack of community support
▶ Forced recruitment to armed groups		▶ Challenges of integration with the host population
		▶ Poverty
		▶ Poor housing
		▶ Racism
		▶ Discrimination
		▶ Difficulty navigating the host country's health system

Figure 2: Factors influencing child health needs throughout all stages of migration (Stevens 2020, p. 192).

Similar factors have been found to influence adult wellbeing. Time with precarious status has a corrosive effect on mental health and wellbeing (Li et al 2016; Silove et al 2007). Poverty, housing, discrimination, unemployment and isolation are all correlated with higher PTSD and depression scores among refugees and asylum-seekers (Carswell et al 2011; Hynie 2018; James et al 2019; Li et al. 2016; Morgan et al 2017; Steel et al

2017) as well as undocumented and non-refugee migrants (Martinez et al 2015; Sangalang et al 2019). The significance of status is evident in research that shows asylum applicants score worse on mental health surveys than refugees (Kleinert et al 2019; Silove et al 2007) with research in Scotland connecting this pattern to temporary accommodation, isolation and the absence or loss of social networks (Mulvey 2013; 2015). Immigration status and illegality have been described as a "social determinant" of health (Castañeda et al 2015; Isaacs et al 2020) and Castañeda (2009) proposes the concept of "illegal syndrome" to refer to the health impacts of life in deportability.

Capitals and a qualitative approach

Both acc_ulturative and risk-factor approaches to wellbeing have been critiqued. While risk-factor research supports a move beyond pre-migration, trauma-focused, approaches to health by focusing on structural issues post-migration (Allan 2012; Hodes 2000; Silove et al 2007), it can pathologise quite reasonable responses to adversity or rely on culturally-contingent definitions or forms of measurement (Sleijpen et al 2017), Research on acculturation or integration has been critiqued both for empirical inadequacy and its prescriptive nature, where migrants can be blamed for failures to acculturate and those failures become a matter of public concern (Alba and Nee 2003). Focusing on wellbecoming and social investment, or on diagnoses and epidemiological regularities using medicalised or adult-defined understandings of wellbeing, does little to explore how migration and deportability are lived, felt, and actively encountered (White et al 2011). There is a need for research to complement these models with subjective, qualitative research connecting the everyday experiences of children and families to the colonial systems of government outlined in Chapter 1.

This research follows the example of Mayblin (2017; 2019) by providing a direct connection between coloniality and everyday experience. It does so via Bourdieu's capitals framework (1984; 1986). Bourdieu connects social, economic, cultural and symbolic capitals to inequalities and historically-embedded power dynamics around gender, class, race and ethnicity (Morrow 1999). Capitals consist of resources that can be converted or mobilised into social goods and social advantage (and so to wellbeing) through the interaction between individual efforts and the systems and structures – the fields – in which people live (Anthias 2007; Cederberg 2012; Erel and Ryan 2019). Fields are stratified social spaces where agents attempt to mobilise resources to desired ends while subject to structural forces that reward, sanction, permit or delegitimise capital mobilisation (Bourdieu and Wacquant 1992).

The capitals perspective here is complemented by an intersectional approach. The availability or mobilizability of capitals depends on positionality - the location of a person within social structures and mechanisms of resource distribution within a field (Martinez Dy et al 2014). Those in positions of disadvantage have fewer resources or face barriers in mobilising those resources into capitals, with capital best considered not as static structural object but in terms of practices, processes, and dynamics (Morrow 1999). Intertwining structural processes around ethnicity, gender, class, age, race – and in this case, immigration status – impact upon the ability to achieve wellbeing through processes of capital accumulation and mobilisation (Anthias 2012; Clegg 2016).

Bourdieu (1984, 1986) proposes four types of capital - economic, cultural, symbolic social – but here I add emotional and spatial capitals. Economic capital is foundational, relating to the ways that money and property confer access to other forms of capital and how other forms of capital gain significance through conversion to the economic (Bourdieu 1984). Cultural capital refers to "legitimate" types of knowledge and ways of being. It can be *objectified* (in objects whose ownership or consumption confer social power or status) or *institutionalised*, formally recognised by powerful institutions through qualifications, salaries, memberships, or other forms of recognition (ibid). Cultural capital can also be *embodied* in a person's way of being, knowing or acting in the world – their *habitus*, the unconscious or semi-conscious dispositions, practices, or perceptions that they possess, often by virtue of group membership and social position. Bourdieu describes habitus in terms of "internalised structures" (Bourdieu 1984, p. 101) while for Allen (2004, p. 493) it inheres in a "practical sense" …

> "…constructed through everyday experience of social space, which results in a practical inclination that is oriented to the objective regularities immanent in the structure of probabilities 'given to' the (social class, gender, etc.) positions in social space being occupied."

Habitus informs a person's understanding of their surroundings and the actions and practices they consider (il)legitimate, (un)expected, or (un)reasonable in a situation (Bourdieu 1984). Habitus is relational, connected to ideas of recognition and rejection by others and provides a sense of orientation, a guide for interpreting and moving through the social world (Thorpe 2013). Cultural capital connects to symbolic capital and the resources available through social status, prestige and engagement in socially and culturally significant activities (Bourdieu 1984).

Social capital refers to resources connected to one's networks and relationships of recognition, trust, and reciprocity:

"The product of investment strategies, individual or collective, consciously or unconsciously aimed at establishing or reproducing social relationships that are directly useable." (Bourdieu 1986, p. 251)

Inequalities are again relevant, as the positions of those one might connect with, and the resources they might have access to, are influenced by each party's social position (Wacquant and Wilson 1993). To engage in social capital processes requires sociality, effort, agency, connecting closely to habitus and the recursive and cyclical way in which capitals operate (Schaefer-McDaniel 2004; Weller 2010).

The term "social capital" is influential beyond Bourdieu. Coleman (1988) locates it in the bonds between parents and children and the transmission of norms and values that support cohesive communities. Putnam (2000) considers it a feature of communities and societies, the sum of relationships of trust, cooperation, and reciprocity within them. In Putnam, *bonding* capital characterises relationships of sameness and similarity through relationships of trust and cooperation that sustain group identities (Allison 2017; Edwards 2004; Woolcock 2001) while *bridging* capitals consist of weaker ties beyond or across social groups, through which broader resources become available (Edwards 2004; Fukuyama 2001; Putnam 2000). Others add *linking* capitals - relationships with social institutions or powerful social actors (Allison 2017; Forbes and Sime 2016; Woolcock 2001).

In these approaches, social capital is an asset whose possession is valued and whose loss is a source of concern (Forbes and Sime 2016; Morrow 1999; 2001). A paradigm of "social capital lost" (Edwards 2004, p. 2) is evident when Coleman (1988) talks of non-normative family structures eroding social norms, or in Putnam's (2007) concern that migration and diversity threaten community cohesion (see Portes and Vickstrom 2018). Within migration, some suggest a normative pathway from bonding to bridging over time, where overreliance on bonding can be harmful to the individual and a risk to society – echoing ideas of segmented assimilation above. The Home Office (2011, cited in Turner 2015, p. 635) frames language requirements for family visas in these terms:

"All those who come to the UK with the intention of settling…need to speak English well enough to communicate and forge links with people in the UK [and] have an understanding of the values and principles underlying British society."

Asset approaches can rely on essentialised and homogeneous ideas of cultural groups and "ethnic capitals" with little attention to in-group stratifications, power dynamics and divisions – the "minorities within the minorities" (Yuval-Davies 2007, p. 56) and the "dark side" of social group dynamics (Allison 2017, p. 51; see Anthias 2007; Erel and Ryan

2019). For Bourdieu (1984) social capital plays a role in systems of inequality and is not necessarily a good in its own right, and this is significant here. A "critical synthesis" (Shaefer-McDaniel 2004, p. 158) of these approaches can provide helpful insights as bonding/bridging capitals are uncoupled from their problematic ideological bases (as in Ager and Strang 2008; Erel and Ryan 2019; Hek et al 2007; Sime and Fox 2015; Spicer 2008). Strang and Quinn (2021) propose a continuum, rather than a binary, arguing that relationships can simultaneously bond and bridge and that both forms of capital have value in migration.

Bourdieu has been critiqued for instrumentalising relationships and an excessive focus on social advantage. Anthias (2007, pp. 793-794) distinguishes "positively advantaged" social capital - which contributes to "social leverage" (de Souza Briggs 1998, p. 178) and the ability to get ahead – from "negatively advantaged" capitals characterised by "social support" (ibid, p. 178) which support survival, coping or the mitigation of disadvantage. Feminist scholars seek to transcend Bourdieu's instrumentalism by exploring emotional and affective dynamics beyond the "feelings of gratitude, respect, friendship" that underpin social capital relationships (Bourdieu in Devine 2009, p. 249). Reay (2000; 2004; 2005) defines emotional capitals as the emotional resources available to a person, connected to their habitus, their place in nurturing relationships, and to the availability of other resources that support accumulation of emotional resources. She and others explore the emotional foundations of relationships, the investment of emotional energy and resources in care and the unequal distribution of those resources (Holt et al 2013; O'Brien 2008; 2016; Reay 1998). Finally, "spatial capital" (Centner 2008, p. 194) or "mobility capital" (Moret 2016, p. 1458) refer to inequalities in how people navigate space, and how spatial inequalities impact on other capital processes (Cresswell 2010; Franquesa 2011; Mace 2015).

Capitals, agencies and bricolage practices

As outlined in the introduction, migrant children are often reduced to passive objects rather than active agents. Equally, there is a risk of framing the UK immigration regime as totalising and monolithic with migrants reduced to helpless, passive victims. Some authors recentre agency by focusing on children's participation in family decision-making around migration (Ackers and Stalford 2004; Bushin 2009; Moskal and Tyrell 2016), while much of the literature below explores children's active navigation of their social and cultural worlds. A capitals perspective positions children and parents as "active social capitalists" (Weller 2006, p. 561; Morrow 1999; 2001) whose access to resources and ability to convert them is enabled or constrained by social positions within families,

communities and wider society (Ergler and Wood 2018; Weller 2010). A capitals perspective provides insight into…

> "…the interplay of agency, structure, resources and resourcefulness, contingency and social policy…at play in the individual biography" (Holland et al 2007, p. 107).

Focusing solely on suffering, vulnerabilisation and marginalisation also frames migrant childhoods as essentially different from "normal" childhoods, framed as spaces of unfettered happiness and innocence (Ungar 2004). Rutter (2012) argues that all children experience troubles and adversities, while children in Fattore et al (2017, p. 239) suggest that wellbeing lies not in perpetual happiness but in the…

> "…interweaving of complex emotions—such as joy with frustration or sadness with happiness—that are invested in and reflect the significance of certain relationships and life events."

These feelings are situational, temporal, and relational, connected to children's sense of being supported to cope with or manage adversities, and to integrate them into a meaningful sense of self (ibid). Ideas of resilience are significant here, although resilience (like wellbeing) often lacks definitional clarity and theoretical depth (Panter-Brick 2014).

Resilience is not the absence of vulnerability but rather the ability to cope or adapt *despite* it - a "flexibility" that supports children to "bounce back…even to thrive" despite experiencing significant difficulties (Mohamed 2012, p. 6). Like capitals, resilience is often considered as a trait or individual asset in public policy (see Davidson and Carlin 2019). Ungar (2019, p. 2) moves beyond individual-psychological understandings of traits towards systemic ideas of resilience as a process, connecting it to resource distribution:

> "(Resilience is) the capacity of a biopsychosocial system…to navigate to the resources necessary to sustain positive functioning under stress, as well as the capacity of systems to negotiate for resources to be provided in ways that are experienced as meaningful."

These resources, like capitals, are inequitably distributed (Panter-Brick and Eggerman 2012; Panter-Brick and Leckman 2013). Ideas of typicality, proportionality, meaningfulness, and subjectivity are central; whether a response is understood as resilient is contingent, contextual, and often subjective (Sleijpen et al 2017). Sometimes, resilience can have a "price" in other domains of wellbeing; responses that seem

problematic are required for coping or relate to different subjective understandings of meaningful, liveable life (Masten 2014, p. 14). In Smith (2020), children describe suppressing expressions of fear, frustration and anger to protect their parents – what appears to be resilience on the surface masks profound levels of need.

This thesis couples these ideas with Phillimore et al's (2019 p. 236) concept of welfare bricolage, the...

> "…mobilisation, use and re-use, of wide-ranging resources, including various knowledge resources, and multiple ideas, materials and networks in order to address particular health concerns."

Bricolage occurs where formal provisions to meet welfare needs are inadequate, and relies on assemblages of resources whose accumulation and mobilisation is unequally distributed. The concept has been used to explore how undocumented families bricolage survival and wellbeing in deportability (Jolly 2018b). These concepts – capitals, agency, and bricolage – provide an architecture for this project. The following section explores literature around migrant child and family wellbeing in these terms.

Deportability, habitus and ontological (in)security

Insecurity of status relates to ontological security - the "positively secure sense of being" (Thorpe 2013, p. 116) that comes from knowing what to expect from the world and being able to act meaningfully within it. It is…

> …the confidence or trust we have in the world around us, both in terms of the things and the people with which we share our lives [and] which provide stability and a continuity to our identity." (Noble 2005, p. 113)

For Fattore et al (2017) this is a crucial aspect of children's subjective wellbeing, without which they experience the world as risky, insecure and source of existential concern. Ontological security and habitus are connected - both about an orientation to the world where routine, predictability and unconscious engagements contribute to coherent identities (Giddens 1984; Mitzen 2016; Moore 2019). Alignment between habitus, disposition and field supports comfort and security; conversely, a poor fit erodes ontological security as habitus becomes incoherent and continuity of self is eroded, leading to "social discomfort" (Noble 2005, p. 115) or a "sense of unease, anxiety and dislocation" (Friedman 2016, p. 130). Ontological security acts as a site of inequality related to temporal elements of nonbeing and the regimes of time in immigration control (Cwerner 2001; Thorpe 2013).

Griffiths (2014, p. 1992) suggests that "temporal angst" in deportability results from four qualities of time:

- *Sticky* time: being stuck*,* unable to fill time and feeling removed from forward-moving trajectories of peers and society more widely;
- *Suspended* time: stasis or non-progression while awaiting resolution;
- *Frenzied* time: sudden, potentially overwhelming changes or developments where time moves quickly and chaotically;

Suspended and sticky time can be found throughout research on migration that focuses on time spent waiting for resolution of status. Initial asylum decisions in the UK take an average of 15 months (Neal 2021, s6.22) and there has been a twelvefold increase in the numbers of children awaiting initial decisions for a year or more, with some waiting for 3 and even 5 years (Pinter 2021, p. 18; Hewett 2021). 19% of families on S95 asylum support[3] have been for over 5 years (Pinter 2021) while 39% of Mulvey's (2009, p. 17) S4[4] recipients were receiving support for 2 years and 16% for 3 or more. Families are subject to the "bureaucratic time" of Home Office decision-making that is indeterminate in length and uncertain in outcome (Gil Everaert 2021, p. 4327; Hughes 2021). Consequently, living with precarious status is…

> "…experienced as a series of days overlooking a precipice, with each day having the potential to bring profound and unwanted change." (Griffiths 2014, p. 2001).

Children in the asylum system in Hek (2005) describe this waiting as anxiety-provoking, emotionally draining and unpleasant. Kalverboer et al's (2009, p. 54) child participants, who have been in deportability for over five years, describe feeling frightened, insecure, anxious and worried, with panic attacks and nightmares caused by "lengthy asylum procedures and the long periods of living in anxiety and insecurity." Children in McCarthy and Marks (2010) describe fear, worry and concern because their lives and futures are entirely in the hands of immigration authorities. Older children and young adults who have grown up with Limited Leave to Remain talk of worry, stress, fear, insecurity, and exhaustion, describing life as…

> "…a rollercoaster; a tightrope ('just hoping not to fall'); a game of snakes and ladders, where there are only snakes; like holding your breath; being on

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[3] Of the Immigration and Asylum Act (1999)
[4] Immigration and Asylum Act (1999)

probation; an itch you can't scratch; a rigged system; doing a jigsaw with no picture to follow; a rupture of our identity." (Bawdon 2021, p. 9)

The everyday presence of fear features throughout literature across different national contexts; letters, knocks at the door, attendance at support services, even being outside become threatening and dangerous experiences (Lind 2017, 2019b; Wahlstrom Smith 2018). Smith (2020, p. 1) uses "embodied fear" to describe somatic physical symptoms – headaches, stomach problems, aches and pains – associated with the stress of uncertainty by children and parents, findings echoed elsewhere (Castaneda et al 2009; Garande and Bawdon 2020; Kleinert et al 2019; Samara et al 2020; Sigona and Hughes 2012). The ontological and physical security that comes from resolved status is often described as a prerequisite for general health and wellbeing for children (Kohli 2006; 2011) and adults (Van der Boor et al 2020a).

Sticky and suspended time also connect to ideas of "policy-imposed liminality" (Hynes 2011, p. 114), "stagnancy" (Hocking 2018, p. 1162), or "lives on hold" (Sleijpen et al 2017), where those with precarious status are removed from the temporal rhythms and linear trajectories of "normal" life (Khosravi 2014). As Fattore et al (2017) argue, children understand their own wellbeing in terms of present and future, synchronicity between the two supports a sense of ontological security and thus wellbeing. Folke (2018, p. 1510) describes how many migrant children instead experience "temporal desynchrony" and "blockage" relative to peers, to their imagined life trajectories and to social and chronological markers of age resulting in despair, depression, frustration, and isolation. Unaccompanied young people in Brekke (2010) and Chase (2013, p. 1517) experience disorientation in the absence of forward movement, an "existential struggle to imagine a meaningful present and a purposeful future" (also Allsopp et al 2015; Thomas et al 2018). As Bloch et al (2009, p10) found among undocumented children and young people, there is…

> "…an ever-present sense of feeling trapped in a situation where marginality cannot be resolved and a future cannot be constructed. Thus, making plans for the future – a crucial part of the optimism of youth – is constantly appraised against the possibility of being arrested and deported."

Some suggest that this sense of "directionless time" (Brekke 2010 p. 164,) is particularly acute for older children. While younger children appear more able to adapt or to frame lives in positive terms (Mohamed 2012; Mohamed and Thomas 2017) older children may experience more temporal issues. In Sleijpen et al (2017), older children find it harder to fit in at school, feeling lost or disconnected from their goals or aspirations or from their

peers (see also Samara et al 2020). Those in Hughes (2021, p. 199) describe growing up in an "eternal present", blocked from opportunities while peers moved forwards with college, university or employment (also Bawdon 2021; Garande and Bawdon 2020).

Similar dynamics are evident among adults. Being unable to work or access education, and being uncertain if or when resolution might come, makes it difficult to plan or prepare for the future or to live well in the present (Allan 2012). Bare, unliveable lives are caused in part by "ontological liminality":

> "The internalised sense of being a liminal being, where an 'in between' existence becomes part of one's identity and everyday lived experience…having no sense of security or control over the future, and no active role in society in the present." (O'Reilly 2018, p. 835).

Adult asylum applicants in Scotland describe time as passive, empty and suspended, with no future to orient or progress towards (Rotter 2016). In other studies with asylum-seekers, people describe pressure towards mere survival and lives of "not-being" (Parker 2018, p. 13) - days spent sleeping, eating and "waiting for life to resume" while unable to move forwards (Bjertrup et al 2018, p. 57). Undocumented participants in Sigona and Hughes (2012, p. 26) describe "wasting away" with no power to change their circumstances, evidencing the corrosive power of temporal exclusion.

Resisting ontological insecurities

Several studies explore how people reassert some control over time, seeking to "inhabit the meanwhile" by creating routines, rhythms, and predictability to make time more meaningful (Gil Everaert 2021, p. 4327). Rotter (2016, pp. 93-94) explores how asylum-seeking parents in Scotland engage in "active waiting" by creating busy everyday routines:

> "Preparing the children for the day ahead, escorting them to school, travelling to college to attend classes, collecting the children, going to a local meeting to discuss and lobby on asylum issues and returning home to cook the evening meal and put the children to bed."

Similarly, adult asylum applicants in Smith (2015) describe daily structure as significant, connected to purposeful and meaningful activity (work, volunteering, education). Adults in Targarona Rifa and Dona (2021, p. 11) overcome this by working illegally or informally to avoid being "trapped in an oppressive time" while recreating important understandings of themselves as workers and contributors. This is discussed further in the section on parental identities below.

Roets et al (2015) propose a focus on how migrant children shape and give meaning to regimes of time in their lives. Children in Smith (2020) counter temporal uncertainty through activities that provide escape, distraction, or the suspension of deportability. Children have been found to use the active maintenance of positivity, hope and optimism as coping strategies (Maegusuku-Hewett et al 2007; Raghallaigh and Gilligan 2010), reflecting wider resilience research where a future-orientation contributes to meaning-making by constructing a life that, although hard, makes sense and is oriented to something (Panter-Brick and Eggerman 2012). Young people with Limited Leave to Remain in Thomas et al (2018) likewise use faith, hope and a path to achieving aspirations to protect against temporal and ontological insecurity. Faith and religion feature in research with parents and children, connected to ideas of hope and meaning, stability and continuity, belonging and sociocultural connection (Merry et al 2017; Pieloch et al 2016; Raghallaigh 2018; Sigona and Hughes 2012; Sleijpen et al 2016).

Brekke (2010) finds that many children and young people try to manage temporal practices through practices of "holding on" – work, volunteering, education, preparation for an imagined future – but that others cope by "letting go", unable to sustain hope and optimism against corrosive temporal dynamics (also Kohli & Mather, 2003). Ultimately, waiting is itself an act of agency and resistance – to secure status a victory against the temporal strategies of immigration control (Dickson and Rosen 2020; Rotter 2016). For some undocumented migrants there are no clear routes to resolution through regularised status (Sigona and Hughes 2012), and temporal insecurity is managed through disappearance and lives lived outside the immigration process.

Economic capital and life-as-survival

Further wellbeing impacts of deportability relate to material wellbeing, poverty and deprivation. Migrant families in the UK are disproportionately affected by poverty (Children's Society 2020; Hughes and Kenway 2016; Vizard et al 2018). As Chapter 1 argues, poverty and destitution are built into the immigration system through restrictions on work and denial of public funds or other provisions to meet material need. For those granted some form of status or permitted to work, delays in benefits for newly granted refugees (Strang et al 2018), high unemployment rates in refugee communities (Mulvey 2013) and the prevalence of low-paid and precarious work among migrant communities contributes to higher poverty levels (McBride et al 2020; Pirie 2020). In families living with NRPF and the right to work, parents report working long hours in low-paid roles or working casual jobs which do not provide sufficient income (Fernandez-Reino 2020; Pinter et al 2020; Waite et al 2015). For those forced to pay for regular applications, all income goes towards fees and debt is common (Makinde et al 2019; Pinter et al 2020).

Many precarious migrants face struggles in meeting basic material needs, a form of necropolitical "slow violence" Mayblin (2020, p. 111) where people are permitted to live but are subject to injury and corrosive precarity.

Food insecurity acts as a site of differential humanity and of bare, unliveable life (Carney 2014). Several scoping reviews and quantitative studies suggest that precarious migrant children are at increased and even extreme risk of food poverty (Douglas et al 2018; Maynard et al 2019). Jolly and Thompson (2022) find that 94.6% of children in undocumented households in Birmingham are food insecure. The primary influences on food security are access to money to pay for food, to travel to buy food, pay for utensils and meet energy costs (Douglas et al 2018). Food also relates to accommodation; being accommodated in hotels or B&Bs often means having no cooking facilities (Dexter et al 2016; Jolly 2018b; Price and Spencer 2015).

Several studies with migrant families find parents and children concerned with their food's sufficiency and its nutritional value (Bloch et al 2009; Douglas et al 2018; Jolly 2018b; Maynard et al 2019; O'Connell and Brannen 2019; Sigona and Hughes 2012). Undocumented children in O'Connell et al (2019) and in O'Connell and Brannen (2019) report feeling hungry during the day and at night, with impacts on their energy levels, educational engagement and overall health. The consequences of this can be severe. Lynne Mutumba starved to death while receiving NRPF support in England (Jolly 2018a), while a Significant Case Review for "Ellie" reported that she was found in a flat with no food, suggesting malnutrition or starvation (Farmer 2021). In August 2020, Mercy Baguma, a destitute lone parent, died in Glasgow in the flat where she cared for her 1-year-old son Adriel, who also showed signs of malnutrition (Ball 2022).

Food insecurity is not only about sustenance; it relates to social and cultural norms and feelings of comfort, belonging, safety and social connection (Abbots 2016; Dowler and O'Connor 2012). Abbots (2016) describes how food practices can act as anchors for migrants – markers of home, safety and belonging. In circumstances of insecurity, this can be undermined; food becomes a source of anxiety about when and what one might eat, and a site of lost autonomy and choice (Mayblin 2017; 2019; McBride et al 2020). For illegalised migrant women in Cairney (2014), food insecurity speaks to the unfulfilled hopes of migration, and to the loss of traditions, practices and cultural values transmitted through food practices. Food becomes a site of shame, indignity and social and cultural dislocation, rather than a site of security and belonging.

Reducing life to material survival has broader wellbeing impacts, linked to the foundational nature of economic capital. It has emotional capital impacts – living in

poverty can cause feelings of anxiety, sadness, anger, low self-esteem and low confidence, shame and humiliation, corroding emotional resources (O'Brien 2016; Ridge 2007; 2011). Adult asylum-seekers in Scotland describe depression and low mood, anxiety and physical health issues because of poverty and destitution (McKenna 2018; Rotter 2016). Refugees in Scotland in Lindsay et al (2010, p. 13) connect ideas of a "dignified life" to warm homes, adequate food, internet access, household essentials and access to social lives – all things that they lack, and which require money. Reacroft (2008, p. 3) finds that asylum support provisions prevent families from having "decent, or even tolerable lives." The remainder of the literature frequent references the role of economic capital in other domains of wellbeing.

Bricolaging material wellbeing

Material bricolage practices are visible throughout the literature. Ramachandran (2019, 2020) explores how destitute asylum seekers in Glasgow rely on semi-formal and informal forms of social protection – charities, friends, cultural and community groups – meet material needs. Sigona and Hughes (2012, p. 21) similarly describe how undocumented families survive through…

> "…a complex network of support, that included formal provisions through mostly charitable organisations as well as informal support through friends and family"

Negatively-advantaged social capitals become crucial to survival, as do connections with services (Anthias 2007). Third sector and charitable organisations become involved where mainstream systems for meeting need are inadequate or unavailable (Pemberton and Doos 2017). Zetter et al (2005, p. 175) described how refugee community organisations were forced to into "filling the increasingly large void left by the withdrawal of state support" after the NASS system was created; these echoed more recently by Mayblin and James (2019).

Bricolage practices also include practices of care, and the practical and emotional labour carried out within households. Parents with NRPF in O'Connell et al (2019) describe buying food based on cost, walking long distances to find the cheapest options; begging for or borrowing food or money; and volunteering in spaces where food is freely available. Adult asylum-seekers in Mayblin (2017) split the costs of food with friends and eat together. Parents describe skipping meals so that children might eat more (Cairns 2018; Children's Society 2013; Jolly et al 2018a, 2018b; O'Connell and Brannan 2019; Thomas et al 2018). Children's agency is also evident here. Children in poverty might refrain from asking parents for money, protecting parents from shame or distress (Farthing et al 2016; Mazzoli-Smith and Todd 2019; McKenna 2018; Ridge 2011).

Children with NRPF describe reducing their food demands; skipping meals, saving food or money, sharing with siblings, and not inviting friends home to avoid pressure on household resources (Cairns 2018; Fram et al 2011; O'Connell and Brannen 2019; O'Connell et al 2019). These connect to children's sense of their own moral agency, a crucial dimension of children's subjective wellbeing (Fattore et al 2017).

Bricolage, exploitation and domestic violence

Deportability and deprivation combine to create and sustain conditions for violence and exploitation (Bloch et al 2014; Griffiths and Yeo 2021). Material bricolage practices can include working in low-paid, unsafe working conditions, where illegality prevents resistance or accountability and people become trapped in exploitative work (Bloch et al 2009; Sigona and Hughes 2012; Targarona Rifa and Dona 2021). Material precarity contributes to transactional sexual relationships and sexual exploitation (Dexter et al 2016; Jolly 2018b; Maternity Action 2019; McKenna 2018; Price and Spencer 2015; Sigona and Hughes 2012). Fee requirements for immigration applications are also associated with criminal, labour and sexual exploitation and predatory lending (Pinter 2020; Thomas et al 2018).

Patterns of domestic violence connect directly to status precarity and hostile immigration policies. Status asymmetries within a household are power asymmetries, and several studies describe how abusive partners threaten to report spouses to immigration authorities, threaten separation from children, withhold immigration and identity documentation, refuse to resolve partners' status, and prevent the creation of social networks through forced isolation (Anitha 2008; 2010; Dexter et al 2016; Dudley 2015, 2017; EHRC 2017; McKenna 2018; Voolma 2018). Fears around homelessness, destitution, deportation, or children's welfare are barriers to disclosure and safety (Dudley 2017), while having NRPF creates a "false choice" between violent circumstances and the unknown in a context where information often comes from abusers (Voolma 2018, p. 1844). While the Domestic Violence Concession was created in 2012 to provide a route to temporary status and public funds for survivors, it currently applies in limited circumstances (ibid). Refuge places are funded through public funds and are closed to those with NRPF (EHRC 2017). Practitioners in Dudley (2015, p. 2) link hostile policies and "patchy and inconsistent" services to destitution, exploitation, returns to unsafe relationships and to women's deaths and disappearances.

Family dynamics, household relationships and parenting

Beyond domestic violence, deportability connects to other aspects of family relationships. Risk-factor research connects worse parental PTSD scores, maternal

depression, and parental unemployment to worsened PTSD, depression, and anxiety scores for children (Fazel et al 2012; Kadir et al 2019; Laban et al 2004; Lustig et al 2004; Scharpf et al 2020). Children's direct observation of parents' "helplessness" is also associated with poor outcomes for children (Fazel et al 2002, p. 367) while Hodes and Vostanis (2018, p. 720) find that post-migration stressors negatively impact upon "family organisation, routines and quality of care."

Studies have connected migrant parents' poor mental health to impacts on parent-child attachment (Barnes 2020; van Ee et al 2016), to harsh or authoritarian parenting and to under-stimulation, neglect, and parental unresponsiveness (Bryant et al 2018; Fazel and Betancourt 2018; Hek 2005; Kalverboer et al 2009). These in turn can lead to emotional, behaviour and psychological problems for children (Fazel and Betancourt 2018; Hodes and Vostanis 2018). Conversely, "family cohesion", positive parental mental health and a positive parent-child relationships protect against poor mental health for children (Ehntholt and Yule 2006; Fazel et al 2012, p. 273; Scharpf et al 2020).

Acculturative approaches also explore parenting and family cohesion, often through research focused on "acculturation gaps" (Telzer 2010, p. 1177) or "dissonant acculturation" (Portes and Rumbaut 2001, p. 310), where migrant children adapt more quickly than their parents and conflict occurs in the household, causing negative outcomes. Qualitative research again complements these findings. Parents in McGovern and Devine (2016, p. 38) describe transmitting cultural norms, traditions, and practices as a "love labour" and a practice of care, while those in Roubeni et al (2015) connect their parenting role to cultural transmission and moral guidance. Dissonant acculturation can cause disempowerment, changes in family roles, and a lesser role for parents' cultural capitals (Moskal 2014).

Other qualitative research explores parental subjective wellbeing specifically related to deportability. In Merry et al's (2017, p. 9) qualitative review, refugee, asylum-seeking and undocumented parents feel "demoralized, inadequate and humiliated" by poverty, housing issues, discrimination, and by barriers to normative parenting practices (also Hedstrom et al 2021; Ogbu et al 2014). As Reacroft (2008, p. 18) finds among families in the UK asylum system:

> "The poverty experienced by families who are not allowed to work for years, combined with feelings of low self-esteem and sometimes humiliation, can make it very difficult for parents to provide happy and secure homes for their children."

Parental wellbeing is impacted by several aspects of nonbeing. Work restrictions can result in parents being denied a role as contributors to family life and wider society,

unable to participate in economic, social and cultural capital processes (Gupta and Sullivan 2013; Smith 2015). Some have explored gendered dynamics here. Asylum-seeking fathers in Smith (2015), Targarona Rifa and Dona (2021) and Bergnehr (2019) express despondence, frustration, and a loss of status in families and communities. Mothers in Targarona Rifa and Dona (2021) and Gupta and Sullivan (2013) feel cut off from vocations and occupations, valued roles and practices of care and support. Occupation and parental identity are closely connected.

Other aspects of parenting are threatened by precarious status. Undocumented parents in Sigona and Hughes (2012) feel overwhelmed, inadequate, and unable to protect their children from the everyday impacts of deportability. Asylum-seeking mothers in Belgium in Lietaert et al (2020, p. 5) connect parenting to ontological insecurity, describing a "chronic stress [which] reduced their ability to be patient with their children or created feelings of powerlessness." McGovern and Devine (2016) find that poverty, racism, trauma, and insecurity inhibit the emotional resources parents can invest in caring relationships. Children in Sime (2018a) describe seeing their parents' energies drained by migratory circumstances and stressors. Smith and Lockwood (2021, p. 179) use "incapacitated mothering" to describe how deportability is incompatible with subjective ideas of maternal care – keeping children safe, providing materially, supporting their social development – causing feelings of suffering, shame, and loss. These parents also describe the impact of limited support networks on parenting (ibid; also Lewig 2010; Longman et al 2013; Van Der Boor 2020a). Social, emotional, and economic capital dynamics combine with ontological insecurities to impact on parental identities and practices of care.

Recent feminist scholarship critiques how migrant parents are made problematic. Mothers are often framed as inadequate, failing to support children's integration and thus as threats to social order (Erel and Reynolds 2017; Smith and Lockwood 2021)**.** Focusing purely on challenges and deficits can also sustain the image of migrant parenting as pathological. Agency and bricolage can be found in the "motherwork" and "fatherwork" involved in parenting under challenging circumstances, and in how parents resist narratives that position them in deficit terms (Lind 2019b, p. 2; Brouckaert and Longman 2018).

A positive sense of parental identity and purpose can come from assessing adversities according to children's imagined futures and their "deferred wellbeing" (Ni Laoire et al 2008, p. 6; Roubeni et al 2015). Lind (2019b) frames this as a form of political agency, where parenting becomes about avoiding deportation to ensure future wellbeing.

Positive emotional dynamics exist alongside negative ones; women describe feelings of joy and happiness, love and pride and a sense of maturity, responsibility, and purpose in their parenting in Vervliet et al (2013) and Van Der Boor et al (2020a). Women in Longman et al (2013, p. 394) capitalise their limited relationships by building "mothering networks", creatively negotiating cultural and social worlds to access resources. Ungar and Kuru (2020) describe refugee mothers actively building children's social and cultural resources, passing on values and beliefs to support their resilience, while undocumented women in Brouckaert and Longman (2018) actively navigate societal attitudes and expectations towards their children alongside their own valued practices of love and care.

Social capitals and belongings

Within acculturative research, the social world is often divided into abstract cultural segments - the cultural mainstream and the distinct cultural groupings of migrant communities, the centre and the margins (Alba and Nee 2003; Waters et al 2016). Children are positioned between two cultural worlds, or as entirely adrift from cultural connections because of their movement, essentially different to their sedentary and monoculturally-embedded peers (Amadasi 2013; White et al 2015). Several authors counter this narrative by focusing on *belongings* (Ni Laoire et al 2008a; 2016; Raghallaigh 2018; White et al 2015). For Wood and Waite (2011, p. 201), belonging refers to the…

> "…dynamic emotional attachment that relates people to the material and social worlds that they inhabit and experience. It is about feeling 'at home' and 'secure', but it is equally about being recognised and understood."

This is an affective and relational process connecting wellbeing and identity to meaningful relationships with people, places, objects, or activities (Gil Everaert 2004; Yuval-Davies et al 2006). Rather than exploring whether children and parents are integrated, the question is whether they *feel they belong* as they navigate dynamics of sameness and difference, inclusion and exclusion, commonality, and distinction (Amadasi 2013; Askins 2014; 2016). Children are neither adrift nor split between two social worlds; instead, they engage in "multiple belongings" (White et al 2015, p. 1). As Ni Laoire et al (2010, p. 157) argue:

> "Children perform multiple and intersecting identities, which are variously gendered, racialized, localized and commodified…Their negotiations of identity and belonging involve intersecting relations and identifications on different scales."

Civic rights and legal status have been identified as necessary precursors to feelings of belonging in some domains (Ager and Strang 2008). At the scale of national belonging, children in Lind (2017) describe how feelings of "Britishness" are undermined by rejected applications and unresolved status, causing upset and anxiety. Belongings are connected to social, cultural, emotional and economic capital dynamics (Schaefer-McDaniel 2004) and unsettled status has a significant influence on access to these. There exists a "politics of belonging" that migrants navigate, everyday feelings connect to laws, policies and social institutions and the parameters they set for everyday life (Antonisch 2010 in Visser 2020, p. 323).

Friendships, relationships and social capitals

Fattore et al (2017) find that children's subjective wellbeing connects to identities formed through relationships, and friendships, family relationships and social connections feature regularly in literature around migrant child wellbeing. The self-reported support of peers and communities are protective factors in risk-factor research (Curtis et al 2018; Fazel et al 2012; Marley and Mauki 2019; Pieloch et al 2016; Scharpf et al 2020; Sleijpen et al 2016). Mohamed (2012, p. 127) describes friendships as "a constant thread in the otherwise disrupted narrative" of asylum-seeking and refugee children's lives, with the *quality* of relationships important; friendships of warmth and closeness act as a source of stability and strength in adversity.

Children in deportability have connected friendship to feelings of belonging, inclusion, fun, distraction, and emotional support (Raghallaigh 2018; Sleijpen et al 2016; 2017). In Thomas et al (2018), undocumented young people talk of friends as a source of social participation, meaningful activity and of emotional support underpinned by trust and reciprocity. For adolescent refugee girls in Bergnehr et al (2020, p. 541), common experiences, shared activities, and a sense of "experienced similarity" are significant in creating friendships of closeness and belonging. Other studies explore how relationships among refugee children (Amina et al 2022) and migrant children more generally (Jorgensen 2017; Sime and Fox 2015) support new arrivals to navigate social and cultural dynamics, influencing feelings of comfort, security and belonging in schools and communities (Hek 2005; Pinson and Arnot 2010). Friendships and social relationships are similarly significant for adults. Asylum-seekers in O'Reilly (2016) describe how friendships and connections help them manage the uncertainties of deportability while Askins (2015, p. 471) describes how relationships of care, interdependence and mutuality build a sense of belonging and connection to resist the pressures of deportability.

Friendships and social capitals are central to bricolage practices, acting as sources of information, financial assistance, accommodation, and other instrumental support (Mayblin et al 2017; McKenna 2018; Sigona and Hughes 2012; Thomas et al 2018). Instrumental and emotional dynamics combine; as Hardwick and Hardwick (2015, p. 284) find, friendships and connections…

> "…mitigate against the isolation that can place families under considerable strain, and their absence can exacerbate tensions known to contribute to child and domestic abuse."

As forms of negatively advantaged social capital, often with others in similar structural circumstances, these relationships can easily become strained or exhausted and relationships can fall apart (Sigona and Hughes 2012; Thomas et al 2018). In-group power dynamics can also exclude certain people from "bonding" relationships because they do not conform to norms and expectations within groups or communities (Erel 2010; Erel and Ryan 2019).

This point highlights how belongings and identities are relational and depend on recognition and validation by significant others. Peer interactions bring opportunities for this validation, but also bring risks of rejection, invalidation, discrimination, and exclusion, making them sources of significant anxiety (Bloch et al 2009; Ni Laoire et al 2010; Ridge 2011). Just as the children in Amina et al (2022) describe friendships contributing to belonging, so too does absence or exclusion from friendships lead to feelings of being disconnected, alone, invisible, and different. Asylum-seeking children in Hek (2005) describe how schools are sites of isolation, bullying and exclusion and schools are often explored as spaces where children's claims to belonging are challenged or undermined (Folke 2018; Korp and Stretmo 2020; Pinson et al 2010). Refugee children in Ljung Egeland (2019) work to position themselves as valid friends, but their claims often meet racism and hostility, and they are forced to spend more time with children in similar circumstances even as they seek out bridging connections.

The sense of effort or work in Ljung Egelund (2019) highlights how migrant children's skilfully and strategically navigate dynamics of difference and the anxieties of relationship-building (Wiseman 2020). Some children downplay bullying, racism and discrimination as isolated, minor incidents on wider trajectories of belonging (Ni Laoire et al 2008; 2010; Ossipow et al 2019). Others might resist bullying through fighting or aggression, a form of resilience and self-protection that might further undermine their wellbeing (Mohamed 2012). Devine (2009) explores how migrant girls use cultural capital dynamics - language, dress or activities - to appear less different or to embody

high-status gender norms. Children in Ni Laoire et al (2010; 2015) sometimes emphasise their differences, transforming them into positives where cultural capital fields allow. Children bricolage their multiple belongings from the resources available to them.

Deportability and social capital

Immigration status is a structural influence on relationships, setting parameters in which friendships and social capital dynamics occur. Poverty impacts on children's sense of difference and their capacity to form and sustain friendships, which can again become sites of "anxiety, unhappiness and social insecurity" (Ridge 2011 p. 75). Shared experience and activity are central to developing relationships (Bergnehr et al 2020), and leisure activities allow children to develop sociality and feelings of confidence and competence, contributing to self-worth, identities, and belongings (De Martini Ugolotti and Caudwell 2021; Fattore et al 2017; Mata-Codesal and Tieslet 2015). Several authors explore how the lack of economic capital caused by deportability acts as a barrier to these activities and to opportunities to be sociable (Thomas et al 2018), to access shared experiences (Bergnehr et al 2020), and to accumulate or mobilise social and cultural resources (Sime and Fox 2015).

Poverty also impacts on consumption and access to objectified cultural capitals - "symbolic markers of social inclusion" (Ridge 2011, p. 75) – which can become further sites of difference (Phoenix 2019). Ni Laoire et al (2010) and White et al (2015) explore how migrant children engage with both local and global consumer resources through music, media, fashion and clothing - things more readily available to those with money. O'Connell et al (2019) describe the anxieties that children with NRPF face within an economy of dignity, struggling to access the cultural resources to present valued identities to their peers. This is also true of adult asylum-seekers. Participants in McKenna (2018, p. 58) speak about not having a "dignified wardrobe" or being able to afford essentials for personal care. Similarly, those in Mayblin (2019, p. 116) connect inadequate clothing and personal care items to "the embodied physicality of everyday shame and the extent to which shame can frame one's being in the world". People yearn for social connections but are prevented from seeking them out because of stigmatised identities as well as the financial costs of participation (ibid; Lindsay et al 2010).

In wider research on children's subjective wellbeing (Fattore et al 2012; 2017) feeling materially *normal* next to peers is significant, while feeling different leads to shame and stigma that children work to suppress or overcome (Ridge 2011; Treanor 2015). Evidence suggests that many migrant children do not feel materially normal. Those in O'Connell et al (2019b) and O'Connell and Brannan (2019) describe extensive

strategizing to avoid shame and stigma, including meticulous planning or making excuses to avoid social spaces where their material difference might become visible. Spontaneous socialisation, gift exchange or material care practices that support close friendships are inaccessible (ibid). Self-exclusion from social activities because of costs or shame reflects wider findings on children's agency in managing poverty (Attree 2004; Farthing et al 2016; Ridge 2002; Sigona and Hughes 2012). This sense of difference includes other aspects of deportability, summarised by young people in Brekke (2010, p. 164) who describe the social capital impacts of temporal exclusion:

> "The uncertainty regarding whether they would get to stay in the country also obstructed their direct interaction with other young people…The lack of a certain future in Sweden made them less attractive as friends and partners."

Cultural capitals, emotional capitals and ontological insecurities combine to influence social capital dynamics and thus belongings. Belongings also connect to spatial capitals and the impacts of housing, communities and mobilities on wellbeing.

Spatial Dynamics of Wellbeing

Space and place are central to belongings (Ni Laoire et al 2010; Schaefer-McDaniel 2004) with houses and homes central to ontological security as sites of routine, comfort, meaningful relationships and identity formation (Centner 2008). Evidence among migrants shows accommodation is often inadequate, insufficient and precarious – a site of ontological insecurity and a negative influence on wellbeing.

Homelessness and insecure accommodation feature throughout UK research on migrant families, including street-homelessness, families staying with friends and acquaintances, and "precarious, unstable and unsafe" rented accommodation (Pinter et al 2020, p. 4; Thomas et al 2018). Denied mainstream housing options, undocumented and NRPF families in Sigona and Hughes (2012) and Bloch et al (2009) pay high rents for overcrowded, unsuitable housing where children report discomfort and a lack of privacy and safety. Families supported by social work NRPF provisions often live in hotels, hostels, and B&Bs, without cooking or laundry facilities, with limited privacy and inadequate furniture (Dexter et al 2016; Jolly 2018a; 2018b; Price and Spencer 2015). Children with NRPF in Dickson (2019) describe living among rats and cockroaches, a lack of basic facilities and a fear of other residents in shared accommodation. Asylum support accommodation is consistently found to be of poor quality with damp, infestations, and poorly maintained homes and buildings (Allsopp et al 2016; Children's Society 2013; Hirschler 2021; Mulvey 2013; Reacroft 2008; Smith and Lockwood 2019). Asylum support is also a space of surveillance by housing staff, who have been found

to treat families poorly (Children's Society 2013) and to leave complaints, repairs, and other issues unresolved (Hirschler 2021).

Children connect their housing circumstances to issues with sleep, a lack of space to play or to do homework and with issues concentrating in school (Ridge 2002; 2011; Sigona and Hughes 2012). Children with NRPF in O'Connell and Brannan (2019) avoid inviting friends to their houses, unable to reciprocate home visits and to feel like equal partners in friendship. Rather than being a space of comfort, safety and security, housing becomes a space of discomfort, fear, anxiety and vulnerability that can worsen physical and mental health conditions for children and parents (Allsopp et al 2016; Children's Society 2013; Garande and Bawdon 2020; Pinter et al 2020).

Spatial dynamics extend to neighbourhoods and communities. Dispersal policies have often placed families in areas with established histories of racist harassment or violence (Children's Society 2013; Reacroft 2008; Stewart 2012). Asylum-seeking children in Spicer (2008) differentiate *including* areas – spaces that support friendship, a secure sense of place, and independent movement – from *excluding* areas seen as risky and dangerous due to crime, physical degradation, and unfamiliarity. Mobility capital is required to move beyond unsafe spaces but is often limited by both lack of money and by fears and concerns, and geographical horizons can become limited (Sime and Fox 2015; Wager et al 2010). Some studies find migrant parents placing limitations on children's movements (Smith 2020) and children self-managing their own movements where neighbourhoods feel unfamiliar, unsafe or insecure (Lindsay et al 2010; Sime and Fox 2015; Spicer 2008). Sime (2018a) explores how these limitations impact children's social capital networks, but also how children use their networks to transform alien spaces into sites of safety and belonging. Children in Visser (2020), who live in culturally diverse areas, describe feeling a sense of belonging and security while those in O'Connell et al (2019) also describe some local areas as spaces of support, solidarity and connection.

Hypermobility

Being sedentary for a time is often necessary to build up relationships and the sense of orientation in space that supports feelings of belonging (Dahinden 2010). Conversely, unexpected movements can disrupt routines, relationships and practices that support any sense of comfort and ontological security (Moore 2019). Many migrant families experience "hypermobility" where they move between houses, communities or cities frequently and often on short notice (Tazzioli 2020, p. 510). In asylum support, dispersal prevents families from choosing where they live, with sudden and unexpected moves

post-dispersal a common experience (Bloch and Schuster 2005; Children's Society 2013; Mulvey 2015; Reacroft 2008). Families in other precarious circumstances experience evictions or sudden moves beyond their control (Sigona and Hughes 2012; Thomas et al 2018).

A sense of spatial and relational dislocation features throughout the literature, connected to the challenges of making and sustaining support networks under circumstances of hypermobility (Hardwick and Hardwick 2015; Hek et al 2012; Mulvey 2015; Stewart 2012). For children, moving house often means moving school and losing friendships, connections to people and place and any sense of belonging (Curtis et al 2018; Hek 2005; Hek et al 2012; Mohamed and Thomas 2017; Ni Laoire et al 2008; Sleijpen et al 2016; 2017). The loss of emotionally and socially satisfying friendships profoundly affects children's wellbeing (Holt et al 2013; Jorgensen 2017) and movement can impact on children's sociality – the skills, dispositions and habitus required to form friendships characterised by trust and reciprocity (Brown 2012; Holt et al 2013). Kalverboer et al (2019, p. 57) summarises the cumulative pressures of deportability on children's friendships and belongings, with children in their study described as "very lonely":

> "They felt ashamed about their situation [and] most children had moved residence several times, had changed schools often, and experienced problems with their leisure time. There was insufficient money in the families for hobbies and they could not keep up with their schoolmates."

Isolation is a significant feature throughout research with adults and children, impacting on belongings and thus on wellbeing (Fazel et al 2012; Mulvey 2013; McKenna 2018; Mohamed 2012).

Summary

This review has explored the wellbeing impacts of insecure status and the nature of life in nonbeing, which operates in part by limiting access to resources and routes for capital conversion and participation. This has impacts on mental health and psychological wellbeing, friendship and social relationships, safety and ontological security, and identities and belongings for parents and children. Families are vulnerabilised by the immigration system, but they also actively negotiate it through practices of bricolage, using the accumulation and mobilisation of resources to support wellbeing.

From Capitals to Candidacy

The final part of the literature review combines capitals with the candidacy framework of Dixon-Woods et al (2005; 2006). The candidacy framework explores inequalities in

service provision through the interaction between the identities and resources of prospective service users (candidates), and the characteristics of services. Candidacy processes are locally contingent and influenced by structural and cultural factors across multiple scales (Mackenzie et al 2019). The framework has several elements - not stages in a trajectory but mutually reinforcing dimensions assembled in a heuristic frame (Chase et al 2017).

Identification refers to how a person comes to identify as a candidate, a person with a need that a service might meet. Identification is identity-work, influenced by personally- and culturally-infused ideas about what wellbeing is and the role of services in supporting it (Dixon-Woods et al 2005; Malzer 2013). Identification is a space of anxiety and uncertainty; to identify as a candidate is to seek recognition of a part of one's identity (Dixon-Woods et al 2005). Social and structural dynamics and positionality can facilitate or suppress identification, as can past experiences with services (Mackenzie et al 2015; van der Boor et al 2020b). In Dixon-Woods et al (2005) children's candidacies depend on their parents acting as proxies in identification, connecting to parental identity (Dixon-Woods et al 2005; van der Boor et al 2020a). Children's own candidacy-identifications have received limited more limited attention.

Navigation is the movement from identification to point-of-entry, dependent on resources that are unequally distributed (Dixon-Woods et al 2005). **Permeability and Porosity** describe the "alignment" or "fit" between service systems for access and the resources of the candidate (Dixon-Woods et al 2005). A porous service requires few resources and is more accessible – e.g multiple routes to access, broad eligibility criteria, no costs of entry – while an impermeable service has more restrictive requirements. **Presentation** refers to the assertion of a candidacy and of the self as needful and legitimate, reliant again on the fit between the candidate's resources and the service's expectations or systems for access (Dixon-Woods et al 2005).

Through **adjudication,** candidacy is appraised, typically according to categorisations, heuristics and "a repertoire of routine judgements" (ibid, p. 112). Porosity, presentation and adjudication are often based on the fit between the candidacy presented and the "ideal user":

> "…who uses services precisely in the way they are intended for precisely the problems providers have identified the services as serving [...] with the exact set of competencies and resources required to make optimal use." (ibid, p. 53)

Adjudications result in **offers** (or denials) of support, which candidates accept, **resist** or outright refuse, part of an ongoing process of interaction and negotiation where the

candidate's agency is central (Mackenzie et al 2019). Candidacy occurs within **local operating conditions,** incorporating the design, resourcing, capacity, staffing arrangements, rules and regulations, "specific, localized cultural, organizational and political contexts" of services (Mackenzie et al 2013, p. 819). These contexts are akin to fields, with capital dynamics that candidates and practitioners navigate throughout the candidacy process.

Candidacy and recognition

Candidacy is about claims to identity and their (in)validation by services, and is connected here to the concept of recognition (Honneth 1995; 2004). Honneth argues that personhood and identity are intersubjective, formed in relationships and interactions (Houston 2016). Wellbeing, defined in eudaimonic terms of *flourishing,* emerges through three forms of recognition connected to fundamental human needs:

- Self-confidence, rooted in the experience of *love and care* from significant others;
- Self-respect and feelings of equal value, through *rights* and acceptance as an equal participant in relationships, communities and societies;
- Resilience and self-esteem, through *solidarity* - the recognition of one's individual capacities, traits and strengths (Honneth 1995).

Misrecognition lies in the denial of any or all of these, producing feelings of disrespect and "a false, distorted, reduced mode of being" (Balaton-Chrimes and Stead 2017, p. 4). As Bourdieu argues:

> "There is no worse deprivation, no worse privation, perhaps, than of losers in the symbolic struggle for recognition, for access to a socially recognised being, in a word, to humanity." (in Houston and Montgomery 2017, p. 3).

Misrecognition has a political dimension, present in government policies and the everyday practices of institutional actors (Danermark and Gellerstedt 2004; Garrett 2010). This political dimension is central to anticolonial developments in recognition theory. Where Honneth considers liberal democracy to be essential for a politics of recognition and social justice, Chapter 1 outlined how European democratic states build upon patterns of dehumanisation, exclusion, and the systematic *misrecognition* of migrantised populations. The "social death" (Houston 2016, p. 13) of misrecognition is similar to the "the status of living dead" (Mbembe 2003, p. 40) conferred by necropolitical power. Recognition depends on *recognizability* – being seen as fully human, a life considered a life – and this is denied by coloniality (Björngren Cuadra 2015; Butler 2009). For Oliver (2015, pp. 474-477), there is…

> "…a pathology of recognition inherent in colonization and oppression (which) makes oppressed peoples beholden to their oppressors for recognition, even if that recognition affords them political rights and improved social standing."

In migration, racialised and dehumanised populations are "subjects-in waiting" who quite literally apply for recognition and the rights of settlement, citizenship and humanity, withheld or conferred according to colonial logics (Almeida 2013, p. 87). (Mis)recognition is also present in integrationist policy, which delimits acceptable forms of cultural difference and sanctions the unacceptable (Chen 2018; Coulthard 2014). In candidacy, migrants are again "subjects-in-waiting", seeking validation of their identities from service providers (Almeida 2013, p. 87). Recognition is both institutional and interpersonal, speaking to how migrant candidacies (and therefore identities) are received by services in ways that alleviate or exacerbate the dynamics of misrecognition in coloniality.

Candidacies, recognition and migration: cross-cutting themes

The candidacy framework has been applied to migration as part of wider discussion of minority ethnic communities (Dixon-Woods et al 2005; Malzer 2013), exploring refugees' access to mental health services (Chase et al 2017; van der Boor et al 2020b) and peripherally in discussions of domestic violence support (Mackenzie et al 2013; 2015; 2019). This section outlines several cross-cutting themes in migrant candidacy, before exploring literature in specific service areas relevant to the thesis.

Cultural capital dynamics often feature in research on migrant candidacies via an asset-based approach focused on candidates' knowledge, their access to information, or their language abilities. Service inequalities are explained according to deficits or failures to acculturate and adapt (Cederberg 2015; Puwar 2004). Piacentini et al (2019, p. 262) counter this narrative by arguing that cultural resources are distributed unequally, in part due to migration status:

> "Access to information, knowledge and service familiarity are closely tied up with levels of individual capital and migratory trajectory of the migrant service user, and reveal how the immigration gateway may have a direct effect on health outcomes."

Many of the issues explored in Chapter 1 are relevant here. Illegalisation, deputization and welfare chauvinism influence candidacy by creating complex, confusing eligibilities and an environment of fear and hostility. As Brittle (2020, pp. 757-758) argues, deputization creates

"…a risk that children and their families will be unable to access essential services, such as health or education, because they live in fear of being removed or deported."

Young people in Makinde et al (2019, p. 22) describe how "even routine encounters feel fraught with danger". Illegality or ineligibility may be presumed or exposed; service engagements may result in immigration enforcement action; and every interactions risk the "spectacle of illegality" outlined above (Bhatia 2021; Candappa 2019; De Genova 2002, p. 493;). Precarity of status influences identification, navigation and presentation through the fears and anxieties created by a hostile immigration environment.

Poverty connects to navigation and porosity through direct and indirect costs of access, and economic and spatial capitals coalesce in transport issues, identified throughout literature in health (Kang et al 2019), leisure services and social activities (Fattore et al 2017; McKenna 2018; O'Connell et al 2019; Strang et al 2018), education (Sigona and Hughes 2012) and services in general (Dixon-Woods et al 2005; Thomas et al 2018):

"We received evidence which pointed to a lack of transport options for destitute asylum seekers and people with insecure immigration status to access essential services…This is especially true for people with young children." (EHRC 2017, s.93)

Social capital dynamics are also relevant. Dixon-Woods et al (2005, p. 105) argue that networks act as a "buffer" between candidates and services, as sources of information and advice as well as practical assistance. Piacentini et al (2019, p. 262) see migrants "feeling their way" through complex service systems with the support of peers, communities, and organisations. Similarly, among asylum-seekers in Ramachandran (2020, p. 242), social networks…

"…enabled newcomers to gain social connections (bonds, bridges and links) which helped them to address bureaucratic barriers, information gaps and other practical challenges."

Sime (2014) and Sime and Fox (2015, p. 531) explore how children's bonding and bridging relationships act as sources of information and knowledge of the unspoken "rules of engagement" – the cultural capitals, the habitus - through which services operate, and McGovern and Devine (2016) see children capitalising on cultural and social resources as part of their practices of care. Isolation and the erosion of social capitals in nonbeing are relevant here as they limit access to networks of this type.

Social and cultural capitals are relevant too in household and community power dynamics. Gender roles around care, domestic responsibilities and ideas of cultural acceptability may suppress women's candidacy identifications or limit candidacy resources (Slade and Dickson 2020). Childcare is a particular barrier to service access, a further space where social networks provide support (Dixon-Woods et al 2005; Strang et al 2018). Information circulates according to power dynamics that may render some paths unacceptable or inaccessible, permitting some candidacies while suppressing others (Dixon-Woods et al 2005; Sime 2014).

Other cross-cutting themes are service-focused. Some research is culturalist, exploring how services address issues of diversity and difference through "cultural competence" - providing interpreters, engaging with 'cultural' understandings of health or wellbeing, adapting to cultural diversity (see Bischoff et al 2003; Hudelson 2005; Pollard and Howard 2021). Again, an asset-focused approach risks missing other important aspects of candidacy, particularly the "implicit mechanisms" – the habitus – of services, their local operating conditions and habituated ways of working which may align poorly to migrant capitals (Mackenzie et al 2013, p. 807). The extent to which services are *structurally* competent (ibid) – whether they see and respond to structural inequalities in candidates' lives and in their own processes and practices – is relevant to understanding how candidacy dynamics and structural factors interact.

Interpersonal communicative dynamics are particularly important. Interpreting provision is a common feature in candidacy research, where the presence availability of professional interpreting is not linearly connected with improved communication – it depends on who interprets, on the quality of translation, and on whether interpreting practice promotes or inhibits communication (Dixon-Woods et al 2005). A significant strand of research explores how migrant children act as "language brokers" (Bauer 2016, p. 22) or "brokers of care" (García-Sánchez 2018, p. 168). Here, children can capitalise their social, cultural and emotional resources, giving voice to families' needs, solving problems and navigating complex communicative encounters. In Bauer (2016, pp. 28-29), children's brokerage is both instrumental and a practice of care as they engage in…

> "…paraphrasing, manipulating or censoring information…to protect their parents from "discrimination" and "humiliation", while ensuring that they received adequate services." (Bauer 2016, pp. 28-29)

There is a tension between those who seek to normalise these practices as aspects of children's care (Crafter and Iqbal 2022; Orellana and Phoenix 2017) and those concerned about "parentification", lost childhoods where children take on adult roles and

responsibility while denied the social-structural privileges of adulthood (Hughes 2021; Titzmann 2012).

Children often connect these experiences to feelings of moral agency and contribution to meaningful relationships (Fuligni 2019; Fuligni and Telzer 2012; Telzer and Fuligni 2009). Others find feelings of "pride and power" (Sleijpen et al 2017, p. 356) and a sense of competence and expertise (Orellana and Phoenix 2017). These positive feelings are tempered by feelings of frustration, embarrassment and stress, and brokerage can be burdensome or interfere with education or peer relationships (Bauer 2016; Fuligni 2018; Hek 2005; Telzer et al 2014; Titzmann 2012). Crafter and Iqbal (2022, p. 3) describe children in the UK acting as brokers within a hostile environment, participating in…

> "…a very public interaction in a potentially hostile context, with an outcome that is dependent on a dialogue between themselves, their families and another adult who is usually in a position of power and authority [...] Negative feelings towards brokering may be enhanced by brokering within a society that reacts negatively towards their parents, which in turn, can also lead to feelings of marginalisation."

Language, communicative orientation and structural circumstance combine in presentation and negotiation with services. Positive expressions of recognition through care, empathy, interest and support can counter exclusionary aspects of nonbeing, while negative communicative experiences can collude with them, producing feelings of rejection, dehumanisation, discrimination, hostility or neglect (Dixon-Woods et al 2005; MacKenzie et al 2013; 2019). Zurn (2015) outlines several pathologies of recognition that are relevant here. Invisibilisation occurs when services project a "harmful, disdainful disregard (where) warmth and acceptance…are withheld" in interpersonal interactions (Houston and Montgomery 2017, p. 186). Reification involves the objectification of human lives, the decontextualization of candidates from their wider circumstances, their strengths and their complex personhood (Hardesty 2015).

The final cross-cutting theme relates to resistance. Balaton-Chrimes and Stead (2017, pp. 4-5) argue that colonial dynamics of recognition are not totalising, instead providing a frame that people "refuse, reckon with, play with, turn away from, subvert or seek alternatives" to. This can involve creating alternative spaces or relationships of recognition or strategies of resistance against dominant colonial forms (Almeida 2013; Chen 2018; Coulthard 2014). The active avoidance of exclusionary, hostile and potentially risky services, a reliance on informal networks of mutual support, and practices of resistance, selective engagement, advocacy and persistence all speak to expressions of agency against dynamics of misrecognition in candidacy (Chase 2010;

Kohli 2006b; Robinson and Masocha 2017). At the same time, many candidacies are unresolvable if status or structural circumstances persist (Mackenzie et al 2013). While "small acts of recognition" from service providers can mitigate some of the impacts of nonbeing, its corrosive influence remains powerful (Hölscher (2014, p. 32).

Healthcare candidacy

In their systematic review of healthcare usage among undocumented migrants in Europe, Winters et al (2018), find services under-utilised, care inadequate and a range of barriers to access contributing to worse health outcomes. De Vito et al (2016) connect health inequalities for undocumented migrants to a causal complex including lack of entitlements, issues in knowledge, language barriers and a lack of cultural awareness from services, findings reflected in Kadir et al (2019) and Kang et al (2019). While most UK-based health research relates to England, where health structures differ from the Scottish context, this research remains relevant because of reserved immigration policies, deputization, and their combined impact on health and healthcare provision.

Culturalist approaches to identification in health have identified conflicts between medicalised, Westernised approaches to health and other understandings of wellbeing in migrant communities, which influence whether and when people seek treatment (Bhatia and Wallace 2007). Focusing on "health literacy" from a deficit perspective can suggest deviance from neutral, objective understandings of health that are patterned by coloniality (Carlson 2019). Cultural capitals are also evident in navigation, as several studies find low awareness of health services and systems among asylum-seekers and refugees in Glasgow (Ramachandran 2020; Strang and Quinn 2021). Service-side dynamics include issues in how information is made available to migrant communities, or in the health literacy of service providers themselves (Ahmadinia et al 2022; Willis et al 2014).

Identification, navigation and presentation are impacted by deportability. Across several studies, asylum applicants report suppressing or ignoring their health needs to focus on immigration circumstances or see no purpose in engaging with health services as long as status is unresolved (Bjertrup et al 2018; McKenna 2018; Nellums et al 2018). In Scotland, Isaacs et al (2020) find that those in deportability are unable to focus on their health or to access the things that support them in feeling healthy. In practical terms, navigation is also made harder by difficulties affording fares to travel to appointments and issues in accessing childcare (Hollowell et al 2012; Mayblin 2017).

Deputization through information-sharing with the Home Office can be a significant barrier in navigation and presentation for primary care (Rafighi et al 2016), mental health care (Pollard et al 2021) or healthcare generally (Devakumar et al 2020; Nellums et al 2018; Smith 2020; Weller et al 2019). When people do present, they risk refusal on the grounds of eligibility. In Weller et al (2019), 10% of undocumented and asylum-seeking adults had been refused healthcare and wider research often finds people being refused registration by GP surgeries because they lack proof of address or identity documentation, or because staff misinterpret the rules or their eligibilities (Bhatia and Wallace 2007; Boulton et al 2021; Kang et al 2019; Patel and Corbett 2017; Poduval et al 2015; Rafighi et al 2016; Thomas et al 2018). Having to prove eligibility and experiencing refusal contributes to feelings of stigma and exclusion from apparently accessible and universal services (Piacentini et al 2019). Similar dynamics are evident in the charging regime. Health staff have described charging regulations as complex, opaque and difficult to interpret (Murphy et al 2020; Russell et al 2019) and they have been connected to errors, refusals and delays in accessing healthcare (Feldman 2016; Nellums et al 2018). Healthcare professionals in Morris and Nanda (2021, p. 18) describe racial profiling and discrimination as "inherent to the design of the charging system", suppressing candidacies for care and treatment.

Other issues of porosity, presentation and adjudication include navigating a "gatekeeper-led" system of care which often contrasts with previous healthcare experiences, where candidates struggle to secure referrals or specialist care (O'Donnell et al 2008, p. 2; Hek 2005). Children and young people in Curtis et al (2018) describe GP registration issues, challenges securing initial and follow-up appointments and disagreements with practitioners creating issues accessing additional treatment. Many precarious migrants describe leaving healthcare for circumstances of crisis or using more accessible A&E services because of barriers to other forms of care (Dixon-Woods et al 2005; Morris and Nanda 2021; Poduval et al 2015; Rafighi et al 2016; O'Donnell et al 2008).

Interpersonal dynamics are also significant. Young undocumented migrants in Bloch et al (2009) describe how their negotiation of the health system depends on the discretion and decisions of individual staff members. Access is enabled by empathetic, humane treatment, and experiences of GPs listening, giving advice, and providing experiences of care and support (Bhatia and Wallace 2007; Lindsay et al 2010; McKenna 2018; Nellums et al 2018; Rafighi et al 2016; Sigona and Hughes 2012). Participants in O'Donnell et al (2008) describe the importance of continuity of care, of being listened to and respected, and where GPs understand and account for their migration circumstances. Conversely, many studies report experiences of discrimination and

hostility (Kang et al 2019; Nellums et al 2018; 2021; Pollard et al 2021; Rafighi et al 2016), of needs not being taken seriously, or health disclosures and candidacies inhibited by discontinuities in care (Bhatia and Wallace 2007; O'Donnell et al 2008).

Research on communication often focuses on language and interpreting; as above, the presence of professional interpreting is not directly connected with improved communication or positive outcomes (Piacentini et al 2019). In their initial paper, Dixon-Woods et al (2005) explore how a lack of choice over who interprets; worries about confidentiality and privacy; issues of mistranslation or dialect; and inappropriate interpreting practices (speaking for patients, unwanted interjections, poor boundaries) can deter help-seeking, inhibit the communication of need and of health information (see also Bhatia and Wallace 2007; Malzer 2013; O'Donnell et al 2007; van der Boor and White 2020b).

Placing these issues in structural context supports an understanding of the recursive nature of candidacy, where barriers to care or experiences of mistreatment, coupled with insecurity of status, negatively impact future presentations (Van der Boor et al 2020b). As Bradby et al (2019, p. 545) find in their research with unaccompanied children:

> "An off-hand comment from a professional is not an isolated incident. If young people expect to be treated with insensitivity or disregard, their engagement with services risks being minimal or absent."

Negative experiences and barriers can cause people with limited emotional capital to lose faith, lose energy and give up (Chase et al 2017). Persistence also features. Participants in Bhatia and Wallace (2007) registered with GPs through repeat presentations with the support of friends, family or support agencies; women in Chase et al (2017, p. 59) persist against unfavourable adjudications or impermeable services to secure access for their children with the support of "provider advocates" (ibid, p. 59) - practitioners providing direct support while assisting candidates to engage with other services.

Maternity and health visiting services

UK-based research on maternal and neonatal health connects deportability (poverty, mobility, insecurity, exploitability) to poor outcomes including miscarriage, poor post-natal mental health, low birthweight and increased infant and maternal mortality (Bragg et al 2018; Children's Society 2013; Fassetta et al 2016; Feldman 2016; Leifheit et al 2020; Murphy et al 2020; Nellums et al 2018; 2021). Phillimore (2016, p. 156) argues that maternity services are designed for a "homogeneous white, middle class, pregnancy

experience" where migrant women do not fit or align with service systems or expectations.

Candidacy identification dynamics include parents' non-medical understandings of pregnancy and not knowing whether care is needed (identification); the complexity of the healthcare system, not knowing how to access care, and issues with transport and other practicalities (navigation), and challenges in permeability including GP registration issues (EHRC 2017; Feldman 2016; Hollowell et al 2012; Phillimore 2016; Webber 2019). Hypermobility leads to disruption of care creating delays and impacting on trust and ongoing engagement (McKnight et al 2019). NHS charging rules can result in bills of several thousand pounds or the denial of care, and research finds women avoiding care because of charging anxieties and fears of immigration enforcement (Feldman 2016; Maternity Action 2019; 2021; Nellums et al 2021; Sigona and Hughes 2012; Webber 2019). Nellums et al (2021, p. 5) describe a "cycle of precarity" where…

> "…women's immigration status prevented them from working and made them chargeable for care. This in turn deterred them from care, impacting on their health outcomes. Finally, incurring a debt to the NHS could lead to data sharing with the Home Office, and impact on future immigration applications."

Charging contributes to dynamics of abuse, exploitation and violence, where women who leave relationships cease to be eligible for free maternity services (Maternity Action 2019).

Positive experiences of care are again connected to interpersonal dynamics. Many studies describe migrant women experiencing kindness and a sense of empathy, care and respect; practice that facilitates continuity of care and communication, is sensitive to cultural issues and responsive to contextual challenges and stressors supports trusting working relationships (Heslehurst et al 2018; Higginbottom et al 2019; McKnight et al 2019). Midwives in Rayment-Jones et al (2020, p. 1) describe good practice in terms of guiding women through a "fragmented, unfamiliar system and [responding] to their individual physical, emotional and social needs." Negative experiences connect to feelings of differential treatment, hostility or stereotyping, rudeness or insensitivity to structural circumstances and failures to provide appropriate interpreters or facilitate communication (Higginbottom et al 2019; McKnight et al 2019; Phillimore et al 2019; Woodman and Scott 2012). Feelings of restricted choice or control in maternity treatment contributes to a sense of pointlessness, powerlessness, or restricted agency, increasing the likelihood of disengagement (Heslehurst et al 2018; Hollowell et al 2012; Nellums et al 2021; Phillimore 2016).

Most UK research in health visiting is England-based, focused on practitioner perspectives on work with asylum-seekers and refugees. This study partly addresses the lack of service-user perspectives and research in Scotland. Practitioners describe the absence of similar services in other countries; different cultural understandings of health, the role of services and parenting practices; and anxieties about government involvement in family life as challenges in identification and ongoing engagement (Burchill and Pevalin 2014; Dransfield and Clark 2018; Drennan and Joseph 2005). Deportability issues feature in practitioners' attempts to support families to meet basic needs around survival and safety, feeling inhibited by perpetual crises and status restrictions (Burchill and Pevalin 2014; Drennan and Joseph 2005). Hypermobility abruptly ends relationships, whether through dispersal or disappearance of families afraid of immigration authorities (Burchill and Pevalin 2014; Dransfield and Clark 2018; Robertshaw et al 2017). Again, GP registration and gatekeeping are issues of permeability and porosity (Burchill and Pevalin 2012).

Practitioners describe visiting families at home to avoid travel issues; acting as provider-advocates through information, accompaniment, and advocacy; and attempting to reduce isolation by supporting wider links and social connections for families (Burchill and Pevalin 2012; 2014; Drennan and Joseph 2005). Interpreting is important, but workers express concerns around appropriateness, quality of practice, confidentiality, and mistrust in their work with professional interpreters (Burchill and Pevalin 2014; Dransfield and Clark 2018). Practice is also impacted by service-side dynamics; asylum-seeking families require more work for services with limited resources, and some health visitors evaluate candidates' deservingness and credibility, concerned with misuse or abuse of services (Burchill and Pevalin 2014). These studies call for greater training and support for health visitors around migration issues to improve structural competence (Burchill and Pevalin 2014; Drennan and Joseph 2005).

Social work and social care

A significant body of research explores social work with unaccompanied and separated children (e.g Kohli 2006a; 2006b; 2011) and research with families coalesces around practitioner perspectives on work with asylum-seekers and families' experiences of seeking out NRPF support. Most NRPF research is again England-based (Dennler 2018; Dexter et al 2016; Jolly 2018a; 2018b; 2020; Sigona and Hughes 2010; 2010) with Farmer (2017; 2021) and *Hidden Lives* (EHRC 2017) providing a Scottish perspective. These studies find consistent candidacy issues. Interpersonal dynamics include adversarial, interrogatory, credibility-focused presentations, and adjudications, with social workers threatening to remove children, to contact the Home Office, telling families

to leave the UK or suggesting parents return to abusive relationships (Children's Society 2020; Dennler 2018; Dexter et al 2016; EHRC 2017; Farmer 2017; 2021; Jolly 2018b, 2020; Sigona and Hughes 2010, 2012).

Adjudications and offers include the denial of accommodation or financial support within a system where "consideration of entitlements precedes assessment" of children's needs, rights or best interests (Jolly 2018b pp. 193-194). As outlined above, support is often in substandard accommodation with insufficient money to survive, only provided after destitution arises (Dexter et al 2016; Jolly 2018b; Jolly et al 2022; McKenna 2018; O'Connell et al 2019; Price and Spencer 2015). Farmer (2021, p. 3312) describes social workers in these circumstances as "agents of necropolitical exception" participating in a colonial system, and involvement in other areas of immigration policy has similarly led to allegations of collusion with a hostile, oppressive system (Cemlyn and Briskman 2003; Humphries 2004).

Research with social workers explores how practitioners manage tensions between personal values and political positions oriented towards providing care and support; rules, procedures, organisational priorities and limited resources; and exclusionary law and policy. In Sweden, Jonsson (2014) finds "critical" social workers subverting proceduralism through discretion; "legalistic improvisers" using loopholes in the law to assist undocumented families; and "conformers" who see families' problems resulting from bad choices, often framing women and children as passive victims and men as abusers of the system. Using discretion to provide services can be an act of recognition (Robinson and Masocha 2017; Williams and Briskman 2015) and some extend the definition of social work beyond its statutory setting, exploring how non-governmental services (Robinson and Masocha 2017) or independent social workers (Wroe 2019) provide advocacy or support apart from and even against statutory systems.

Some authors find that attempts to subvert exclusionary policy and practice can themselves be problematic and uphold colonial relationships (Gerbhardt 2021). Williams and Graham (2014) critique approaches to cultural competence in social work which essentialise difference or stereotypes rooted in colonial imaginaries. Wroe (2018) explores how humanitarian practices can maintain a narrative of victimhood, denying agency, capacity and full humanity of those subject to hostile immigration systems. Robinson (2014) similarly finds colonial "rescue" narratives in practice, which decontextualise migrants from both agency and structure and contribute to misrecognition through reification (Määttä 2018; Williams and Graham 2014). In Robinson and Masocha (2017) and Masocha (2015) asylum-seeking service users,

denied power in other areas, use silence, selective engagement or disengagement as forms of resistance against the problematic practices they encounter.

Recognition has been used in wider social work research to explore the importance of relationship-based, strengths-focused, care-driven practice (Cortis 2007; Featherstone et al 2012; Houston 2010; 2016). Björngren Cuadra (2015) explores how providing care, recognising strengths and promoting rights can subvert hostile migration policies in the everyday, while Hölscher (2014) argues that targeting structural problems and engaging in wider advocacy can bring some measure of recognition against hostile migration systems. Recognitive practice can be inhibited by local conditions and contextual dynamics. Robinson (2014) finds that compassion fatigue in work around migration inhibits emotional resources, while proceduralism, managerialism, stress, anxiety or secondary trauma can cause emotional detachment or disengaged practice (Ferguson 2014; 2016; Hingley-Jones and Ruch 2016; Solomon 2010; Winter et al 2016; 2019). The work of Broadhurst et al (2010a; 2010b p. 365) supports the idea that adjudications come from categorisations and heuristics, finding that time, resource, and managerial pressures result in…

> "…quick categorizations based on limited information (where) patterns of tacit reasoning can become entrenched as workers become habituated to methods of finding quick disposals."

Hingley-Jones and Ruch (2016) describe how "relational austerity" results from these influences, and Houston and Montgomery (2017) connect these to the pathologies of misrecognition outlined by Zurn (2015).

Education

Education and its future benefits are often cited by parents as a significant motivation for migration or for enduring deportability - "the way to regain lost status and a means for lifelong security for their children" (Bloch and Hirsch 2016, p. 2139; Moskal 2014; 2016; Sime et al 2010). McBride's (2018) literature review finds a common thread of enthusiasm and aspiration among migrant children, while Bloch and Hirsch (2016) describe a "blurring" of children's' hopes with their parents', connected to feelings of indebtedness and reciprocity (also Moskal 2016b; Fattore et al 2017). Identification connects to intersecting factors - class, gender, familial educational background - which can support educational identifications despite structural barriers or inhibit educational candidacies (Sime et al 2018; Moskal 2014).

Again, many studies focus on issues of cultural capital, including language barriers, knowledge of systems and structures, and adaptation to educational cultures for children (McBride 2018). The concept of institutional habitus describes how schools set parameters around expected service engagement that may not align well with the resources – and therefore the candidacies - of migrant children (Forbes and Lingard 2015; Paterson 2021). Language learning and adaptation to educational culture supports communication, classroom engagement and positive relationships, but several authors find a tendency to approach capitals in deficit terms, where pupils and their families rather than schools are targeted for change (McBride 2018; Moskal 2016). Positive responses to cultural difference include interpreting provision, hiring practices, additional language support, adaptation of the curriculum, and everyday displays of inclusion or awareness of migration and cultural difference throughout school life (Amina et al 2022; Hek 2005; McBride 2018; Rutter 2001; Sime 2018b;). Children have described how culturally diverse schools and inclusive practices create a sense of belonging (Candappa et al 2007; Hek 2005; Mohamed and Thomas 2017) although some caution against tokenism or stereotyping which can enhance feelings of difference (Ni Laoire et al 2010; Whitmarsh 2011).

Rutter (2001) and Sime (2018, pp. 8/9) argue that schools should encourage children to engage with materials and topics in other languages to reflect their "multiple literacies", strengths, and competencies – recognising rather than sanctioning difference. Moskal (2016) find schools in Scotland doing the opposite - assessing children's capacities exclusively according to language deficits, with their other knowledge, skills and abilities unacknowledged (also Amina et al 2022; Sime 2018b). Gladwell and Chetwynd (2018) find schools struggling to recognise, assess and adapt to additional support needs alongside language for asylum-seeking children. Separating migrant children from mainstream provision because of deficits in language or educational acculturation can contribute to a sense of difference and spatiotemporal exclusion (Folke 2018), and a mix of mainstreaming with some specialist classes aimed at cultural adaptation appears to support bonding and bridging relationships (Candappa et al 2007; Crul et al 2019). Smyth et al (2010, p. 154) study the Glasgow Asylum Seekers' Support Project (GASSP), finding that specialist provision within a mainstream setting supports multilingual learning, active recognition of cultural diversity and creates a "close and intimate community where pupils were introduced to school values, trust was established and close friendships flourished."

Primary pupils in Amina et al (2022) connect a sense of comfort and belonging to teachers being responsive to their knowledge, competencies and concerns, and wider

studies connect children's feelings of school belonging to teachers who provide help and support to learn and develop confidence (Hek 2005; Mohamed 2012). Conversely, some children describe teachers not recognising their capacities or contributions, or being unhelpful, hostile or discriminatory (Amina et al 2022; McBride 2020; Peterson et al 2017; Sime 2018b). The commitment and effort of individual staff members to welcome and support pupils and their families is significant (Gladwell and Chetwynd 2018). A mismatch between children's aspirations, expectations and competencies and their treatment by teachers and schools can result in demotivation and feelings of exclusion (McBride 2018; Peterson et al 2017).

Circumstances of deportability impact upon educational candidacies in a range of ways. Asylum-seeking and refugee pupils, parents and teachers in Gladwell and Chetwynd (2018, p. 21) report delays in initial access to primary and secondary schools with around 20% of pupils waiting for 9-12 months – delays connected to in-year arrivals, complex and confusing application processes, a lack of suitable places and dispersal issues. Mobility contributes to continued educational disruption, undermining the educational continuity that supports aspiration, positive relationships, and belongings (Bloch and Hirsch 2016; Fazel et al 2012; Hek 2005; Sleijpen et al 2016). Poverty impacts on children's ability to purchase books, uniforms and other essentials, to pay for trips or other activities (O'Brien 2008; Ridge 2011; Sigona and Hughes 2012; Sime et al 2018; Treanor 2015). Housing can impact on whether children have space for homework, whether they can sleep securely or have enough food to provide energy for the school day (Candappa et al 2007; O'Connell et al 2019).

These stressors can impact upon children's capacity to align with school expectations around engagement, and some research explores how schools respond. Teachers in Pinson et al (2010) commit additional attention to asylum-seeking and migrant students. Those in Arnot et al (2013) describe a "revelation" when learning of the circumstances of asylum-seeking pupils and responding through empathy rooted in a universal orientation. The authors express concern that this…

> "…might fail to recognise the very real experiences of government, forced migration and settlement, of surviving loss, death and destitution may not sufficiently emphasise the structural features of migration or children's resilience and agency." (ibid, p. 26)

Conversely, some studies find a lack of knowledge or awareness of migration issues among school staff (Gladwell and Chetwynd 2018) or teachers deliberately avoiding engagement with these issues, focusing instead on individual effort and attainment

rather than wider structural challenges (Lundberg 2020). Beyond the classroom, many authors argue that buddy systems, extracurricular activities and welcoming, inclusive environments can promote positive peer relationships and reduce risks of isolation and exclusion (Sime 2018b). Where issues of social and educational exclusion are not addressed, school can become a "sad necessity" and a source of anger, depression, and disengagement (Moskal 2014, p. 285; 2016; Amina et al 2022; Hek 2005).

Many of these issues are also relevant in parental engagement with education, a key issue in Scottish policy (Scottish Government 2018c). Schools can also be sites for parents to meet other people, to build their own connections to services and to others in similar circumstances (Peterson et al 2017; Sime 2018b). Language barriers, a lack of knowledge of systems or a lack of confidence can prevent parents and schools communicating around children's needs (Jolly 2018b; Moskal 2016; Sigona and Hughes 2012; Sime et al 2018). Schools can facilitate parental engagement through a welcoming orientation, and through language support in direct interactions and written communications (Hek 2005; McBride 2018; Sime et al 2018). Policy and practice here can uphold classed, gendered and racialised norms of engagement that may not cohere with parents' resources or their sense of roles and responsibilities (Sime et al 2018; Whitmarsh 2011). Structural and cultural competence means avoiding a universal expectation for all parents and adapting to the impacts of pre- and post-migration circumstances (Bloch and Hirsch 2016; Hamilton 2004; McBride 2018). Parents actively negotiate tensions or differences between school expectations and their own parenting practices (Brouckaert and Longman 2018).

Several authors have argued that a lack of funding, policy, and planning resulted in schools in deprived areas being expected to meet the additional needs of children dispersed through NASS without additional support (Arnot et al 2013; Hek 2005; McIntyre and Hall 2020; Pinson et al 2010). Koehler and Schneider (2019) find that some schools often consider migrant children temporary and therefore provide ad-hoc responses, while studies in England have found schools refusing or discouraging registration of migrant pupils who are framed as threats to attainment statistics (Arnot et al 2013; McIntyre and Hall 2020). These local conditions can have a particular impact on older students, who might be offered college placements for ESOL[5] instead of more suitable and holistic school placements (Gladwell and Chetwynd 2018). A lack of understanding, training and support to teachers, along with workload constraints, can inhibit their engagements with pupils' circumstances (McBride 2018). Pupil Equity

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[5] English for Speakers of Other Languages

Funding, given to schools in Scotland to address poverty-related attainment gaps, may provide some additional resourcing for local adaptations (Gladwell and Chetwynd 2018), although the focus on poverty alone risks ignoring migration-specific barriers to attainment (Forbes and Sime 2016).

Parents are also candidates in their own education, connected to the need to make meaningful use of time outlined above. Several studies explore public and third sector ESOL classes and college courses in Scotland. Knowledge of where and how to access classes, travel costs and childcare influence access (Meer 2020; Strang et al 2018). Gender dynamics are significant here, with caring roles and normative expectations suppressing women's candidacies (Ramachandran 2020; Slade and Dickson 2021). Meer (2020) and McKenna et al (2018) explore how motivation and attendance can be difficult given the stressors of the hostile environment. Slade and Dickson (2021) find that classroom dynamics of mutual respect, welcoming environments, flexibility and the provision of wider advice and support encourages engagement for students. Finally, errors in college and university assessments of eligibility can inhibit access to further and higher education, contributing to illegalisation and spatiotemporal exclusion (Garande and Bawdon 2021; McBride 2018; Sime 2018b).

Summary

There is a need for research providing a contextualised, subjective, qualitative complement to risk-factor and acculturative research on wellbeing. There is also a need to connect wellbeing to migration policy, and policy to its colonial foundations; to link abstract expressions of necropolitical power to everyday lives in nonbeing (Mayblin 2019). A capitals perspective provides this, but also explores the interplay between structure and agency in how people encounter and negotiate colonial power. Finally, there is a gap in Scottish policymaking and research exploring whether claims to a more welcoming, inclusive orientation towards migrant children accurately reflect everyday realities. A candidacy perspective connects these issues to service encounters, and precarious status is connected to a range of candidacy issues. The framework links structural, instrumental, and interpersonal dynamics in service provision to recognition, exploring the link between coloniality and everyday service encounters. The thesis now turns to the methodology used to explore these issues.

Chapter 3: Research Design and Methodology

Introduction

This chapter explores the development of aims and objectives, the key ontological and epistemological assumptions, and the process of recruitment, data collection and analysis for this study. It begins by outlining a critical realist approach, before discussing ethical considerations underpinning the study. The chapter then turns to qualitative methods of data collection and the approach to analysis. Throughout, it includes reflections on the research process.

Ontology and Epistemology

Quantitative or objectivist approaches to wellbeing often use adult- or researcher-imposed definitions, "telling the children what makes them happy" and using definitions that are culturally or ideologically contingent (McCarthy and Marks 2010, p. 587). I wanted to explore children's perspectives, but also those of significant adults – parents and service providers – as children's marginalised social position means that adults' perspectives influence how child wellbeing is enacted and supported (Fattore et al 2017). I wanted too to explore how ideas of wellbeing interact with other complex influences in the immigration system, in service provision and in everyday life. This led to my research questions, best explored through qualitative methods:

- How is child wellbeing considered by the various actors involved with families with precarious immigration status – families, public sector professionals and support organisations?
- What place do services have in supporting wellbeing under these circumstances?
- What happens when families need extra support – how and when do they approach services, and how do services respond?

I also wanted to explore causal elements around wellbeing and precarity, leading to a fourth question – "how is child and family wellbeing affected by immigration status?"

I felt that a purely constructionist, phenomenological or hermeneutic frame would not support a causal exploration, and instead chose a critical realist ontology (Bhaskar 1989; Fletcher 2017). Critical realism reconciles the apparent dualism between positivism and interpretivism by positing that while much of reality lies beyond what is observable, observation can provide insight into reality's true nature (Archer 2016). Reality consists of multiple, interacting strata. The *real* layer consists of unobserved/unobservable entities with causal *tendencies* - chemical, physical, or biological systems that are

relatively closed. Through their interactions, they produce the *actual,* which consists of new objects with new causal mechanisms and whose systems are more open. Phenomena become visible at the empirical level; constituted by the causal dynamics of lower strata, they have powers and potentials of their own (Bhaskar 1989; Danermark et al 2002).

The social world is multi-layered, historical and contextual; interactions at multiple levels influence the emergence of events under specific conditions (Reed and Harvey 1992). It is structured, with self-organising and self-sustaining elements that influence individual agency but do not determine them (Danermark et al 2002). Structures and agencies interact, each built upon layers of causal potentials but with causal potentials of their own. Structure is "real" insofar as it has generative causal powers in the actual that are visible in the actions and experiences of people in the empirical (Matthews 2009). Agents engage with reality through interpretation, meaning-making and action and in doing so they reproduce, renegotiate or transform the structures they live within (Houston 2001a; 2001b; Jessop 2001). What emerges is a negotiated order; recursive, contested and capable of change (Byrne 2013; Callaghan 2008).

Within an intersectional approach to critical realism, the idea of *positionality* helps to explore how social position is…

> "…enabled and constrained by generative structural mechanisms (which) operate in regard to particular intersections of wider structural categories, such as race, class, and gender." (Martinez Dy et al 2014, p. 13)

Immigration status is one of these categories, part of the "historically-sedimented structures of multiple oppressions" that influence wellbeing (Clegg 2016, p. 498). This approach allows an exploration of causal dynamics underpinning resource accumulation and capital conversion, and how these are permitted or constrained by structural positions (Gonsalves 2020). Bourdieusian sociology is about locating…

> "…buried structures of the various social worlds which constitute the social universe, as well as the "mechanisms" which tend to ensure their reproduction or their transformation." (Bourdieu and Wacquant 1992, p. 7).

Locating these mechanisms allows critical realism to suggest pathways for change (Chtereva 2016; Fleetwood 2013).

Critical realist methods seek out the systemic interactions that explain *how* and *why* social phenomena come to exist (Fletcher 2017; Parr 2015). While observation, experience and perspective provide insight into strata beyond the empirical, knowledge

is mediated by the observer's structural location and their own interpretations and cannot entirely account for the influence of unobserved and unobservable causal layers (Danermark et al 2002; Parr 2015). Rather than focusing on "lived experience" - which contains problematic ideas about authenticity and truth (McIntosh and Wright 2019) – this research explores how circumstances of (a)typicality, (un)commonality and (ir)regularity speak to causal dynamics in the social world.

Study setting and participants

All data in the project was collected in the Greater Glasgow area. Glasgow has seen centuries of in-migration and has been a dispersal area for more than 20 years, with a significant number of refugee and migrant support organisations emerging in response (Hisrchler 2021; Piacentini 2015; Wren 2007). It was also the city where I lived, worked, and had existing practice connections.

Recruitment was purposive and broad, driven by specific criteria but inclusive of a range of circumstances and contexts (Moser and Korstjens 2018). I used the following criteria:

- Professionals in the public and third sector involved in providing support to families with unsettled, precarious or uncertain immigration status.
- Families where members have (or have had) precarious, unsettled or uncertain status and who have accessed, tried to access or wanted to access additional support.

This definition reflected the diversity and fluidity of migration, and I drew very few boundaries around forms of status, although I excluded EU citizens whose migration circumstances were different to what I wanted to explore. I approached a range of services in child, family, and migration support, seeking diverse perspectives and cognisant of the ways in which migrant families are excluded from some service spaces. 15 practitioners in 7 third sector organisations, 11 parents and 8 children (aged 5-18) across 7 families participated in the study (see appendix A).

Ethical fundamentals – consent, confidentiality and reflexivity

Researching ethically required negotiation of issues of consent, confidentiality and ethical participation within the specific context of the research design, including how to ethically engage children and families vulnerabilised by the immigration system; how to work with multiple family members simultaneously; and how to navigate the dual roles of practitioner and researcher. The approach was guided by inclusive principles, seeking to enable participation, rather than to restrict it (Stalker et al 2004). The study design was approved by the University of Stirling General University Ethics Panel.

Ethical practice required ongoing reflective work, part of an *"active, personal and disciplinary ethical awareness"* (Butler 2002 p. 245). It also required *reflexive* engagement through ongoing consideration of my social position and background as my professional, intellectual, and personal background influenced research design and practice (Berger 2015; Rubin and Rubin 2005). This included exploration of power dynamics and disparities. I was both a researcher asking people about their lives; a practitioner with a professional background and organisational affiliation; and a person with gendered, racial, class and other forms of social privilege informing my own habitus. I engaged in discursive reflexivity with supervisors and with participants (Folkes 2022), and used a field diary to explore ethical issues in practice, to interrogate my position and assumptions and their impact on the research (Mann 2016, Rudestam and Newton 2014). I wrote in narrative form after every interaction in recruitment, data collection and in early analysis, discussing methods, observations, tentative points for analysis and contextual data (Borg 2001). Excerpts are included throughout the thesis.

Informed Consent and Recruitment

Ethical practice requires that all participants are informed in an accessible and meaningful way about the purpose, methods, funding and uses of research (Mayne et al 2016; Brodie 2001). To tailor the consent process to the specific needs, capacities and circumstances of participants, I developed several information sheets – one for practitioners, one for parents/carers, and two for children aimed at different age-groupings (appendix B). Each included information on the background, purpose and aims of the project; on data collection and their involvement; procedures for anonymity, confidentiality, and data storage; and the right to decline or withdraw (Shaw et al 2011). A professional translation service produced translated versions when required.

Consent is ongoing, and in all recruitment and data collection interactions I revisited key points, checked ongoing consent, and invited questions (Gallagher and Gallagher 2008; Morrow 2012; Shaw et al 2011). Consent is also relational, incorporating my relationship with participants, their own wider relationships, and the contexts in which these occurred. Reflexive work around recruitment required safeguards around "role-blurring" given my work within a third sector migrant support organisation (Pain 2011, p. 553). I was concerned that colleagues, partner organisations or family members might feel unable to refuse participation or might have concerns around service access, anonymity, confidentiality, or wider relationships (Brannick and Coghlan 2007). I drew clear boundaries between participation and service provision by foregrounding the voluntary nature of participation and the right to withdraw, highlighting boundaries between research and practice and creating space for questions, concerns or reservations (Jolly

2018a; Sime and Fox 2015). I managed role-blurring through ongoing reflexive work described throughout this chapter.

Confidentiality

In information and consent documents and in conversations with participants, I communicated that confidentiality could not be absolute and that I would have to share information with relevant authorities if I believed someone may be at risk of harm (Alderson and Morrow 2020; Dominelli 2009). I explained that I would speak to participants if this was the case, describing what information would be shared, with whom and why. Role-blurring was relevant in the different confidentiality thresholds between the research project and my employer if I was interviewing families receiving our services. I determined that a participant's need for support and safety outweighed research participation (Wysocki 2008). The prospect of breaching confidentiality emerged once, when two parents sought advice for friends who were caring for an older, very unwell and undocumented family member. They were avoiding health services because of a fear of immigration enforcement. I asked if I could discuss this with my supervisors – both to get their advice and because I was concerned about the safety of the adult being cared for. My supervisors and I concluded that sending information on sources of support that the family could send on to their friends would be an appropriate and proportionate response.

I recruited interpreters from agencies with strong confidentiality clauses in their codes of practice. On some occasions, interpreters and families had met before in service contexts. I explained that confidentiality extended to interpreters, checked that participants were happy to continue and checked on interpreter suitability for follow-up appointments. I offered the option of telephone interpreters to provide greater confidentiality, but all participants chose face-to-face interpreting.

Safety

I included lone-working safeguards as a routine part of research practice, ensuring supervisors knew where I was going, when and for approximately how long. I drove to unfamiliar areas with clear routes established beforehand; adhered to organisational risk management procedures when visiting services, and otherwise maintained an awareness of potentially risky situations. Safe practice also meant being trustworthy, protecting the dignity of participants by minimising intrusion, inconvenience, and distress, and being attuned to diverse circumstances and competencies (McRae 2009). I obtained a PVG certificate to evidence safety and suitability. Safety also required working within my own competence and practising self-care to ensure I was able to

engage in ongoing reflective and reflexive work. I had previously taken a leave of absence for my own wellbeing and was conscious of the impacts of stress and anxiety on my capacity to research ethically. To safeguard against this, I worked within a specific routine and within set hours to support work-life balance, continued to exercise regularly and maintained an active social life. I made active use of supervision and a reflective diary to ensure I could work in an ethical, trustworthy and competent manner.

Recruitment: third sector practitioners

Fifteen practitioners participated in this project, from seven third sector organisations. I have attached a contextual descriptor to each participant. Four worked for organisations providing support to migrant communities, typically working with parents ("migrant support"). Two worked for ethnic minority support and advocacy organisations ("advocacy"); one for an organisation providing legal support to migrants ("legal"); and the remaining seven for services described here as "family support", aimed at families in general but whose users included migrant families.

I began by listing organisations I was aware of and searched for others online, trying to identify "key informants" – organisations well-placed to participate and to provide information on other possible participants (Moser and Korstjens 2018, p. 10). I emailed managers and generic inboxes in 22 organisations, sending participant information sheets with a request to discuss the research with gatekeepers. Some organisations responded to offer a meeting; others suggested meeting later due to timing or capacity issues. Others declined involvement or did not respond. For the latter, I checked contact details and tried again two weeks later, ceasing contact after two or three unsuccessful approaches. To avoid being driven by convenience, and because of concerns with role-blurring and boundaries, I prioritised according to my understanding of organisational roles and remit rather than relying initially on colleagues, existing acquaintances, or professional connections.

I met with gatekeepers, usually managers, described the project using participant information sheets, answered questions and addressed any concerns. Often questions were practical or definitional and seemed designed to gauge alignment with the organisation's work – what did I mean by "precarious or unsettled immigration status" or by "support"? Other questions related to confidentiality, anonymity, and the interview topics, framed in terms of concern about the wellbeing of family participants and reputational or relational risks to the organisation. I began to send abridged interview schedules to pre-empt these questions. In conversations, I foregrounded my practice experience and tried to present as a credible, trustworthy, empathetic *insider,* framing

the research in ways intended to show alignment with participating organisations' work. Responses varied; to some gatekeepers and practitioners I was an *outsider* from a large, well-funded organisation competing for funding in a tense inter-organisational space. As Folkes (2022) argues, insider/outsider positions are transient and situational, positionality developed through discussion and in practice. I provided reassurance around the separation between research and my other work, particularly around confidentiality and anonymity, to provide reassurance here.

Where gatekeepers consented to their organisations' participation, some disseminated information among staff and others provided contact details for individual staff members. Third sector interviews typically took place within organisations' premises, with one in a local library. Through organisations, "snowballing" occurred (Moser and Korstjens 2018, p. 10); participants referred to organisations, practitioners or families in interviews, and post-interview I asked if they could help me locate and approach other participants. Some organisations or practitioners came up several times, suggesting they were key informants I should prioritise.

Parents and children – recruitment and consent

Eleven parents and eight children in seven families participated in the study. Five families were recruited through attendance at community events and two through practitioners. Families' circumstances showed the fluid nature of mobility, with histories of multiple movements and status transitions. Five were currently or previously asylum applicants. Two claimed asylum upon arrival with fathers as primary applicants; Jan, Maria and Eva were dispersed to Glasgow and living on asylum support, while Alan, Layla, Huseyn and Tara had been granted refugee status after several months and had transitioned to mainstream welfare provisions. Three families (Jane's, Jenny's, and Abigail's) had entered the asylum system and asylum support after long periods being undocumented. Two families (Anna, Philip and Kieran, and Harry, Nina, Ricky and Mia) had family visas before moving between forms of undocumentedness and deportability. Throughout the thesis, I also refer to parents and children whose circumstances were mentioned by practitioners but who did not participate directly in the study: Nick (lone parent, asylum applicant) and his daughter Maya (primary-school age); John and Zara (he with insecure status, she with leave to remain); Farida (lone parent, asylum applicant, infant child); Odette (lone parent, asylum applicant, infant child).

I was mindful in family recruitment of the mistrust, suspicion, and anxiety that deportability produces. Families whose lives are subject to immigration control or extensive service input may experience research as unwelcome, anxiety-inducing and

similar to interactions with other powerful actors (Sime 2016; 2017). My strategy reflected attempts to address or overcome these challenges by using two main approaches – recruitment through practitioners, and through attendance at key events and services where I could be confident that families meeting the inclusion criteria might be present (Fete et al 2019). I began by recruiting through services and practitioners, who often positioned themselves as a "credible and trusted intermediary" between the research and parents (Lewis 2009, p. 408). Some expressed concerns about upset and trauma, anonymity and confidentiality and interpreting provision. It felt like I was asking them to risk relationships and credibility; if family members had a negative experience, it would reflect on them and impact their work. I described my strategy for interpreting, anonymity and confidentiality, foregrounding my practice experience and insider credentials to address concerns. Where conversations followed interviews, practitioners appeared more comfortable as they were more aware of the nature of the research and my approach.

I asked practitioners to make initial contact with parents, provide a brief overview and obtain consent to pass on contact details to me. I provided advice on how practitioners could describe the research to avoiding misunderstandings, inaccuracies, or pressures to participate. A poster or flyer may have been beneficial; something that practitioners could give to parents or could distribute or display, creating a public research presence and inviting self-referral (Fete et al 2019; Keyzer et al 2005). One practitioner's involvement in recruitment extended into a first meeting with a parent. She felt that that Ben (parent, asylum applicant) would be anxious and mistrustful and that meeting together at her organisation might reassure him. My field notes record concerns about Ben feeling pressured or coerced, and that I aimed to be gentle but clear in discussing the project:

> "Ben chose to meet without an interpreter, but his English was not so strong as to make concepts like anonymity, confidentiality etc clear [...] he appeared nervous and uncertain, so I foregrounded these concepts as well as the concept of choice and informed consent. When I asked if he was interested, he said no. The practitioner who joined us began to talk too, in what felt like an effort to persuade Ben to be involved and felt more like pressure than the giving of information. I then ended up in the strange position of almost discouraging him from participating, as he began to look a little more upset, and of saying that it was OK – in fact, that it would be better for him to say no than to say yes when he didn't want to. I tried to do so cheerfully and happily, rather than being disappointed, and kept the offer open if he changed his mind." (Field notes, Ben)

I made the decision to end the meeting, expressing gratitude to Ben for his time and his honesty and to the practitioner for arranging the meeting.

I also recruited families by attending local community events at the invitation of services. Fete et al (2019) suggest that undocumented families may be more receptive to direct recruitment in venues associated with help and support, where they may feel more at ease or less concerned about disclosure or exposure of their status. I had information sheets translated professionally into five languages (Arabic, Farsi, Sorani, Russian and Mandarin) based on practitioners' suggestions and my own assessment of local language patterns. When participants agreed to further discussion, I could then translate consent forms and other documents. I approached parents directly, sometimes with the support of a volunteer who could introduce me. I shared an information sheet with parents and requested contact details for a follow-up phone call and more detailed discussion.

I minimised role-blurring by avoiding recruitment through my workplace or recruiting people with whom I had a current practice role or may have been likely to work with in future. I did not exclude families I had met or worked with previously, but in all cases the practice relationship was not ongoing and changes in my role and their circumstances meant further work was unlikely. Other parents mentioned during recruitment that they had received support from my organisation and there was ambivalence here where some described negative experience. I foregrounded the project's independence from practice, and that the choice of whether to participate would not affect any services they might receive. On some occasions, I did have to manage role-blurring directly. After our initial call but before our interview, one parent came to my organisation's office asking for help contacting a social worker. I did so after discussion with supervisors, recording my rationale in my reflective diary:

- "It's what I would have done whether or not she was likely to participate in the research.
- She has been very clear in understanding the distinction between research and my other job.
- I can request that colleagues assist with ongoing work if required [...]
- [...] the promise of the research is that it won't affect ongoing services and this is what we would do normally." (Field notes)

This parent had clearly described the independence of the research from the work in our interaction, and I was confident that boundaries could be maintained.

I followed up practitioner referrals and initial recruitment conversations with a phone call to one parent, using a telephone interpreter where necessary. I summarised the project, what participation would entail, and asked permission to send information sheets by email for parents to read. I then arranged to meet all family members together to talk about the project (Coad et al 2015; Cree et al 2002). Sometimes, first meeting and interview happened at the same time. Jenny (asylum applicant) explained that she had limited time and preferred to be interviewed immediately. I emphasised her voluntary participation and right to withdraw, and she was clear on her desire to participate and to be interviewed on the same day. This had additional implications around distress discussed in the section on data collection below.

I was mindful of how participants might communicate indirectly around consent – perhaps by disengaging, not replying or missing appointments. When these happened, I found that participants were not only willing but enthusiastic. When I first contacted Harry and Nina (parents, NRPF), they were experiencing a crisis including destitution and serious illness. In the weeks between initial contact and first meeting, Harry (parent, NRPF) communicated his continued interest despite these challenges. Consider too my first meeting with Abigail (parent, asylum applicant):

> "…when I arrived Abigail had forgotten and so we rearranged. She was still very enthusiastic, and so I returned a week later to the family home. This happened to be the same day as Abigail's substantive asylum interview, so I checked again that she was happy to be interviewed." (Field notes, Abigail)

Parents often communicated in ways that suggested enthusiasm and an active desire to participate, sometimes initiating ongoing contact with me rather than awaiting my texts or calls.

Consent, participation and family dynamics

Research within families involved engagement with complex relational dynamics around family life throughout the research process. I had to navigate relationships between parents, between parents and children, and between siblings, while engaging with each person individually to ensure that each understood the research and felt freedom of choice around participation (Lewis 2009). Mayall (2008, p. 116) describes a "triangle of conventions and negotiations" between parents, children and researcher but this felt more complex, incorporating multiple parents and multiple children. I was particularly concerned that participants may feel coerced by others – children by parents or siblings, spouses by their partners – to participate or to refuse (Nilsen and Rogers 2005). As Lewis (2009, p. 415) argues…

"…Some people's views and wishes may be either promoted or marginalised within family decision-making hierarchies. Although individuals are not fixed in positions of power/lessness, it may be that some, particularly children, are more likely to hold less powerful positions in decisions about research participation."

Throughout, I carefully observed and reflected on the communications between family members to detect any possible coercion, uncertainty or conflict (Holland et al 2010). I did not feel any participants were coerced into participating, but I did experience other issues around family dynamics. On one occasion, I was introduced to a group of women at a community event; when we started talking about the research their husbands came over, took charge of the interaction, and provided their own contact details, positioning themselves as gatekeepers to the family. In subsequent calls, many declined their families' participation, and the other parent's views were excluded. Encouraging direct self-referral by disseminating leaflets or flyers may have reduced these barriers.

I understood children's participation to be essential to the research questions, but also an ethical necessity redressing their marginalisation within research on wellbeing and on service provision (Clavering and McLaughlin 2007; Crivello et al 2009; Gallagher 2008; Hill 2006; Punch 2002). This marginalisation often builds on ideas of children as vulnerable, insufficiently knowledgeable or unable to contribute (Hess and Shandy 2008; Sime 2017). Even where children are seen to possess participation rights, those rights may be compromised where they are considered particularly vulnerable or the topic particularly sensitive (Eriksson and Näsman 2012; Powell and Smith 2009). Viewing consent purely through a contractual lens of rational, individual liberal subjects encourages the exclusion of children who are seen to lack full personhood (Tisdall 2018). Instead, viewing children's capacity and vulnerability as socially produced, rather than inherent, meant the context and relational dynamics of the research could mitigate vulnerability and support participation (McLaughlin 2020).

Extensive evidence shows that young children communicate sophisticated understandings of complex issues and their social worlds in research (Alderson 2008; Whincup 2015). Five is the age at which children typically develop independent relationships with public services, becoming "active in their engagement with adults, institutions, ideologies, which they interpret, reproduce, reinvent or negotiate in their own ways" (Sime 2017, p. 138). I included children and young people aged 5-18. Rather than rationalism, contractualism, and individualism, Erikson and Näsman (2012) foreground negotiation in consent, giving children choice in both whether and how to participate, and I adapted my approach to consent to account for a range of individual

circumstances, competencies and needs (McLaughlin 2020; Powell and Smith 2009; Punch 2002). I gave children a set of choices about how they would like to participate, including:

- Whether to participate at all;
- Whether to participate through an ecomapping exercise or an interview for those who preferred only to talk. I brought pens, paper and a Lego kit to include activity during conversation.
- whether to participate alone, with a sibling, or with parents nearby or elsewhere.

Children's consent and participation were negotiated in the context of family life, where there may be different ideas about of children's agency (Children in Scotland 2001; Lewis 2009). Parental consent was required to visit the family home, which acted as the primary setting for data collection (Bushin 2007). Parents needed reassurance that children were safe and that I was trustworthy, and this could only occur through communication and relational work (Coad et al 2015). I sought parental consent to interview all children under 16 (Alderson and Morrow 2020). I began the consent process by describing the research to parents and asking to visit the home to speak to family members together, with an interpreter when necessary. When I first visited Jan, Maria (parents) and Eva (14yo daughter) at their home, Maria and Eva were out and Jan wanted to carry out our interview immediately. I asked to rearrange another visit to meet everyone together, limiting our initial interaction to the information sheet and consent form. This resulted in the participation of the wider family.

During initial visits I would speak to parent(s) first and explain the research in detail, before inviting children to join us and explaining it to them directly with clear child-friendly language (Bushin 2007). Parents typically allowed the conversation to flow between me and children. I began by asking if children knew what "research" meant and tried (with mixed success) to provide a definition. From field notes with Nicole (11, asylum applicant), the first child to participate**:**

> "Good parts of the first meeting:
> - Asking them to explain what they think research is – 'you find out about something' (Nicole, 11, asylum applicant) and then building from there into practicalities. Still need to find a solid phrasing." (Field notes, Jane, Nicole and Jamie)

I tried to avoid abstract, complex "umbrella" concepts, such as 'wellbeing' or 'support' by replacing, supplementing or breaking these down (Crivello et al 2009, p. 59). I talked

about being happy, being well, having the things you need, the people and places who help or make life easier or who make things harder or more difficult. I replaced words like confidentiality/anonymity with simplified descriptions in information sheets and in conversation. Throughout I included space for children to ask questions and checked in with their understandings. I decided not to reference immigration status specifically; while this might have facilitated an "open context of awareness and a shared definition of the situation" in consent (Eriksson and Näsman 2012, p. 65) I could not be certain of the extent of their awareness of their circumstances. I explained that I was writing a book or report about "children who have come from/whose families have come to Scotland from somewhere else and what their lives are like" (appendix D). Interviewing parents first, usually without children present, meant I could learn about family circumstances and parents' sense of children's awareness, informing how I approached interviews with children.

Public Sector Access

My initial methodology included recruiting workers in social work and social care. Early interview participants described other services as significant - midwives, health visitors and teachers, with social workers either absent or limited to NRPF cases. This may reflect thresholds, policies of proportionate universalism or a sampling issue. I applied for ethical approval from the local authority but was refused with no recourse for reconsideration. As I considered approaching other public bodies, the pandemic prevented ongoing recruitment. The final sample contains no public sector participants.

Compensating participants

Family participants received a £5 voucher per person for a shop of their choice. I was conscious of concerns that compensation may be perceived as coercive, causing participants to consent where otherwise they would not, or may commodify or "corrupt" data where participants say what they believe the researcher wants to hear (Head 2009, p. 343; Alderson and Morrow 2004; Morrow 2012). In discussion with supervisors, I decided that compensation was an ethical *necessity*, a reflection of gratitude and appreciation for participants' contribution and compensation for their time and any inconvenience caused - less an incentive and more a form of recognition (Alderson and Morrow 2004; Bushin 2007; Morrow 2012). On one occasion Jan (parent, asylum applicant) expressed concern that this would break asylum support conditions; I told him I would check this, and later communicated my understanding that the vouchers would not constitute a breach. This interaction reflected some of the anxieties of nonbeing, and I believed that not providing vouchers would collude with the hostile immigration system.

I mentioned compensation towards the end of recruitment conversations so I could gauge interest and detect any change or coercive effect. Jane (parent) and Nicole (11, asylum applicants) seemed to treat it as an afterthought, appearing enthusiastic to participate throughout all our interactions. Jane's son Jamie (7), however…

> "…didn't respond to any questions, didn't seem interested and when asked if he wanted to take part he said very clearly that he didn't [...] I later mentioned to everyone that participants received a voucher, and he showed interest again." (Field notes – Jane, Nicole and Jamie)

My field notes record concern that this "felt more like bribery", but Jamie then ticked "no" to all the questions in the consent form. Had he consented, I would have explored further whether he truly did want to participate. I still gave him a voucher, noting in my field notes:

> "(Jamie) expressed disappointment when he found out he wouldn't get one if he didn't participate [...] He was present during all the research interactions, I was in his house, and it would have felt unfair and unreasonable to include everyone else and not him." (Field notes, Jane, Nicole and Jamie)

Vouchers, rather than cash, suggested a gift rather than a payment and supported a sense of reciprocity (Bushin 2007; Head 2009). Attending participants' homes I was often welcomed with something to eat or drink; I was a guest offered hospitality, and a voucher balanced this out, ensuring no one was financially worse-off (Hammett and Sporton 2012). £5 per person reflected my limited budget and a desire to avoid coercion, but in hindsight I believe this amount was too low. Where possible I gave vouchers individually rather than to the whole family, but some shops only provided vouchers of £10 or above or did not sell vouchers. Here, family members agreed to split a £10 voucher or would suggest another shop.

Consent and distress

Treating consent as an ongoing process, I was mindful of how changes might be communicated during data collection, particularly around participant distress or anxiety. Participant upset has been a rationale for excluding children from research on sensitive topics (Powell and Smith 2009) despite evidence that well-designed research can discuss difficult things without significant upset (e.g Eriksson and Näsman 2012; Grant et al 2019; Whincup 2015). Practitioners often expressed concern that I would ask parents or children about traumatic pasts; I reassured them that my focus was on their lives in the present, but I am not sure I fully appreciated the full impact of pre- and post-

migration stressors. Evident in Ben's circumstances above, these are also visible in this excerpt from Alan (parent, refugee status) when I asked about life before his family was granted status:

> It's like you're taking us back to that time and all this feelings are coming back, I feel it again.

I was attentive to body language, facial expressions or changes in behaviour that might indicate a reluctance to continue, invited participants to stop or take a break, or provided reassurance about the right to withdraw (Due et al 2014). These were evident in my interview with Jenny (parent, asylum applicant), who was tearful throughout as she spoke about traumatic past events and current difficulties. Early in our discussion she picked up her daughter Lisa (2yo) and held her as Lisa fell asleep; I felt that she drew comfort from this. Several times I checked in, clarified her right not to answer questions, to take a break or withdraw, but she always chose to continue. I felt like our interview may have been cathartic or that I was a witness to her experience; her distress not a barrier to participation but part of it, a cost proportional to the benefits of continuing.

While not as visibly upset, Harry and Nina (parents, NRPF) spoke of catharsis – "I feel relaxed that somebody came to listen to us" (Nina) – and of wanting to contribute to changes for other families. Ricky (11) and Mia (13, NRPF) similarly framed participation according to injustice, not wanting others to experience what they had gone through. Participation could be part of family members' resistance or coping, transforming negative experience into something meaningful, an expression of power and a way to have experiences witnessed, validated, and transformed into something useful. Agency is also evident in silences, selective disclosures and the choices participants made in whether and what to discuss. At the end of interviews, I provided a list of support services and sometimes suggested some that could help with issues participants raised. This was part of my strategy for managing role-blurring and supporting participants through distress, and I felt it enhanced the reciprocal nature of the research (Fete et al 2019).

Reflections on recruitment and sampling

Several recruitment issues influenced the shape of the data and my engagement with it. I found an apparent division between organisations working with families or parents which happened to include migrants, and organisations supporting migrant or BME populations including families. There were fewer organisations working specifically with migrant children within families, or aimed at migrant families specifically. This may reflect the wider policy focus on parenting support and the invisibility of children in families identified in chapter 1.

I also reflected on family characteristics. In five, all members spoke English as a first language or fluently. There are several possible reasons for this. Some services had limited interpreting budgets and had stronger connections with English-speaking families; NRPF disproportionately impacts women from former British colonies where English is regularly spoken; and many families had lived and worked in the UK for years. I hoped to recruit families receiving additional support around health or disability. One child here received support for a communicative impairment; one parent had a chronic physical health condition; and at least one other parent was seeking tertiary mental health treatment. Few practitioners described work with children or parents with disabilities, but some brief examples suggested this would be an interesting avenue for further exploration. Almost no participants suggested disability organisations that I could contact. The inclusion of children with disabilities and their families is a question of ethical necessity given their absence from wider research (Carpenter and McConkey 2012; Jenkin et al 2020; Stafford 2017; Tisdall 2018). My plans to focus recruitment around areas of disability or serious health need were prevented by Covid-19 and the end of data collection.

Within qualitative research, deciding when to stop data collection is contested. This study uses Reflexive Thematic Analysis (RTA; Braun and Clarke 2006; 2014; 2019; 2021) which critiques ideas of saturation based on the idea that research stops when no new relevant insights can be gained from further collection or analysis. Within reflexive thematic analysis, this is impossible because new insights can be obtained from new perspectives or engagement with data (Braun and Clarke 2021). Deciding to stop required "interpretative judgement" …

> "…shaped by the adequacy (richness, complexity) of the data for addressing the research question (but with a pragmatic 'nod' to sample size acceptability to the relevant research gatekeepers)." (Braun and Clarke 2019a, p. 11)

Josselson and Lieblich (2003) also refer to saturation of the researcher's capacity to continue collection without becoming overwhelmed. My interpretative judgement was influenced by conversations with supervisors and the challenges of the COVID-19 pandemic. Confident that I had data of sufficient quantity and quality to address my research questions, I stopped collection. I collected data between Spring 2019 and Spring 2020.

Data Collection

Semi-structured interviews

I felt that interviewing was well-suited to the research questions, concerned with how different actors understand wellbeing and their opinions or experiences of services. Data collection involved semi-structured interviews, which provided a dual flexibility – not being beholden to a script meant I could follow interesting threads, and participants could forward perspectives on matters important to them (Brinkmann 2013). Interviews were not technical exercises or "recipes" producing an unmediated view of experience or reality; they were complex, shaped by intersubjectivity and structural circumstance, by time and place, and by the "genre" of the interview (Mann 2016, p.xii, p. 14; Brinkmann 2013). All interviews were audio-recorded and transcribed.

Within critical realism, participants' narratives provide partial insights into the causal dynamics of reality, mediated by positionality and processes of meaning-making (Martin 2020). Critical realist approaches suggest asking participants to provide their "folk theories", seeking out linkages, relationships or sequences that suggest causal dynamics (Pawson and Manzano-Santaella 2012, p. 181; Manzano 2016; Westhorp 2013) or asking *why* and *how* questions around events in the empirical world (Brönnimann 2022). Martin (2020, pp. 162-164) argues that interviews should explore participants' descriptions *and* their explanations of…

> "…why they think this is the case, what processes they feel are causing it…and to identify what evidence they have…[It] is within their experiences that agential causal powers and social structures can be uncovered."

Folk theories and explanatory narratives come from a situated interpretative position communicated within the relational dynamics of the interview. Interviewees' perspectives are polyvocal, incomplete and open to multiple interpretations (Kvale and Brinkmann 2015). Researchers engage in a double hermeneutic…

> "…trying to make sense of the participant, who is in turn trying to make sense of what is happening in the context of her lifeworld as an embodied, situated person." (Gunn and Larkin 2020, p. 152):

I was not an "archaeologist" (Braun and Clarke 2021, p. 210) or an "excavator" (Gubrium and Holstein 2012, p. 32) uncovering or mining truths from passive participants. Interviewer and interviewee are instead travellers, wayfarers co-constructing a journey, each interview a different voyage over new terrain (Kvale and Brinkmann 2015).

For parent and practitioner interviews, I designed interview schedules with basic questions and topics to cover based on the research questions and focused on participants' perspectives on the relationships between status and wellbeing, sources of difficult and of support, and service interactions (appendix D). I aimed for a receptive and responsive approach (Rubin and Rubin 2005), given the sensitive nature of the topics, the exploratory rationale of the interviews and an ethical desire to demonstrate acceptance of participants' perspectives. Insider/outsider dynamics were relevant, as when interviewing practitioners in the field of migration:

> "They talk to me like a fellow expert/insider. The effects, as I felt them here, are twofold:
>
> - Participants might feel they don't need to expand certain concepts or phenomena because they think I already know.
> - Participants might look for validation for what they're saying, or what they're saying might otherwise be influenced by what they think my position is." (Field notes, Harris)

In early interviews, receptiveness and responsiveness were restricted by rigid structuring and a desire to get answers to my main questions. Anxiety pushed me towards clarification and fact-checking of descriptive content (Mann 2016). Through reflection and growing confidence, I became more responsive and exploratory:

> "I played around more with the interview schedule and felt more free to have open discussion rather than feel tethered by the questions [...] we had a really helpful discussion where some similar themes came up from a different perspective, and some new insights emerged." (Field notes, Frank)

I consciously engaged with practice skills around active listening and empathy. I relied on open questions to encourage longer, detailed answers (Trevithick 2013). Following Kadushin and Kadushin (1997, pp. 145-147) I tried to communicate an empathetic presence through "attending behaviours" and "minimal encouragers" – an open, relaxed and engaged posture with nods or short words of encouragement. Moving away from overreliance on the interview schedule, I began to paraphrase and summarise to check factual understanding, and used reflection to approach emotional elements or underlying themes.

I was also concerned in early interviews about the lack of depth or exploration of causal dynamics:

> "[...] I was aware that we were talking about specific difficulties that people have but less on their **impacts** [and] plan to incorporate more questions about **impact, difference made, and change** in future (Field Notes – Peter, emphasis in original)."

This is in line with Brönnimann's (2022) argument that critical realist questions explore changes and impacts (as well as stasis and continuity) in the observed world.

Amending my interview schedules to include questions about impact produced richer data with greater relevance to the research questions. I also began to consciously bring emerging themes or hypotheses into interviews, asking participants to comment or reflect on my thinking. I bracketed these in caveats – "I may be wrong", "please feel free to correct me", "is that fair/accurate?" – to foreground their contingent, tentative nature and provide space for disagreement. On the advice of a supervisor, I began to summarise participants' main points at the end of interviews, encouraging clarification, expansion or comment. Both supported a reflexive approach to analysis.

Interviewing parents together

I gave parents the option to be interviewed together or separately. Presuming that individual interviews are superior to dyadic or group interviews risks recreating the "lived experience" paradigm where the autonomous, rational individual produces a direct line to truth (Bjørnholt and Farstad 2014; McIntosh and Wright 2019). Dyadic interviews change the co-constructed nature of interview spaces, and may have advantages in the richness of data and insights into "shared experiences and meanings" (Taylor and De Vocht 2011, p. 1584) within a "common reflective space" (Bjørnholt and Farstad 2014, p. 6). As Zarhin (2018, p. 845) argues:

> "When couples converse, greater detail and contrast may become evident as elaborations, corroborations, and disagreements emerge, providing a fuller picture and richer data than a single perspective could afford."

Together, participants can explore their differing or cohering memories or understandings, prompt each other or spark spontaneous discussion (Mellor 2013; Valentine 1999). These can allow for individual narratives to be "validated, questioned or challenged" (Punch and Graham 2017, p. 206). The decision to permit dyadic interviews was also pragmatic, reducing the resource commitment for me and for the family, mitigating concerns about researcher saturation and ensuring I remained within my interpreting budget (Bjørnholt and Farstad 2014; Josselson and Lieblich 2003).

Some express concern that couples will present a united front or attempt to meet the expectations of interviewers; others, that one participant may dominate the space or coerce another into involvement (Forbat and Henderson 2003; Mellor et al 2013; Morris 2001; Punch 2013). Taylor and de Vocht (2011) argue that the choice of dyadic interviews may create implicit pressures, where requesting a separate interview suggests concealment or secrecy. Others question whether researchers risk becoming referees in disagreements (Braybrook et al 2017; Valentine 1999; Zarhin 2018). These concerns required both careful planning and reflection-in-action (Schön 1984). I did not find myself having to referee; disagreement typically involved one parent building on, expanding or clarifying the other's narrative, leading to discussion. Sometimes one partner would dominate parts of interviews, but these provided insights into "speaking positions" and family practices or divisions of labour (Valentine 1999, p. 69). To create greater balance, I would direct questions or follow-up to specific partners. I found that most couple interviews were open spaces of discussion, sites of richness, depth and insight.

Ecomapping with children

Punch (2002) suggests combining methods designed for adults with specific *techniques* that facilitate research with children. While there is no "magic method" supporting children's participation and no technique is inherently participatory, supplementing interviews with activity-based approaches can support children's communication about their worlds while reducing the pressure to articulate spontaneous verbal responses (Punch 2013, p. 219; Clarke and Statham 2005; Winter 2010a; 2010b). Developing a "toolkit" of techniques can support children to choose whatever approach they feel would help them communicate and…

> "…may help to sustain children's interest in the research 'moment', providing varied opportunities and modes for expression." (Crivello et al 2009 pp. 58-59).

I did not feel able to produce a full "toolkit" but provided choice between a conversational interview or working together on an ecomapping exercise.

Initially a social work assessment tool (Hartmann 1978), ecomaps provide a visual understanding of environments and connections, stressors and sources of support (McCormick et al 2008; Tennant et al 2018). They are diagrams placing individuals or families in the centre and important people, institutions and influences around them with lines indicating flows of support and stress. Ecomaps are increasingly popular in child wellbeing research because they support open subjective expressions with less reliance on culturally contingent or adult-defined definitions (Borja et al 2017). They have been

used to explore influences on wellbeing among migrant children and youth (Tennant et al 2018) and the adaptation of refugees (Morrison 2007) and can support communication for children with different cognitive, developmental and communicative capacities (Borja et al 2017; Curry et al 2008; Summerville 2014; 2017; Tennant et al 2018). The map becomes a "snapshot" of each child's understanding of the key relationships and connections in their social worlds, including those with institutions and structures (Summerville 2014, p. 21). The connection between ecomaps and ecological approaches (e.g Bronfenbrenner 1986) supports a complex, critical realist view by positioning each child in a world of stratified, interacting systems and causal powers.

I adapted a basic protocol from Nastasi and Borja (2015) and Borja et al (2017). Borja et al (2017, p. 156) ask children to draw the people and things that are "important to them", and I used similar phrasing:

> *"…let's draw the people/things that are important to you - people or things who help/support you, or who don't help or make things difficult. Maybe sometimes they help and sometimes they don't."* (Appendix D)

I showed children an example I had drawn, inviting questions about my map. Beyond the prompt above, I drew no boundaries around what children could draw, following Curry et al's (2008) belief that ecomapping's strength is openness, not reductionism or directiveness. Providing space to talk and to *refrain* from talking was central to balancing vulnerability and protection (McLaughlin 2020), and the open ecomapping approach provided this through a blank page to be filled with thoughts and ideas. I had prompts if children were struggling but avoided giving instructions on how to draw although all maps were formatted like my example – the child in the middle and others around them (see appendix F).

Unlike the brief approach of Nastasi and Borja (2015), which combines maps with brief written statements, I chose to combine mapping with semi-structured interviews. The mapping process was a "catalyst (for) collaborative discussion", a reference point for questions and clarifications (Ray and Street 2005 p. 548). Over time, I developed a cyclical approach focused on early rapport and later clarification and expansion. When participants added something new, I would ask basic questions – "can you tell me about them? What are they like? How long have you known them? What do you do together?" After they drew everything they wanted, I asked them to add lines indicating if someone/something was a source of stress/difficulty, help/support, or both. I would reflect back what children said previously, seeking clarification and further depth. When

the drawing was complete, I asked how things could change to make life easier and what they hoped or believed would be different in the future.

I had concerns about the technical aspects of map-making. In a previous role, I tried to use a drawing exercise to help me understand the family members in a child's life. It quickly became clear that they had no confidence in their drawing ability, and the assumption that drawing was inherently facilitative was misguided. Some children appeared to feel pressure to "do well" with the task, asking what style of drawing they should do, where they should add things, asking my permission to add something or checking if their drawing was OK (Sime 2017, p. 152). Eva (14, asylum applicant) appeared concerned with visually accurate pictures and wanted to get these "right." Huseyn (7) and Tara (9, refugee status) both struggled to start – my field notes suggest "the tyranny of the blank page" and that my example map was very busy and possibly overwhelming. I showed them an anonymised map drawn by another child that was simpler, and both maps stayed on the table for them to refer to.

I wanted to avoid mapping feeling like schoolwork or an assessment (Crivello et al 2009) and when children asked if something was "right" I said that these were their pictures and they could add whatever they wanted. However, there was still a "correct" mapping process and some participants added their lines before knowing their significance, or expressed confusion:

> Ricky: Again, is it a red for [...] where you don't really like?
>
> Calum: And then we do the dotted line for things or people that we don't really like, and then there are some things that we talked about where we've got some…
>
> Ricky, referring to my example map: What's the university?
>
> Calum: That's like a scroll.
>
> Ricky: No, I mean like the X's.
>
> Calum: So, the X's that's sometimes positive and helpful, sometimes difficult. So, sometimes we have mixed feelings about things.
>
> Ricky: School.
>
> Calum: Alright, yes, yes, so if you wanted to do that for school you could do that.
>
> Mia: Put X's on?

> Calum: If you want, or up to you. If it's something that you've got kind of mixed feelings about then that's what we can do and I might ask a few questions as we go along.

Sometimes, these moments of confusion provided additional space for discussion and clarification, and they show the importance of the map being only part of the data.

Many of my strategies echoed Eriksson and Näsman's (2012) recommendations for safely discussing sensitive topics with children - bringing some of myself into interactions while retaining the focus on them; approaching mapping as a joint exercise that "we" do; and providing space for fun or enjoyment. My own map explained more about who I was and I would draw attention to my terrible drawing skills, inviting laughter. I had been concerned about the possible strain of asking children to sit and focus for a long period (Hill 2006; Irwin and Johnson 2005) but I only detected restlessness once, towards the very end with Huseyn (7) and Tara (9, refugee status). Generally, the mapping technique produced detailed drawings and rich interviews, children adding more things as we progressed and continuing to talk in detail, and often mapping took longer than anticipated because of their continued willingness to talk. Map excerpts and discussions of the mapping process feature throughout the findings as a complement to children's spoken words, and the full maps are included in appendix F.

Interview settings and the presence of others

All family interviews and consent conversations occurred within families' houses, which felt like most private, pragmatic and appropriate space for conversation. There is often a presumption that the home is a site of comfort and safety in research (see Bushin 2007; Coad et al 2015) but the literature above and findings in chapter 4 show that houses are often sites of discomfort, unhappiness and insecurity. Service spaces may have provided an alternative and I considered asking the community centre where I recruited parents if I could use their space. I decided to ask to meet families in their houses to help me engage members together, in their own spaces, and to contextualise their narratives about spatial dynamics in nonbeing.

Within houses, there were several possible interview spaces. Many researchers point towards the importance of using private space where children may talk freely without being overheard without their permission (Alderson and Morrow 2020). Some researchers interview children within their rooms, where they may feel a sense of privacy or ownership – or, conversely, a sense of intrusion, anxiety or a loss of control, and parents may have concerns about children's safety or wellbeing (Punch 2002; 2017; Pyer and Campbell 2013). Coad et al (2015) argue that this process requires negotiating

privacy, participant preferences and the appropriateness of making demands of participants in their own homes. Many homes here had very limited space (studio flats, shared bedrooms) or other constraints on privacy or choice.

I was led by a combination of participant preferences, availability of spaces and the ecomapping exercise, which required a larger space to work. All ecomapping interviews occurred in living rooms or kitchens with a table. This had implications for privacy, and each interview began with discussion and choice around whether to have parents or siblings immediately present, nearby, or elsewhere. Children's choices here may reflect their understandings of their own agency or independence (Bushin 2007). I was conscious that working with an unfamiliar adult may be daunting and that parental or sibling presence could increase feelings of safety (Alderson and Morrow 2020). Presence may also result in intervention in the interview; this might help "scaffold" the discussion or support interpretation, contextualisation or communication, or it may involve parents leading or directing children (Irwin and Johnson 2005, p. 826; Pyer and Campbell 2013). Another person's presence would influence children's strategies around silence or disclosure although equally these strategies must be accounted for in all interviews (Callaghan et al 2017; Kohli 2006b).

Parental presence here covered a full spectrum including absence from the room, parents sitting at the table with children on their knees, sitting further away or periodically moving through the space. Where children chose to have parents nearby, I had to manage potential intrusions, interruptions and be aware of their impact, as in my interview with Huseyn and Tara. Huseyn was on his father's knee, his mother on the sofa:

> Huseyn: I'm 7, almost 8.
>
> Calum: OK. is your birthday coming soon?
>
> Huseyn: Yes.
>
> Calum: How soon?
>
> Layla (his mother): in [month]
>
> Calum: [Month]? That is very soon.
>
> Huseyn: [says his birth date].
>
> Calum: OK, that is not long. And what do you like to do, Huseyn?
>
> (Long silence)

> Alan (father): he fights with his sister (everyone laughs). [Alan speaks to Huseyn, then to me]. He likes to study.
>
> Calum: Ah, so you like school and you like learning, yeah?
>
> Alan: He likes his school. (Huseyn (7) and Tara (9), refugee status)

Rather than ignoring or addressing these interjections, I used them as prompts while directing body language, eye contact and questions to Huseyn. Had they continued I would have addressed them, but Huseyn became more talkative and questions moved to things only he could answer. Parental input became occasional, as when Alan clarified the lines for Tara (9, refugee status) who had begun drawing them too early:

> Alan talks. Interpreter: Dad explained just draw what is important, what's not important [...] and then later you will sort the lines out.

In another example, Eva (14, asylum applicant) and I were in the living room and her parents moved in and out of the space carrying out household chores. Towards the end, they came to view the map and Jan commented on how he had been drawn. I felt their passing presence impacted on privacy. Eva's lines suggested mixed feelings about parents – "sometimes parents don't understand" – but she did not elaborate, and I felt I had lost important insights (Braybrook et al 2017; Valentine 1999). Sometimes parents would describe something that felt crucial for their children, but children would either not discuss these issues or discuss them in different ways. I felt that this might be reflect children's protection of parents or strategies of selective disclosure as outlined above.

I also gave sibling children the choice of whether to be interviewed together, but only after establishing whether both children would be happy to talk in front of each other (Bushin 2007). Punch (2013) argues that some children prefer group or dyadic interviews because they allow sparking of ideas, reducing the pressure to articulate an individual response and to manage the potentially daunting interview space together. Huseyn (7) expressed that he wanted to be interviewed with his sister Tara (9, refugee status), but Tara initially said she wanted to work alone because was worried about being copied; she then said that she wanted to work together. Each child ended up copying the other in some areas, and the interview became a vehicle to identify the most important areas. Sibling interviews again required that I attend to how participants related to each other, and how language skills, confidence, conflict, care and concern were impacting co-construction (Punch 2017). Siblings engaged in discussion, debate, clarification or disagreement; I felt that Ricky and Mia "built on each other's understandings and their disagreements/conflicts were quite telling." (Field notes, Ricky (11) and Mia (13), NRPF).

I took care to actively direct questions or clarifications to one child or the other, using the time when one child was drawing to direct questions to their sibling. This took some awkwardness out of mapping, filling periods of silence and reducing the pressure of constant attention and immediate response (Punch 2002a; 2017).

Interpreting

Some interactions required the support of professional interpreters, who played a significant role in the relational dynamics of the research and the co-constructed interview space. Temple and Edwards (2002, p. 6) describe a "triple subjectivity" with the interpreter playing an active role in constructing meanings and identities. Interpreters are not tools but active participants whose role influenced the research process, the data and the final account written here (Edwards 1998; Temple and Edwards 1998). Trying to "domesticate" or make their work invisible ignores these impacts (Temple and Young 2004, p. 174), and so interpreters and interpreting feature throughout the transcripts and analysis.

In interviews, interpreters played a "hybrid role", both as co-creators of the interview space and as potential "cultural brokers" interpreting meanings as well as words and providing some context to what was said (ibid, p. 171; Thompson and Tribe 2009). Sometimes interpreters described being uncertain or unclear, or would seek out clarification before interpreting. While I generally supported this, I included some safeguards; if there were discrepancies between the length of speech and what was interpreted, or if interpreter and participant had back-and-forth discussion, I would ask for clarification. If two participants spoke at once, I asked for what each had said. I spent more time in clarification or summary than I might otherwise, to check understanding and to present engagement and interest.

Some approaches explore interpreters' perspectives or social positions (Temple 2002), see them as "key informants" (Edwards 1998, p. 203) or use community researchers to collect, analyse and publish data in other languages, and whose presence may simultaneously reduce barriers to participation (Fête et al 2019; Temple and Young 2004). I chose a more basic interpreting dynamic, limiting interpreters' role to interpreting direct research interactions. I worked with two interpreting companies – one in-person, one telephone – whose interpreters I had found to be reliable and helpful and who had adequate confidentiality provisions. When I contacted families by phone, I asked parents if they would like an interpreter and their preferred language or dialect, calling back with the interpreter's support. I attempted some matching of interpreters according to gender or country of origin – not because I felt like insiders would provide more direct insights

into cultural worlds, but because I felt this might facilitate comfort and communication (Grewal and Ritchie 2006; Temple and Edwards 2002).

For two families, I was unable to find interpreters who shared their first language; parents told me this would be likely and recommended an alternative language. Interpreter and participant were therefore from different backgrounds, but there were no obvious issues with dialect, understanding or rapport. Interviewing Eva (14, asylum applicant) I felt a female interpreter would support a better communicative space, and the interpreter who arrived projected interest, warmth and engagement. I requested this interpreter for future interviews, replacing another whose communicative style in initial recruitment meetings had felt disengaged and disinterested. The potential benefits of continuity were outweighed by the benefits of changing to an interpreter who now knew the research and whose presence supported a more positive communicative space.

Anonymity and Data Storage

Anonymisation required balancing protecting the identity of participants and maintaining the integrity of the data (Saunders et al 2015). Full anonymity is challenging in a small geographical area with a limited pool of prospective participants, or among organisations or families where participants may know each other and may be able to identify each other. While typically anonymisation occurs by changing details considered non-essential to analysis, Clark (2006, p. 12) argues that realist ontology complicates ideas of "background" or "contextual" information, seeing it as part of causality such that changes risk obscuring causal dynamics. The anonymisation process has been an "ongoing process of negotiation, reflection and experimentation" (ibid p. 18) throughout the analysis and writing period.

In consent conversations I explained to participants that "names and other identifying information will be removed" from data (appendix B). Some had no issue with being identifiable, while others (parents and practitioners in particular) expressed concern about negative immigration consequences if narratives could be connected to them. I took a multi-tiered approach to anonymisation. Some identifying information has been removed entirely when not relevant to the analysis; this includes names of individuals, neighbourhoods or organisations, countries of origin, or languages. Some data has been altered or generalised to protect anonymity while retaining analytical significance – job titles, health conditions, professional backgrounds, immigration histories. I have avoided grouping practitioners together within their organisations, or connecting practitioners to families where possible. Some information has been retained in its original form, including participant gender, family relationships and ages because these contextualise

the data and speak to causal dynamics. I decided against splitting individuals' data over multiple pseudonyms or "compositing" multiple narratives under a single name (Markham 2012; Saunders et al 2015) because these would obscure causal dynamics and positionality. I have maintained the name of the wider research setting; given Glasgow's role as the only dispersal area in Scotland, it would have been impossible to disguise.

I maintained a key with participants' information and their pseudonyms within a password protected file in the University's secure network drive. I purchased a pay-as-you-go phone and stored contact details under initials as many prospective participants were contacted before pseudonyms were assigned. This phone was password protected, and it and all other research materials were locked away in my home. All research data will be stored on a secure University server for 10 years after the end of the study as per University guidelines.

Transcription and Data Analysis

I transcribed some interviews myself and used a paid professional transcription service for other interviews. While some consider transcription a key part of analysis, critical reflection and reflexivity (Bailey 2008), I had limited time as a part-time researcher. I personally transcribed interviews with children where I could transcribe while looking at maps; interviews that had passages I wanted to revisit for analytical or methodological reasons; and interpreted interviews as I wanted to retain interpreters' contributions and to reflect on communicative dynamics. Others I sent for "intelligent verbatim transcription" - removing "every stutter, stammer, 'um', cough and laugh" while ensuring the words of participants were accurately transcribed (Eppich et al 2019, p. 91). I kept many of these communicative cues in my own transcriptions because they contextualised the words participants were using, and perhaps should have requested that professionals do the same. Where transcribers flagged issues with audibility, wording or clarity, I carried out spot-checks by listening to the audio and making amendments when necessary (MacLean et al 2004). I decided against having interpreted data reviewed for accuracy by other interpreters and against sharing transcripts with participants to allow clarification or expansion (ibid; Forbat and Henderson 2005; Mero-Jaffe 2011). Summarising key themes at the end of interviews and sharing tentative analytic points during them supported some participant involvement in early analysis.

In analysis, I synthesised Braun and Clarke's reflexive thematic approach (2019; 2021) with realist approaches. While many critical realists prefer theoretical or deductive

analysis (Fletcher 2017) and some proponents of RTA consider it incompatible with realism (Byrne 2021), others suggest that that RTA and realism are complementary. Locating the "real" in perspectival data is possible, but it requires significant reflexivity and reflective analytical practice (Bonnington and Rose 2014, Braun and Clarke 2021; Lauzier-Jobin and Houle 2021; Martin 2020).

Analysis began during data collection. In my reflective diary I recorded initial observations, built tentative connections with literature or other interviews, and identified areas for further exploration. Over time, I made more links to theory and conceptual literature, but also questioned my tentative analyses. On one occasion, during a long day of multiple interviews, I experienced "a huge breakthrough in my thinking around the change in people's self-image":

> "In a previous interview I framed this as a **change of status** or **loss of status,** but this wasn't right. I think what I'm looking at is the **loss of connections that make someone feel themselves,** and then the **building of connections around particular problems that mean they come to inhabit the person's being –** **the person is equated as the sum of their problems, past and present, because they aren't given the opportunity to be or do anything else.** (Field notes, emphasis in original)

This was analytically and methodologically significant, as I risked defining participants' lives in terms of problems, challenges and issues in interviews. As Wroe (2018) argues, attempts to counter hostile immigration environments can engender sympathetic, disempowering responses rather than a more recognitive engagement with complex lives and circumstances. I began to engage in more rounded discussions of participants' lives and so to engage in practices of recognition.

I used Nvivo for analysis once interviews had been transcribed. RTA begins with familiarisation, coding useful and interesting observations inclusively and inductively (Braun and Clarke 2006; 2021). I coded many items more than once, with different descriptions, maintaining openness of interpretation (ibid). I then pulled together tentative or potential themes from these codes and my earlier analytic reflections; patterns of *meaning* arranged around a "central organising concept" (Braun and Clarke 2019 p. 589). The next phase, creating clear boundaries and coherent themes, was difficult. Codes could be connected in multiple ways, tentative themes overlapped, and my choices would result in one picture of the data among many possibilities (Braun and Clarke 2012; 2019a; Byrne 2021). For Braun and Clarke (2019, p. 594) researchers should be…

> "…fully cognisant of the philosophical sensibility and theoretical assumptions informing their use of TA; and these [should be] consistently, coherently and transparently enacted throughout the analytic process."

My choices were influenced initially by my realist position, and I sought out "demi-regularities" within or between interviews as well as outliers and areas of contradiction and contrast that might suggest depth dynamics (Fletcher 2017, p. 185; Martin 2020). Through abductive analysis, I linked initial codes and themes to theoretical or conceptual "frames of interpretation", connecting observations to structural, relational and contextual phenomena beyond the empirical (Eastwood et al 2016, p. 4; Danermark et al 2002). Capitals and recognition featured in early reflective diaries, as I felt they resonated with initial coding, and this resonance strengthened with time. I came across candidacy later, and felt it brought depth and coherence to the data. Analysis then became abductive, carried out with these frameworks in mind.

Realist research contains a representational dilemma beyond the typical question of whether qualitative research can ever adequately represent the worlds or experiences of participants (Clifford and Marcus 1986). Realism requires "judgemental rationality" about which accounts have better explanatory power, particularly when participants provided contrasting accounts of the same phenomena (Archer et al 2004, p. 3). I wanted to foreground families' voices and experiences, so often subjected to misrecognition, marginalisation and disbelief, but this was made more complex by judgemental rationality and by my insider position as a practitioner with my own knowledge, experience and hypotheses. Participants had no active role in analysis or representation, and disparities in my and their social positions also made representations problematic.

Parr (2015, p. 202) suggests addressing these issues through respectful, empathetic research relationships, acknowledgement of the researcher's "political, personal and intellectual" background, and by attempting to faithfully represent…

> "…what we think this person is trying to tell us within the context of this relationship, this research setting, and a particular location in the social world". (Mauthner & Doucet 1998, p. 21 in Parr 2015, p. 201).

Throughout the findings, I have provided rationales for analytical and representational decisions, contextualising data according to positionality and relational dynamics. The findings presented here are incomplete, fluid and represent one way of engaging with the data (Braun and Clarke 2019). RTA rejects standard ideas of saturation; there are no finite codes in data and there are always new and different ways to engage with it (ibid). Abductive reasoning similarly can continue forever through new engagements

(Brinkmann 2013). I stopped analysis when I was satisfied that I had coherent, albeit fallible and incomplete, answers to my research questions.

Conclusion

This chapter has outlined the design and methodology of the research, informed by a critical realist ontology and interpretivist epistemology. Through critical reflection and reflexive practice, the chapter explored the ethical and practical considerations in recruitment, consent and data collection, before outlining the process of abductive reflexive thematic analysis. The following chapters explore the data produced by this approach to answer the research questions:

- How is child wellbeing considered by the various actors involved with families with precarious immigration status – families, public sector professionals and support organisations?
- What place do services have in supporting wellbeing under these circumstances?
- What happens when families need extra support – how and when do they approach services, and how do services respond?
- What happens when families need extra support – how and when do they approach services, and how do services respond?

Chapter 4 explores the impact of immigration status on the wellbeing of children, parents and families more generally. Chapters 5 and 6 explore different dimensions of candidacy in general and with regard to specific services.

Chapter 4: Immigration Status and the Creation of Need

This chapter explores how immigration status is a causal influence on children's and parents' wellbeing in multiple interconnected domains. It explores poverty, where status precarity limits access to financial resources and economic capitals, producing material lives oriented around survival. It then explores spatial or mobility capital including (im)mobilities and spatial influences on wellbeing. Turning to habitus, emotional capitals and ontological insecurity, the chapter finds that the cumulative pressures of nonbeing are corrosive to mental health and psychological wellbeing. These dynamics influence the ability to build and sustain social capital relationships. Throughout, the chapter explores the bricolage practices used to mitigate, negotiate and resist these influences.

Poverty and economic capitals

In almost every interview with parents and practitioners, initial questions about "who helps and supports you?" or "what help and support do you provide?" almost always moved immediately to material needs:

> It's all money. It's all poverty. Everything is coming out of poverty. Whether that's strains and stresses on the family and what impact that has or how that plays itself out it's usually because […] people don't have enough money to live (Christine, family support).

Practitioners described families "trying to survive" (Pauline, family support) or "in survival mode" (Amy, family support), struggling to meet "basic needs" (Hope, migrant support) or "your daily bread and butter" (Harris, migrant support). Parents spoke in similar terms:

> Just have to find a way to survive, isn't it? (Abigail, parent, asylum applicant)

> We just have to manage [...] we are living below the poverty line. We are people that should be miserable all the time. (Jenny, parent, asylum applicant)

Immigration status determined whether a parent could work or access financial resources through public funds, asylum support, NRPF support or other provisions, and families accessed a range of provisions. Four families lived on asylum support, receiving around £37 per person per week, an amount parents described as insufficient:[6]

> The money you're getting [...] It's like, the money is kind of too small. (Abigail, parent, asylum applicant)

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[6] During the period of this research, Section 95 and Section 4 support increased from around £36 per person per week to £39.63

Other families lived on money provided by charities or friends, and some with NRPF received social work support under S22 of the Children (Scotland) Act 1995 that was lower than asylum support. Anna, Philip and Kieran (NRPF) lived for years on support from friends and charities after their visas expired:

> It was very bad situation [...] there was no any source of money coming from anywhere. (Anna, parent, NRPF)

They experienced barriers in accessing NRPF provisions (discussed in chapter 6), and at the time of our interview received S22 support that was significantly lower than equivalent benefits or asylum support provisions.

Many families had mixed or complex entitlements that changed over time, evidencing the challenges of welfare chauvinism based on categorical fetishism. Harry and Nina (parents, NRPF) moved through several forms of status and lost their jobs due to the appearance of illegality, unable to meet the evidentiary standards of an employer worried about the consequences of retaining them:

> "They don't want to involve themselves with the Home Office. So if you don't have that documents, if you want to start a new job you can't start that one because they will ask you for your original passport and original right to work document." (Harry, parent, NRPF)

At the time of our interview they lived on less than £100 per week between four people from an obscure benefits provision that Nina alone could access. They had been denied NRPF support by the local authority.

Ariel (third sector, family support) described Zara and her husband John, a family she had worked with but who were not involved directly in the study. John had no entitlement to work or public funds; Zara had both but was pregnant and employed casually with no maternity pay. When her benefits stopped unexpectedly the whole family lived on less than £50 per week. These unexpected delays, administrative errors, unexpected reductions or missed payments underlined the precarity of material lives. When Abigail lived on S22, errors happened repeatedly:

> The day will come, you don't get your money and you're on the phone forever [...] you try to get money and then you couldn't get money and then you'll be penniless. (Abigail, parent, asylum applicant)

Almost all families had experienced destitution, often despite eligibility for support. Jane described being refused asylum support when she arrived:

> They said we could not help you [...] I was like "I don't have any money." But they don't want to believe, so they said because of that they cannot provide. (Jane, parent, asylum applicant)

Asylum support also involved punitive sanctions where support could be withheld or reduced for perceived "breaches", like friends paying for an internet connection:

> The Home Office reduce their support even though their friend is paying for it as a gift to the family. But they're not allowed to do that because the Home Office argue that that £20 should be spent on support. (Kate, migrant support).

As well as direct discussions of income, poverty and its impacts were evident in discussions around material lives and bricolage practices for meeting material needs.

Food, clothing and basic essentials

Poverty and food insecurity were closely related, and many parents spoke of insufficiency because their lack of money:

> Whatever the child is eating is just not enough.(Abigail, parent, asylum support)
>
> -
>
> "It was very bad situation also because we don't have enough food to eat." (Anna, parent, NRPF).

Status had other impacts here, particularly in access to free school meals where eligibility comes from benefits entitlements. Families with NRPF could not access them:

> They don't get the milk or the free meals or the other things like other kids get [...] You are not allowed because when you fill the application form the first condition is you should be on the benefits. (Harry, parent, NRPF)

Chapter 6 explores this candidacy further; here, the denial of school meals shows how status created need and financial vulnerability:

> They will just end up in debt because I remember this other family [...] she was giving £2 [for school meals]. Two pounds every day and she said, I don't have enough money to continue paying £2. (Hope, migrant support)

Food insecurity was visible the bricolage practices of parents, children and service providers. Parents described using "shops that are cheap" or going without food so children could eat (Jenny, asylum applicant); saving asylum support to buy a used freezer so reduced items could be stored longer (Abigail, asylum applicant); and diets

based around necessity rather than choice, preference or cultural norms. Reflecting on what being granted status might mean, Anna (parent, NRPF) said that she could "buy anything what we like, we can eat what we like", connecting food to the agency and choice, comfort and security absent in her current circumstances.

Children most often mentioned food in the context of bricolage, with foodbanks and food projects featuring often on maps. Kieran (14, NRPF) said that without foodbanks his family would be "starving", and other children drew strong positive lines towards them:
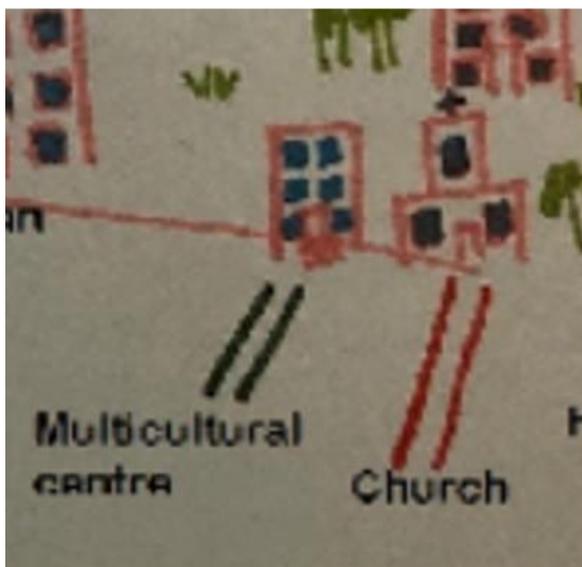
"Mum goes to the church once a week and they have foodbank there and they help us with different vegetables (...) So like when we really need something we can go to the church and ask. (Eva, asylum applicant, 14)

Kieran's foodbank, without which his family would be "starving."(NRPF, 14).

Figure 3: Eva and Kieran's foodbanks

Third sector practitioners described providing extensive support around food, whether directly or through referrals and signposting. Practitioners did this "a great deal" (Dee, family support) for migrant families, reflecting a "huge demand" (Christine, family support), a collective candidacy emerging from the material deprivation of nonbeing (Mackenzie et al 2015).

Similar dynamics were evident in other areas of material welfare: clothing and shoes; furniture and household items; essentials for babies and toddlers; toys and games for children, and other items that felt essential but were unaffordable. Alan (parent, refugee

status) spoke of third sector organisations helping with "clothes, toys and gifts for the children" alongside toiletries and bus tickets. Anna described extensive bricolage:

> For the food I always approached the foodbank. And the toiletries and things were provided [...] by the [migrant support organisation] [...] and also for clothing they recommended [another organisation]. (Anna, parent, NRPF)

Practitioners provided material support themselves or through referral or signpost to "uniform banks" (Peter, community development; Donna; family support), "baby banks" (Ariel, family support) and other organisations. They described this an area of constant need - children "grow so quickly" (Amy, family support) and families "need all the stuff – they need clothes, they need toys and stuff. It's a struggle" (Hope, migrant support). Jenny (parent, asylum applicant) talked of challenges around clothing:

> But if I'm going to buy clothes for them, like [unclear] goes really quick, it gets really hard for me [...] I can't remember sometimes when did I buy clothes, a new one. And if I have to buy I have to rely on charity shops. Because I cannot afford new ones.

Parents and practitioners expressed concerns about lack of choice, control or autonomy, with material lives governed by availability, rather than suitability or preference:

> You'll be wearing size 7, they will give you the 7 but that's a different size 7. You end up not able to wear it and sometimes you will need like a winter coat and then you won't get the winter coat that is warm enough or it might end up being your size. (Abigail, parent, asylum applicant)

Parents engaged in bricolage practices for survival, combining formal welfare provisions, charitable provisions and social networks, and practitioners engaged in in bricolage practices of their own to support these efforts. Immigration status left families reliant on inadequate, inaccessible support provisions with insufficient money to meet basic needs. The lack of financial resources equated to a lack of economic capital, with pervasive impacts throughout the findings.

Accommodation and Spatial Dynamics

Both financial circumstances and accommodation were sites of need and of inadequate service provision. Families' diverse housing circumstances were united by themes of inadequacy and unsuitability. Some lived in asylum support accommodation that they had been dispersed to; some in temporary accommodation through NRPF provisions or mainstream housing services. Other circumstances included periods in hotels and B&Bs;

living with friends or acquaintances or in accommodation arranged by charities; and periods of rooflessness. Some were homeless on arrival, seeking out asylum support immediately; others had and lost accommodation, often through rent arrears and eviction when circumstances changed. This section explores these diverse circumstances and their impacts.

Asylum accommodation

Participants often argued that asylum accommodation did not meet legal or moral standards of safety and suitability, reserved for those in nonbeing. Amy (family support) provided several examples of homes that were "not fit for purpose [...] not safe [...] you wouldn't even have a dog given it":

> There was a bathroom in a flat that I was in with a family that I work with and it wasn't even a door, it was like half the size of a door [...] she had to go sideways to get in. It was this narrow and there was a shower at the bottom of it. And I was like oh my goodness, where do you bath the baby, where do you get, do you know? You wouldn't be allowed it, just for fire."

Others described the "poor state of repair" (Pauline, family support) of houses they had visited:

> Things haven't been done, you know, or the place is in a bit of kind of state of repair, and nothing really gets looked at or tended to. (Ariel, family support)

Parents described similar issues. After our interview, Abigail showed me broken blinds, fire safety issues, broken cooking equipment and sharp broken floor tiles. She consented to me recording these issues in field notes:

> [...] a rattling door, the lack of appropriate furniture and the total lack of any child-friendly provisions. Ibrahim (3yo) can't sit on the chair to eat at the table. When she had first moved in she said it was filthy and she had to clean the place herself. There are still areas that are problematic [but] that the housing provider sees as 'within the margin' and has not moved to repair or replace. (Field notes, Abigail, parent, asylum applicant)

My own impressions matched these narratives. Jane, Nicole (11) and Jamie (7, asylum applicants) lived at the top of a long, steep close. Walking up, I observed that every other flat was being renovated; they were the only people in the building. The stairs were covered with litter, cigarette butts and smelled of stale urine. It felt wholly unfit for habitation except for those with no other choice. Jane described how she and her

children "would get scared to go out" because a broken entry system allowed people to enter their building:

> There's one time they wee and poo, even poo on the stairs [...] when we are going to go to school, we just met two man, lying down on the, on this, even my children they were so scared, they said they are not going out again. (Jane, parent, asylum applicant)

After our interview, Jenny (parent, asylum applicant) contacted me for advice because her boiler had broken and her attempts to get it repaired by the asylum support provider had been unsuccessful. For two weeks in winter, she and her family had been without heat and hot water. Practitioners felt that families in these circumstances received worse treatment than tenants in other arrangements, with fewer routes for redress:

> We can't just phone their local housing office, you know, or take them up to their local housing office [...] I think other housing associations, or Glasgow City Council Housing, they have to be more accountable, or they seem to be more accountable, and will generally get things done. Whereas, the stories that we've heard is that, they're just ignored. (Ariel, family support)

Others described how asylum accommodation lacked material comforts. Houses were spaces to exist in, more *houses* than *homes* people could inhabit, belong or feel comfortable in. Abigail described how her accommodation impacted on practices of care:

> I have a child, a 3-year-old, they always like to cuddle with their mummies, especially boys. We were given single chairs to sit on, two chairs [...] so we were not spending time in the living room - we always have to go and cuddle up in, on, I mean on the bed rather than sitting here. (Abigail, parent, asylum applicant)

She and Ibrahim (3yo) share a bedroom and a bed, something she sees as increasingly inappropriate as he gets older:

> Because you'll be dressing up, waking up, sleeping in front of him and he can talk and you can't do that. But if you say "go to your room, this is your room, go to your room." (Abigail, parent, asylum applicant)

Children described asylum accommodation in deficit terms – houses were uncomfortable, alien, lacking things that they wanted in a home. Eva described her current home as "a little bit tight [...] dark and grey":

> I don't like the living room, it's very small and I don't like the wallpapers and also because we have carpeting in the bathroom which is so strange. (Eva, 14, asylum applicant).

Nicole (11, asylum applicant) would "change the whole house", wanting to leave behind the shared close and the long flight of stairs. In her house, the living room and kitchen occupied the same space; if Jane is cooking, the space can get "stuffy." Eva and Nicole's maps show mixed feelings; positive associations tempered by these elements of discomfort:
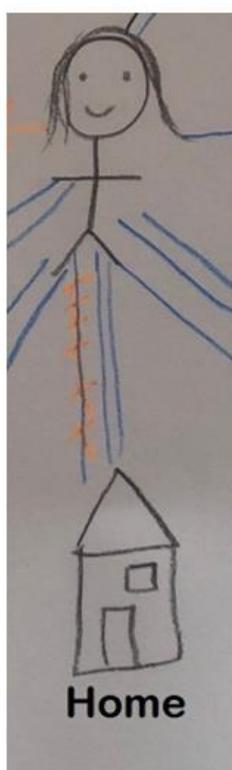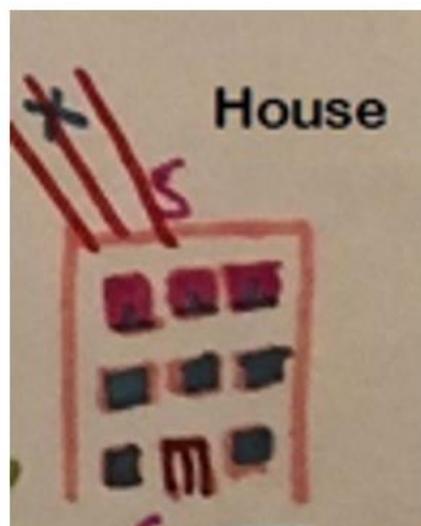
Figure 4: Eva and Nicole's drawings of houses

Asylum support was also a space of surveillance, where housing officers could enter a property "whenever they want" (Pauline, family support; Ariel, family support). Ariel described an officer entering a family's home at 2am, part of a "routine check to see who was in the house":

> I think sometimes when you're sitting there, and you think, 'God's sake, how can people just be able to walk in your house whenever they feel like it, without giving notice.' (Ariel, family support)

When I interviewed Abigail (parent, asylum applicant) her officer arrived unannounced and unexpectedly, with the expectation that Abigail would be available to him without

notice even though I was there. I paused our interview and waited, playing with Ibrahim while they spoke on the other side of the room.

Accommodation for NRPF families

Several families involved or included in this study had lived in hotels, B&Bs or temporary flats provided under local authority NRPF provisions, or with friends, acquaintances, partners or volunteers. Families with NRPF could not access asylum accommodation, social housing or other routes to safe, secure accommodation. Sam (lawyer) explained that domestic violence refuge spaces are closed off to those with NRPF, and the Domestic Violence Concession has narrow eligibility. Hotels became not only acceptable but preferable to the alternatives – returning to an abusive relationship or "sleeping in bus shelters [...] riding buses all night, because there is nowhere else" – despite concerns about suitability:

> [...] there are issues, serious issues around quality of accommodation (and) how long they're required to stay in unsuitable accommodation when you have young children. (Sam, lawyer)

This again contributed to the sense that families were forced to live in circumstances that would have been unacceptable for non-migrants.

Anna, Philip and Kieran (14, NRPF) moved between houses of friends and volunteers, before living for months in a hotel room with no cooking facilities, laundry facilities, no space and limited privacy. Kieran was hospitalised due to ill-health caused directly by these conditions (discussed further in chapter 6). Sam suggested that this was not uncommon:

> The bed and breakfast accommodations don't have kitchens, there's nowhere to cook, there's very little money for food that isn't canned, and that kind of thing. So it comes with health problems sometimes. (Sam, lawyer)

Kieran (14, NRPF) described difficulties sharing a hotel room that was "so small" and "uncomfortable," where staff could enter the family's space at any time. He wanted a "proper house" – a place with "more privacy" and a sense of permanence and stability. Anna felt that this made him feel different:

> He always say "why we are in this situation? Three of us in one room, crowded, no space?" Whenever he goes to his friends' house they all have their own space [...] he was always keep on asking as a child "why we are like this? My friends all have their own room or house, and why we are like this?" (Anna, parent, NRPF)

Harry, Nina, Ricky and Mia (NRPF) lived briefly in a hotel, followed by several temporary flats under local authority NRPF provisions. These houses have been of poor quality – Ricky (11, NRPF) described faulty windows and "a lot of bugs", and he and Mia reflected on their accommodation in deficit terms. Home is a place that is "safe [...] a good place to be" (Ricky, 11, NRPF) or where "you feel safe and warm" (Mia, 13, NRPF), and their current accommodation did not meet these conditions. Like Kieran, Nina was hospitalised because of the unsuitable nature of their first flat. Accommodation was provided to meet basic needs for survival; instead, survival was actively *threatened* by unsuitable housing provisions.

Creating liveable spaces

Throughout narratives on housing, participants described bricolage practices aimed at making houses more liveable and comfortable. Abigail (parent, asylum applicant) used online communities to find free or discounted furniture, toys and other items. Lacking a comfortable seat to cuddle with Ibrahim, she found a sofa in the street outside her flat and cleaned it up; she bought the freezer used to save money on food on social media; the floor was littered with toys and games gathered online and through services. Harry and Nina (parents, NRPF) listed the items in their home obtained from charities – a table, drawers, toaster, kettle, ironing board and iron, bedding, clothes. Ricky and Mia spoke of this too:

> Ricky: [The organisation] help with furniture.
>
> Mia: They got us furniture; they got this dining table. (Ricky, 11 and Mia, 13, NRPF)

Practitioners again described this as part of their everyday work:

> They might actually need practical items, you know in terms of kind of their home or other things for their children, you know, we kind of help kind of families source anything from furniture to maybe clothes, you know. (Pauline, family support)

Ariel described getting curtains, a radio, "a few things for the wee one" for a lone parent she worked with (Farida, asylum applicant) to make her house more habitable:

> "She said they just sit on the bed, all day, and we thought, you know, what else can she do?"

Amy (family support) described similar work with a family she worked with, Nick (lone parent, asylum applicant) and his daughter Maya (primary school age):

> I've spent time with Nick building his house into a home, even the money behind that trying to put all that in place [...] I bought him a radio as I thought right if you listen to the radio you'll pick up the English, but I can't get him a TV because he can't afford the licence.

A liveable space was also a space of togetherness, the importance of families being *together* cited by several children including Kieran (14, NRPF). His parents Anna and Philip provided context as they spoke about the possibility of living in different places because they struggled to find an arrangement where all could be together. Practitioners described how mixed entitlements prevented this togetherness too:

> He had his status, she didn't have her status [...] that really caused just so much anxiety, stress and pressure. Because her mental health was really poor, but she was looking after the wee one. And dad was coming over to help out, but wasn't allowed to stay there, and likewise, she wasn't allowed to stay over at his, and they were, like, miles apart. (Sarah, family support)

In a range of ways, housing could become a source of stress, anxiety, concern, fear and discomfort; far from the homes of belonging and comfort that support wellbeing.

Hypermobility and spatial insecurity

Narratives around accommodation described frequent movements occurring without choice. Hypermobility (Tazzioli 2020) occurred for a range of reasons. Evictions appeared often for those with NRPF. Ariel (family support) described working with John and Zara, a couple with mixed entitlements who did not participate directly in the project, had been served notice of eviction because of rent arrears. Pauline described another family with NRPF:

> I think they were about to lose their accommodation so then I think they were just gonna present at homeless and stuff and see what they were gonna get there […] It was basically down to money. (Pauline, family support)

Some families had been in homes for years before being forced into mobility by changes in circumstance or status. When Harry, Nina, Mia and Ricky lost their visas, they were suddenly and unlawfully evicted from a house they had rented for years. They have since been hypermobile, accommodated in hotels and temporary flats and they anticipate further moves. Anna, Philip and Kieran were also evicted and lived with friends and acquaintances before being accommodated in a hotel and then a temporary flat. Philip counted six places in five years; Anna listed four friends they stayed with, the shortest for two months and longest just over a year. Kieran (14, NRPF) reflected on the

difficulties of having "no place to stay as a permanent place" and when I asked him what might make his life better or easier, he said "if we had a proper house [...] 'cause, like, we wouldn't have to move around."

The asylum support system is also a source of continuous movement. Some parents identified this as a major area for change:

> I think families, when they come in to seek for asylum, if they can just give you a house - I mean a place, an accommodation and just say "this is your accommodation, you just wait until everything in - is being processed. (Abigail, parent, asylum applicant)
>
> -
>
> I would change the situation with accommodation [...] If a person comes here, since he claims asylum he could stay, carry on staying in this accommodation. [...] He would obviously have a choice to move if he would want to but ideally he would stay in one accommodation before, during and after. (Alan, parent, refugee status)

Some families had lived elsewhere in the UK prior to claiming asylum, often for long periods, and were dispersed to Glasgow on short notice. Jenny (parent, asylum applicant) entered asylum accommodation and moved cities; she could no longer stay in her other accommodation and was driven by necessity - "the only thing I could think of was the roof over our head, where we can be safe."

After dispersal, continued and unexpected movement was common; people move "literally overnight" (Sarah, family support) with no choice, little warning and no foreknowledge of where they will go. The language practitioners used – of being "put into" or "pushed out to" different areas (Harris, community development), of "almost casual disruption" (Frank, volunteer development) or a "transient lifestyle" (Sarah, family support) highlighted the nature of endless movement, spatial precarity and a lack of control. Practitioners often spoke in terms of 'roots' - being "uprooted" (Pauline, family support), experiencing "rootlessness" (Frank, volunteer development) as a part of nonbeing:

> [...] this, I don't know, like, kind of meandering like - people are still in transit even when they come [...] You're still, you're always moving, you're always on to the next thing. So like, again, that hostile environment thing of 'don't put down roots.' (Harris, community development).

> They're facing whatever trauma they've had that's brought them here to be a migrant and then they're moved several time when they're here, sometimes without any notice, which comes with its own costs. (Christine, family support)

In discussions of accommodation, children often drew houses left behind, describing current accommodation in deficit terms when compared to places that were more clearly *homes*. Eva described the house in her country of origin as "the best place":

Figure 5: Eva's old house

> Eva: I feel very sad that we left (COO) because this, our house my Dad built himself and we had to leave it [...] I spent almost all my childhood and we have really good neighbours.

Ricky described the house he was evicted from as the "Homeliest Home" (Ricky, 11, NRPF), a place he had lived for years and a site of familiarity, comfort and social connection (discussed further below). He and Mia (13) drew the people they held responsible for their sudden eviction, with strong negative lines towards them:

Mia (13) drew the letting agency.

Ricky (11) drew the landlord.

Figure 6: Ricky and Mia's negative feelings towards their landlord and letting agency

When I asked if their current temporary accommodation felt like home, they were unsure – "I suppose so" (Ricky), "kind of" (Mia):

> Mia: Because we've been in it for a while now it does [...] Well, I wouldn't say this feel like the perfect home.
>
> [...] Ricky: It's something. (Ricky, 11 and Mia, 13, NRPF)

These responses may reflect the temporary nature of housing, its low quality, their past experiences of home and their hopes for the future.

In an apparent paradox, family participants who described the challenges of hypermobility also wanted to move. Where current accommodation was temporary, unsuitable and dictated by status, the next move might come through status resolution, might happen through choice, and might bring security, stability, safety and comfort. Although tired of moving, Kieran wanted to move again – "Cause, like, I can move away from this area" and have a "permanent place" (Kieran, 14, NRPF). In other circumstances mobility was a conscious strategy and a form of resistance:

> A lot of mothers with kids moved from England to Scotland because they thought it was more humane here, there was more facilities to assist you to regularise your immigration status, they were kind to children, there was a lot of resources to assist you. (Toni, advocacy)

Hypermobility existed alongside other aspects of spatial capital, including *limitations* on mobility caused by and causing capital limitations.

Neighbourhoods and communities

Hypermobility often meant movement to unfamiliar areas of significant and multiple deprivation – "physically dark corners" that Harris (community development) believed were designed to produce discomfort, isolation, rootlessness and "discontent among host communities." Families moved into unfamiliar areas with little support to orient themselves or to feel secure. In asylum support, housing officers are supposed to assist with orientation, but practitioners and parents felt that this did not happen. Abigail (parent, asylum applicant) "didn't see anyone [...] I didn't know where to go or where to start." Amy, in working with Nick and his family, saw a recent move as akin to "landing him on the moon":

> [...] saying 'there you are, there's your home, you're safe, bye', and closing a door on them. They don't know who's down the stairs, they don't know where they are, they don't know where the shop is, they don't know where the doctors, the dentist, the hospital […] It's absolutely bonkers. (Amy, family support)

Participants spoke of experiencing, witnessing or hearing about the fear, anxiety and unease of living in places that were "alien" or "a wee bit frightening" (Christine, family support); neighbourhoods as sites of fear, unease and anxiety.

Some participants described outright racism and hostility. Pauline (family support) saw this as "a massive kind of theme" and described a family having fireworks put through their door. Abigail was "terrified and anxious [...] worried to get out" after people threw eggs at her house. They could only do this after passing multiple secure entry systems, suggesting a neighbour's involvement:

> Even when my son is just running, going somewhere, when we just opened the door I would like "stop, stay close to Mummy" because I don't know what they would do next [...] Now I'm trying to build up confidence, trying to be secure but I still don't feel like I'm really safe. (Abigail, parent, asylum applicant).

Children spoke in similar terms. Kieran (14, NRPF) felt "a wee bit unsafe" after being approached by a stranger in the street; Ricky and Nina described racist bullying in the area around their home and at school:

> Ricky: they call me stuff which I wouldn't really like to say [...] (One) was making fun of me because of my race, then the other one was making fun of me because of my race as well. […]
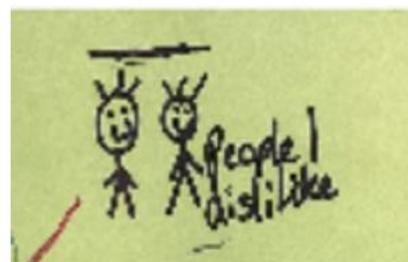
Figure 7: Ricky (11) drew young people who had bullied him, the red line showing a source of stress and difficulty.

> Nina: they used to throw stones at our window as well [...] they were telling him go back to your country, where you come from. (Ricky, 11, NRPF)

Practitioners described challenges for children in navigating social environments without the habitus, cultural or social capitals that might support inclusion or belonging. Christine (family support) described impacts on older children:

> I think there's a bit of bullying going on. I am not entirely convinced that it's a racial, a racist issue [...] They're not streetwise, they don't speak the language, they've not had the experience, they're not come up through school to make the friend circle that would, you know, insulate everyone else in that sort of situation.

Cultural capitals (knowledge, habitus), spatial capitals and insecurities combined to inhibit wellbeing through belonging and the navigation of physical and social space.

Spatiotemporal uncertainty, exclusions and identities

Spatial insecurity connects to temporal insecurity. Not knowing where one might move or when, but knowing that moving itself was inevitable, makes life both "predictable and

unsettling" (Pauline, family support). Now his family had refugee status and lived in a temporary flat, Alan (parent, refugee status) knew they would be moving, but not when:

> This is another negative thing for us, I think it's difficult to concentrate because now we are waiting to be moved again, and this is another sort of uncertainty.

Many of Griffith's (2014) dimensions of time were evident, particularly in discussions of parental wellbeing. "Rupture" and "frenzy" were visible in hypermobility above. "Suspended time" and "stasis" were visible in waits for Home Office decisions while living in nonbeing. Parents with experience of the asylum system described this vividly. Jenny (parent, asylum applicant) spoke of…

> …a life of uncertainty [...] you don't know what it going to happen tomorrow [...] if in the letterbox, somebody threw the letter through the letter box, I will just be panicking. (Jenny, parent, asylum applicant)

Unclear and often lengthy Home Office decision-making timescales, where decisions are often sudden and their impacts seismic, created the "temporal angst" that Griffiths (2014, p. 1992) described:

> We've been waiting for a few months for them to call me for an interview and then finally they did which now we're going to wait [...] waiting, waiting, yeah, suddenly something happens, yeah [...] because they just do things in their own time as well, isn't it. (Abigail, parent, asylum applicant)
>
> --
>
> The difficulties were in the unknownness, we didn't know what is going to happen in the future and whether we would, we would be granted status [...] Everything was hanging in the air, we felt as if we were aliens or 'outcomers.' And we're just chancing our fate, everything was hanging by the skin of the teeth. (Alan, refugee status).

Timescales for resolving status were unpredictable – "you can be in this system for like 5 months, you can be in it for five years" (Harris, community development) – meaning that families might live with poverty, hypermobility and uncertainty for years with no clear end in sight. Ariel described the women that she supports around maternal mental health with in collective and individual terms:

> I suppose it's the worry that they've been maybe been here for years, I can't understand it [...] we work with one woman in particular who's been here for eight years. And she's still got that worry of, I might be sent home. (Ariel, family support)

Being "sent home" might mean returning to places families fled for their safety. Temporal uncertainty connected to existential uncertainty, lives oriented towards a different type of survival. Living with uncertain status meant this danger was ever-present:

> If that's putting, potentially, children in danger, let alone the parents, then that can't be a good thing, at all. (Ariel, family support)

Alongside physical safety, some parents worried about children being returned to countries they had never visited, or worried about their education and long-term prospects if status was not resolved. Jenny (parent, asylum applicant) wondered whether the benefits of enduring deportability might ever materialise:

> Jenny: We are just saying "when is it going to last? When is this going to end?" Because this, all this is new to us.
>
> Calum: Yeah. So you kind of look ahead to the future and it's not clear…
>
> Jenny: No.
>
> Calum: …when it's going to be settled.
>
> Jenny: No.
>
> Calum: Is it clear to you that someday it is going to be settled and it's just a matter of waiting however long that is? Or are you still in a place where you're not sure if it's ever going to be settled?
>
> Jenny: No, I'm not sure. I'm not at all.

An additional temporal aspect connected to ideas of "temporal desynchrony" (Folke 2018, p. 1510); being excluded from the rhythms and cadences of peers, social groups, or imagined lives and trajectories and experiencing challenges in identity as a result. Participants described the sticky or suspended time of Griffiths (2014) with specific reference to parents, "stuck in this situation that's so difficult" (Pauline, family support) or "stuck, and they don't know how to move forward" (Ariel, family support).

This was also relevant in terms of spatial exclusion, where parents were denied access to social environments where positive identities could be constructed or maintained. This was clearest when parents and practitioners spoke of being unable to work. Denied the means to support a family through labour, forced into dependence on inadequate welfare provisions, parents felt shame, frustration, and distress:

> (Nick) just feels like a failure because he can't provide for his daughter [...] He makes things last, he's very good at budgeting and everything else but that's not

the issue, the issue is he's healthy and he's fit for work, and that's what he wants to do [...] be part of society and be part of something to make him feel that he is providing for his daughter. (Amy, family support)

-

I used to work and earn my own money, and I would prefer to pay for my own bills, to provide for my children [...] Somebody is looking after them for you [...] We are not used to all this so it's having real impact on our mental health. We are not used to someone paying for our bills. We are not used to someone accommodating us. (Jenny, parent, asylum applicant)

Parents could not access the cultural, social and emotional benefits of work, nor the sense of themselves as contributors with strengths, skills, a vocation, a trajectory. This occurred within public discourses positioning them as "scrounging" (Amy, family support) or "worthless, stupid, not able to get a job, not able to be educated" (Sarah, family support).

Practitioners described parents who lost "prestigious careers" (Christine) or "status" (Dee) when they migrated, or when their status changed and they could no longer work. These statements sometimes contained implicit narratives of deservingness, as practitioners highlighted people who had left professional, high-status jobs and lifestyles. My early analyses were similar, but with more interviews and in discussion with supervisors, my thinking moved from "loss of status" towards "loss of connections/things that make someone feel like themselves." There were gendered dimensions here. Ariel returned to John, the father in a family she worked with, unable to work and feeling a sense of shame:

He wants his kids [...] to be proud of him, but [they] will say, Dad, why don't you work, or why don't you help Mum, you know, because they're getting older [...] His wife was really poorly during pregnancy, and he feels ashamed, I think, you know, that he's not able to support her, financially. He's not been able to kind of step up and be the man of the house. (Ariel, family support)

Parents often described themselves according to their professional identities, and there were many examples of parents resisting these threats to identity. Jane (parent, asylum applicant) attended college, both to make productive use of the present and to bridge past and future:

Jane: Now I'm doing [my course].

Calum: Ah OK, so continuing…

Jane: Yes.

Calum: …On your career path that you started…

Jane: …at home.

Maria and Jan introduced themselves in terms of their previous professions and their current roles as students. While unable to work, college provided a sense of forward motion, identities not lost but placed in trust for the future:

I would like to start working and I would like to work in the health system and I understand that the most important thing for me is to learn language [...] I love my profession so - I don't even think about doing anything different. (Maria, parent, asylum applicant).

Having a weekly routine of college and community groups was part of being "busy" (Maria) and having a routine. Jan expressed some frustration about only being permitted to study part time because of his immigration status. Jenny (parent, asylum applicant) was hopeful of attending college and connected part-time study restrictions to everyday bordering:

I am an asylum seeker, I'll be allowed to have it part time [...] so it would be like two years for me. So, it's the things like that, that's what we encounter on a daily basis.

Other participants found similar benefits in volunteering and attending community organisations. Anna (parent, NRPF) volunteered in several places, one of which was similar to her previous employment. Frank, as a volunteer coordinator, saw a dual benefit where people could resist being positioned as a "drain" and resist temporal uncertainties - "building up connections as a way to combat that uncertainty rather than be caused by it." He paraphrased a conversation he had with one of his volunteers:

'When kids ask my daughter in the playground what do your parents do I want my daughter to be able to say my mother does this, and my mother does that. I want my daughter to be proud of what I do.' (Frank, volunteer development)

Through these practices, parents resisted the sense of "stagnancy" (Hocking 2018, p. 1162) or "directionless time" (Brekke 2010, p. 164) identified in the literature; they engaged in practices of "active waiting" (Rotter 2016, pp. 93-94). A sense of routine, of being busy an occupied in valid and valued activities, helped resist these temporal

regimes. Jane (parent, asylum applicant) spoke about the need to "move around, stay busy, occupy your mind":

> When you stay at home you think [...] I would be in from morning 'til night then all the trouble, all the thinking would be - will I be thinking 'if I had known will I even stay back at home, then we can come and face the problem, anything that happen will happen [...] what shall I do or what have I done? What did I go wrong?'

Parents were forwarding a candidacy to be recognised as someone more than the sum of their problems, not pathological, not solely composed of challenges and dependence. Frank believed that volunteering supported the laundering of negative experiences into positives:

> They recognise [...] 'I've been there. I know what it feels like. It doesn't feel good. I want to help [...] I want what I want tough, that terrible time I went through, and some of the good decisions I made during that time, I want that to be valid.' (Frank, volunteer coordinator)

This candidacy was not universal, nor could it totally overcome exclusion and its impacts on identity. Sometimes the distance between identities, aspirations and opportunities was too great, the sense of exclusion too profound. Sarah (family support) recalled bringing a new member to her service, a woman with several advanced qualifications:

> She didn't want to be coming to a silly little group [...] with other people who were struggling, you know [...] She came here because she didn't want to be in the situation she was living in, but she's got so much to give. She wants to be working, she wants to, you know, be a good mum, she wants to, you know. And, you know, she's entitled to all those things. She wants to have the rights available to her that everybody else has. (Sarah, family support).

While these activities could mitigate some of the effects of nonbeing, the core issue remained unresolved because status prevented equal participation in society.

Children were often excluded from conversations around sticky or suspended time. Some adult participants felt that young children experienced lessened impacts because of their limited understandings of circumstances or differences, or their relative 'normality' in attending and performing in school in ways aligned with their peers and their hopes of aspirations. Amy (family support) framed school as a site of "escapism" in one family she worked with – Nick, a lone parent seeking asylum, and his daughter Maya (primary school age):

> She's getting fed at school, she's getting social interaction at school, she's getting stimulated at school. Just that whole environment.

Some parents framed education as a priority, the primary motivation for migration or remaining in the UK despite deportability:

> Going to the future we always have a thinking, first of all my son's education, thinking having a good education here then good uni, get a degree, find out a job that he can settle, you know, he don't need to depend on his parents, he can find his own way […] A better life for him. (Anna, parent, NRPF)

Children described schools in terms of current learning and future prospects, which did create a sense of forward trajectory and temporal location. For Nicole, school was a place to "learn new stuff" that will help her with a future career:

> Calum: Why - for you, why is it important to learn all these things?
>
> Nicole: So you can get a job when you're older.
>
> Calum: OK, what kind of job would you like to do?
>
> Nicole: Lawyer. (Nicole, 11, asylum applicant)

Kieran (14, NRPF) hoped to attend "university or college" and to be an engineer, framing school as a route to achieving this. For one practitioner, Toni (advocacy) this could become a source of "so much pressure":

> Because they're already aware of the fact that the system doesn't want you [...] The pressure it comes with is so enormous that the child starts to nurse that fear of failure […] 'I don't want to fail my Dad, I don't want to fail my Mum. My Mum says we're going to be thrown out, the house may be locked, I'd better go to school.' There's so much pressure. (Toni, advocacy)

Some practitioners also discussed problems in the transition from school to further or higher education, where funding was dependent on status eligibilities. Sam (lawyer) worked with young people fleeing family violence who lost their status and their funding:

> A lot of the time, they lose that and have to drop out, while their immigration is pending. Now, that might seem in the context of violence, small fry, but actually, it's massively important to their current lives, it's massively important to their self-esteem, their social peer group, it's massively important to their future prospects.

Harris (community development) also described how without this funding, or the status to access it, people "just can't progress." Education was a crucial site of candidacy,

capital dynamics and belonging with a range of challenges related to mobility, peer relationships, access and engagement, discussed further in chapter 6.

Emotional capitals, mental health and psychological wellbeing

Parental emotional capitals and identities

The phenomena outlined above (poverty, poor housing, spatiotemporal and ontological insecurity) reflect the post-migration "risk-factors" identified in the literature (Fazel et al 2012; Fazel and Betancourt 2018; Reed et al 2012). Throughout interviews, these issues had a combined impact and were associated with narratives of suffering and distress, particularly for parents. Alan and Layla described their time in the asylum system as "catastrophic" (Layla, parent, refugee status):

> We felt pressure and unknowns and even received psychological help [...] But after the status I've been granted, our conditions started to get better and improve day by day, and we started to feel more support. (Alan, parent, refugee status)

Practitioners spoke of "struggle" (Dee, Pauline, Hope), "pressure" (Kate), "stress" (Kate, Amy, Pauline, Harris) for parents because of several interacting influences. Harris focused on poverty and Sarah on hypermobility and instability, with both describing how insecure status undermined fundamental human needs:

> It has implications like, on every level I think, on that Maslow's hierarchy like. From, yes, the psychological stuff to do with stress and mental health to yeah, as I said, eating, nutrition, or being able to clothe your kid. (Harris, community development)
>
> -
>
> If you think about what makes us, as individuals, you know, happy, healthy, mentally and physically, it's about, yeah, continuity, isn't it? And consistency, and the same sort of circle of support being around about you, you know, the same roof over your head, the same job, the same school for your children, nursery or whatever. (Sarah, family support)

Deportability was corrosive and practitioners used language of deterioration throughout interviews - a "wearing effect" (Dee, family support) or parents who "break down" (Toni, advocacy). Amy described how the asylum system "wears people down", thinking particularly of one parent she worked with, Nick (lone parent, asylum applicant):

> I know this sounds strange but with (Nick), the longer it's going on, the more difficult he's finding it, and you would think it would be easier [...] His mental health is deteriorating. (Amy, family support)

Hope (migrant support) described working with women whose children have additional support needs who become "exhausted":

> It's a disaster, because you can see how a mother is struggling [...] And then you can gradually see how their mental health is going down [...] So you see them down the line, the person has just gone.

Parents spoke too of corrosion of their mental health over time:

> I got lots of stress, so I forget things, what has happened for the, you know, very depressed now. You know because my life was going so smoothly when we are first time here. We start working, we support ourself and, yeah, our life was, we have our own rented flat and all the circumstance changes just after 3, 4 years. And I couldn't think back how it was so difficult time, yeah. Very, very difficult time. (Anna, parent, NRPF).

I remember Jenny being in tears as she described "my anxiety and my depression":

> I'm always thinking in despair because I don't think like there's any way out of this. If I think about my children, how am I going to save them? I can't do it alone. [...] we are just saying "when is it going to last? When is this going to end?" [...] And that has so much impact on my mental health. I'm always thinking in despair because I don't think like there's any way out of this. (Jenny, parent, asylum applicant)

The causal complex seen to impact parental mental health often combined pre- and post-migration influences. Some practitioners focused on maternal mental health, where they saw a growing number of asylum-seeking women seeking support:

> A lot of that is obviously to do with, yeah, their status being unsettled, situations they've come from. Which obviously causes real anxiety and stress, and yeah, subsequent mental health difficulties. (Amy, family support)
>
> -
>
> Do the parents actually have postnatal depression, or by having the baby, has it just, like, really raised traumas, and worries, and concerns about if they have to go home now they have a child? (Ariel, family support)

Many participants focused on temporal and ontological insecurities alongside elements of parental identity focused on providing safety and security for children. Dee (family support) spoke of parents who feared return to the extent that they would "disappear off the map"; other practitioners spoke of parents who considered suicide or contemplated returning while leaving children behind – "it might be better that they're left here, and I'll just go home and face whatever I have to face" (Ariel, family support).

Beyond safety, parents and practitioners spoke about parental guilt and shame where conditions of nonbeing threatened parental identity. Jenny (parent, asylum applicant) felt that her children were being punished for her decisions:

> They cannot punish them because of us [...] that's how it feels because when I feel that I will be like "oh, this is my fault."

Other parents expressed guilt about being unable to provide a certain kind of material life for their children. Harry and Nina described having to refuse their children "not everything they want, but everything they need" (Harry, parent, NRPF):

> I'm thinking when I was a child I never suffered, my Mum and Dad never refused anything. But I'm doing to my children. (Nina, parent, NRPF)

Some connected this to material practices of care, with several practitioners describing how parents cannot even afford "the very small things [...] like having an ice cream when you go to the park" (Christine, family support). Birthdays, Christmas, Eid or other special occasions were particularly challenging and many services provided support here:

> It's something for their children and (parents) want to give their children as much as anybody wants to give their children, and they want to give them something special. (Kate, migrant support).

The impact on practices of care was more than material. Christine worked with Edith, a lone parent with NRPF who worked 50-hour weeks to meet material needs, impacting her availability for her son:

> [Edith is] very upset [...] she doesn't get to spend a lot of time with her son. Because she's working so hard as a single parent, she's a single parent, to support her son with money, she's doing all this and paying someone else to raise her child.

Practitioners described a causal complex where the corrosive impacts of nonbeing impacted parent's emotional resources, emotional availability and everyday parenting

practices, impacting on children's wellbeing. Pauline (family support) spoke of concerns that stress, anxiety and uncertainty would be "projected" onto children…

> [...] because of the huge anxieties that their parents face and the, you know, the kind of uncertainty, massive uncertainty, you know and what that then leads to in terms of the stress and anxiety [...] then the impact then on the children of that uncertainty.

Amy (family support) spoke of how experiencing these stressors during pregnancy and after birth might impact "hyper-aware" babies in ways that "prevent them thriving." Harris (community development) described "aggressive" parenting connected to the "dark place" of nonbeing:

> The way that you maybe discipline your kids is quite aggressive, like that just gets worse and worse and worse, that dark place just takes you into another dark place and I think what I've witnessed is kids feel the brunt of that from the parents.

Even where parents appeared to be coping, there was a sense of precarity where something beyond their control might push them into crises. Toni (advocacy) saw the women she works with being "stretched mentally", and Dee (family support) described how parents "cope with things" but…

> […] It doesn't take much to maybe tip the balance, you know. And they worry about providing for their children and they recognise that maybe their own mental health might have an effect on their children and they're not caring for them maybe as much.

Some practitioners described parenting practices aimed at shielding and protection that might contribute to fears and anxieties for children. Concerns about letters, phone calls, "the knock at the door" (Christine, family support) that might be immigration authorities could create an everyday "atmosphere of fear":

> Kids as young as five, six are being told to shush in the house, not talk. People knock the door, don't open, whoever it is. Things like that. Asking kids to look through before they open the door. (Toni, advocacy)

Protective, anxious parenting featured throughout practitioner narratives. Pauline (family support) described parents "too scared to leave their house" and children "kept indoors" because of worries about neighbourhoods and communities. Practitioners connected these fears and parenting practices to behavioural changes in children that suggested distress, anxiety and fear:

> Sometimes you would find some of the kids going into their shell, the mum starts to complain, 'I don't know why he's not talking anymore, I don't know why my son's not speaking to me, I don't know why he's getting angry [...] I don't know why he's this, I don't know why he's not friendly anymore, you ask him let's go out, he's saying no, he's not going out.' (Toni, advocacy)

Other practitioners spoke of aspects of children's behaviour that suggested fear or insecurity:

> The wee boy just clung round her neck, and she didn't know [...] I think she shared a flat with a couple of other families. And I believe that she had a room, and he had a room, however he wouldn't sleep without her. (Ariel, family support)
>
> -
>
> You can see them when they come here and the way the children are behaving. You can clearly see the mum is completely, you know, exhausted. (Hope, migrant support).

Amy described Maya (Nick's daughter, asylum applicants), and saw in her behaviour something relevant to children in similar circumstances:

> She's very guarded. Always looking for approval, always to see 'is it okay to say this, is it okay to say that?' [...] That's what you get with these children, they always need reassurance – 'am I saying the right thing, do you want me to say that or do you not want me to say that?' (Amy, family support).

Asking parents about this was difficult because of the elements of guilt and shame above and the implication of parental failures or shortcomings. When I asked Alan and Layla about impacts of their circumstances on their children, their first response was an unambiguous no. Alan later returned to this:

> It did affect the children, and they were quite aware of the situation [...] my son was saying to me that he was praying every night before going to bed and when it was time, the time's coming up for an interview they were feeling [Alan and Layla both speak] - feeling worried. (Alan and Layla, refugee status)

Children's direct awareness of their immigration circumstances could be hard to assess, and with it any impact on their everyday lives. Kieran (14, NRPF) was the only child to explicitly draw and reference the Home Office – the dotted line clearly


Figure 8: Kieran (14) drew the Home Office, who "threaten us"

showing how they acted as the root of all the adversities and challenges he had faced. He realised, as he got older, "how bad it is", speaking of how they would "threaten us", and he described his own everyday sense of fear:

> If they send, like, a letter [...] I'll feel sad. But if they didn't send a letter I'd be, like, okay.

Anna's narrative complemented this, as she provided her assessment of the impacts of deportability Kieran:

> [Kieran] was very very worrying all the time, that make him whole stress and emotionally upset. He can't concentrate on, even at school, when he come back the first thing he ask 'anybody came to the house, either social worker, Home Office?' (Anna, parent, NRPF)

More commonly, the impact of deportability on children's mental health and wellbeing was connected to the degree of disruption in other areas of their lives. Abigail (parent, asylum applicant) described the impact of spatial and ontological insecurity for Ibrahim:

> He's like 'oh Mummy, what happened? Why we leaving this house again? Why we going to another house? Why we doing that?' And I have to say that 'this is your new house' but he knows that it's not, we're just going to stay there for a while and then just be off again.

Harry and Nina connected recent difficulties for Ricky to the nature of change and loss of important things in his life:

> Harry: I don't know what's going on with him, he's not sleeping well.

> Nina: He's not sleeping at all, he's missing his stuff, he's especially missing his XBox, he's very emotional with his Xbox because we lost his Xbox. And he cries a lot.

> Harry: He's bored, all the time he's bored.

> Nina: He's bored because we don't have TV, we don't have XBox, we don't have…

> Harry: Internet

> Nina: …internet.

> Calum: So it's been a big change.

> Nina: [...] it's been 4 months, they are coping well but I think now they are fed up. (Harry and Nina, parents, NRPF)

Ricky did not mention this degree of distress; indeed, few children mentioned issues with their own mental health and emotional wellbeing. I wondered if this connected to resilience, to practices of disclosure or protection of parents, or whether the ecomapping protocol adequately approached these issues. A more direct approach about difficult parts of life, rather than the people or things making life harder, may have secured greater insight here.

Social capitals and pressures towards isolation

The final area for exploration here relates to social capitals, and immigration status had significant impacts in social lives. Participants spoke extensively of the significance of friends and social connections as a core part of wellbeing. This section describes the significance of friendships and peer relationships and explores how participants navigated the challenges of social relationships while living with precarious status.

Children's friendships

After family, friends were the most consistent positive feature of children's maps. Children were actively engaged in building and sustaining friendships over time, through shared activities, experiences and aspects of identity. For many children, friendship was about enjoying time with other children, people you enjoy "hanging out" with (Mia, 13, NRPF) or "spending time" with (Nicole, 11, asylum applicant). Friendships were formed within and mediated by service environments, particularly schools and services providing social activities. Nicole differentiated "school friends" from "church friends":
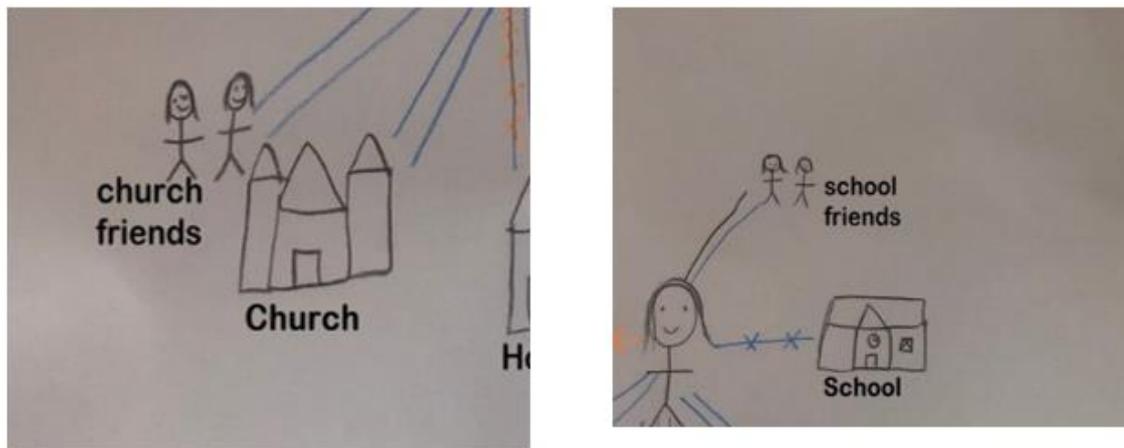
Figure 9: Nicole (11) differentiated "school friends" and "church friends", both a source of support

Parents also connected children's social lives to services. Abigail described Ibrahim's time at nursery:

> He will come back and say to you that 'oh, these are my friends' names' and then start talking and then he's interacting with other children which is really a good thing. (Abigail, parent, asylum applicant)

Children's friendship dynamics involved commonalities of various types - shared activities and interests, shared life experiences, shared time. All children here were engaged in active negotiation of complex dynamics of friendship and belonging, sameness and difference. Those who had been in the UK longest; who had stronger English language skills; and who had stability in accommodation, schooling and access to leisure activities described stronger, unambiguously positive friendships. Ricky (11, NRPF) spoke of shared interests in football and popular culture. His drawings of friends featured activities and play:
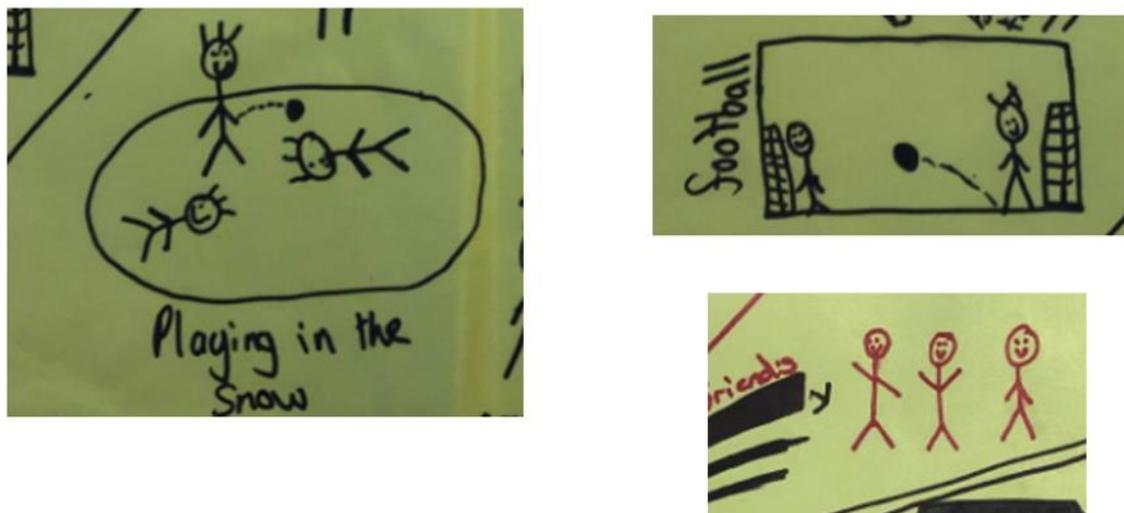
Figure 10: Ricky's (11) friends, both in general (bottom right) and in play (top left, top right)

Both he and Kieran (14, NRPF). described their friends protecting them from more exclusionary peer dynamics. For Kieran, friends "look out for you" or are "backup" against other young people who are "annoying." Ricky described friends as a crucial support against the racist abuse he described above.

Some children referred to degrees of *closeness* in friendship, and in how friendships might change over time. Mia (13, NRPF) spoke of being friends with "everyone" when she was younger to learning "what friends really are" and developing a smaller group of more meaningful connections. She and Nicole talked of close friendships in terms of trust, talking and emotional connection:

> My close friends in school are people that I trust. (Mia, 13, NRPF)

> [Close friends are] people you can talk to. (Nicole, 11, asylum applicant)

Figure 11: Mia (13) drew strong positive lines towards "close friends and family" and "school friends"

Among those who had spent less time in their schools or local areas, or whose English language skills and habitus were less aligned with social environments, I noticed a tendency to describe friendships in the abstract or in ways that suggested ambivalent, fractious or insecure relationships. Huseyn was the only child here to say that friends were not important to him. He drew two friends, explaining that "I'm sometimes good friends with them and sometimes not":

> One of my friends, the one who's sometimes bad and sometimes good, he's misunderstanding me. So I am saying one thing and he hears another thing and understands it a different way. He's making up things as if I told something and then he goes to other kids and tells as if I told it but I never told it. (Huseyn, 7, refugee status)

*Figure 12: Huseyn (7) was more ambivalent about his friendships*

Eva (14, asylum applicant) spoke of several friends positioned according to complex dynamics of similarity, shared experience and mutual understanding. She drew two school friends in asylum-seeking families from different cultural backgrounds, saying that they "understand each other" but are not close. Cultural capital dynamics prevented her from "feeling comfortable" in social situations:

> There are a lot of situations in school when people talk and I don't understand so I don't feel comfortable.

She imagined a future trajectory of becoming "like a local" – fluent in English, "adjusted" to her environment and with "a lot of friends and I will be feeling comfortable in such situations."

Eva then drew "family friends" with shared language and background, "so I understand them and they understand me." She drew her closest friend, who lives in her country of origin, a friendship maintained through social media:

> We talk on the phone almost every day and Instagram, so I'll draw her as well […] I'm telling her through my day [...] I didn't manage to find such a close friend here so we have a lot of common.

Figure 13: Eva's (14) closest friend in her country of origin (bottom left); family friends (top left) and other friends (right)

Eva's experiences showed her complex navigation of sameness and difference, complicating bonding/bridging distinctions. They also show how children navigate mobilities in their friendships, and other children spoke of how post-migration mobility had negatively impacted their relationships.

Ricky's sense of the "homeliest home" connected to his old house and the area he left behind, where his friends lived and where he went to school. He was "a bit upset" by how his friendships were affected by movement:

> Because my school [...] was a five-minute walk and all my friends live in [the same area] [...] When it was summer I could, even winter before last year and the years before I would see my friends, but then 2019 was kind of changed a bit, I've not really been seeing them that much. (Ricky, 11, NRPF)

Similar feelings of loss featured in Nicole's (11, asylum applicant) narrative. She previously lived in a house near her school and "2 minutes away from one of my friends". After moving house and school she "hardly ever" sees her friends - "I live quite far from them [...] I kind of miss my old friends." Belongings have spatial and relational elements; being removed from spaces of friendship resulted in profound feelings of loss. It is also telling that no children described seeing friends at home, receiving visitors or playing in

the house; friendships were things that happened in schools, at services or in public spaces, but not at home.

Parents and practitioners also expressed concerns about how movement impacted children's friendships and sense of comfort and belonging - children "making friends, starting to feel comfortable for the first time" (Peter, community development**)** and then forced to start anew:

> [Ibrahim] make friends at the school and then he will change school again and then keep asking old friends like what he did before [...] when we came here, he keep on asking of those friends. (Abigail, parent, asylum applicant)
>
> -
>
> They settled in in the first school, they made friends and it was difficult for them to leave them friends behind [...] Now they're settling in again and making new friends and it's going to be difficult for them again to move to another school [...] they don't want to move again. (Alan, refugee status)

Rather than considering these dynamics purely in terms of loss, it was important to explore how children actively managed the impact of movement on friendships. Mia (13, NRPF) spoke about building a broad, geographically dispersed group - "I have friends all over." Ricky (11, NRPF) described how "I can make new friends" and spoke about having to do this previously, and he and others (Mia, Eva) used social media to maintain relationships impacted by movement. Yet the overall impression was of loss and friendships reconfigured by dynamics beyond children's control.

I felt that hypermobility combined with other factors to limit children's ability to make and sustain friendships. It may be that Huseyn's more turbulent friendships and his ambivalence towards friendship occurred because of turbulent movement. Tara (9, refugee status) described how moving school impacted on her communication with peers:

> In this school, in the beginning I didn't talk to other kids and they thought that I cannot talk, that's what I didn't like [...]

Interpreter: [...] [Tara] before said that in the first school she was talking was fine but now this school she was not talking so when she was, was saying something they were all the time saying 'oh, so she is talking, she said something!' (Tara, 9, refugee status)

Figure 14: Tara's (9) friends

The friends Tara drew on her map were not school friends, and I wondered if movement and cultural capital dynamics and had affected her capacity to build and sustain school friendships. She also attended a dance class and felt a sense of difference – "some kids already were going to that place, they knew what to do and I didn't." Tara and Huseyn had not had the spatial stability required to build close relationships and belongings; each new space contains risks of rejection, exclusion and the prospect of onward movement (Ni Laoire et al 2010; 2011).

Other factors mediated children's social relationships. Some practitioners described a causal complex incorporating poor parental mental health, protective parenting practices and homes in unsafe or unfamiliar local areas. Pauline (family support) was concerned about children kept indoors by parents, unable to "just be an actual kind of child", to grow through play with other children:

They need, you know, to be outside, they need to be playing [...] That for me is a really common theme [...] they are just so isolated I think in some situations and stuff and I suppose because, you know mental, their parents' mental health.

Parents and practitioners expressed concern about how poverty impacted children's friendships, compounding feelings of difference:

You are feeling, oh my parents are poor [...] 'I don't even speak the language' or 'I am different.' (Hope, migrant support)

Adult participants felt that being unable to afford the right clothes, or to participate in the right activities, undermined children's abilities to "fit in" (Harris, community development). Harry (parent, NRPF) spoke in quite emotional terms of how his children feel "ashamed":

When they sit with their fellow friends or they talk like - every time, every time they talk that 'OK, you are wearing this thing, you are wearing, we are going to holidays on this place, we have done on holidays this thing.' So they have nothing to share with them.

Interestingly, children rarely spoke in these terms and few described feeling these impacts in their everyday lives. It is possible that these were entirely adult concerns, connected to feelings of guilt or shame; it is also possible that children were taking a protective role by managing their own demands or expressions of need (Farthing 2016; Attree 2006; Pugh 2009). It may also be that I asked adults more directly about needs, impacts and challenges, and children about the sources of stress and support in their lives. A more direct approach to poverty with children may have yielded more specific insights here, and may be an area for future research.

Parental friendships and "family friends"

Parents and practitioners all described the importance of adults' friendships, and children the importance of "family friends", who were generally their parents' friends and their families. These friendships were important for several reasons. Children associated them with care, kindness, fun and enjoyment. Ricky (11, NRPF) spoke about "close, close" family friends, and Mia (13, NRPF) expanded saying they were "people to enjoy our time with":

> We quite like going to their houses, because, like, they also have kids [...] we do like a lot of stuff, like, we do most stuff together, like, we go out a lot of places.

They talked about trips to safari parks, beaches, picking strawberries, and weekly visits to these friends' houses. Eva (14, asylum applicant) described family friends in similar terms. These friends had economic and mobility capitals and could open out children's experiential and spatial horizons:

> They take us by car to different places. They took us to the mountains and we went fishing with them [...] which is really good because otherwise I would stay at home and would not communicate with anyone. (Eva, 14, asylum applicant)

Eva contrasted her experiences with those of a school friend, also an asylum applicant, who lacked these connections:

> She has not seen such places like I saw because our friends have cars and stayed here for long so they can take us whereas they don't have such friends. (Eva, 14, asylum applicant)

Again, the bonding/bridging distinction is complicated; Eva, Jan and Maria shared a linguistic background and elements of cultural background with these friends, but their settled immigration status gave these relationships a bridging quality.

When parents and practitioners spoke of adults' friends, they were framed as a source of negatively advantaged capital (Anthias 2007) supporting survival and coping:

> When the shit hits the fan and destitution steps in, if you have that support, extra support network, it can be the difference in terms of survival. (Kate, migrant support)

Parents described the material and practical support they received from friends, including help with money, food, laundry, clothing and other material needs.

> One of my friends, every day we just have dinner with them. [...] [Our religious community] collected some money, they helped in that thing also. (Harry, parent, NRPF)
>
> -
>
> Any Christmas, if any occasion, they are give the, our gift. With gifts, gifts and with some, sometimes we get the £20 and £10 [...] Friends is very important in this time. (Philip, parent, NRPF)

Parents spoke too of the emotional, psychological and moral support they received through friendships and connections. Jane (parent, asylum applicant) described a network of groups she attended where she can "go out and make friends, talk to people" and "relax your brain." Mutual support and reciprocity were important among people in similar circumstances, in groups where "everybody was everybody's person":

> They will just talk normally, share your experience like maybe somebody says 'any time Home Office send letter to me I used to get scared', or like somebody is like 'ah, it's happened to everybody, it's not only you, so you don't need to worry yourself about that.' So I say 'OK […] if something happens what should we do?' And another person will say 'like so so so so so, this is what I experienced.'

Jenny (parent, asylum applicant) described a similar sense of commonality and connection, feeling included in a social space rather than excluded and alone:

> We were able to meet more mums so it, it's really great. Because I think like I'm not alone, hearing different stories, stories from other people, so I'm not the only person with depression and anxiety [...] we can support each other.

As with children, parents navigated relationships of similarity and difference. Jan, Maria and Eva described family friends with shared languages or cultural backgrounds who

are "like kinds, feel like same kind of people" (Maria), but also friends from completely different backgrounds but with immigration histories. They regularly attended community groups to "talk, communicate and spend spare time" (Maria, parent, asylum applicant):

> We have acquaintances, we have friends there - that's why we go there, to meet people and to talk to, just to meet friends. (Jan, parent, asylum applicant)

The sense of shared experience in the migration system, rather than simply shared culture or heritage, featured often. As Toni (advocacy) argued, some women who user her service "do not have anything in common, but when you come to them, they relied so much on each other [...] because they both know where the shoe pinches."

Practitioners felt it was essential for people to feel "supported and connected" by friends (Pauline, family support), a way to mitigate the "rootlessness you get with the particular kind of uncertainty (through) people-to-people connections" (Frank, volunteer development). Friendships, and the service spaces supporting them, helped parents resist the isolating pressures of nonbeing, to receive practical and emotional support, and to build and sustain capitals. Parents acted as Fanon's humanism suggests – finding meaning, value and recognition beyond the terms of oppressive coloniality (Almeida 2013). Friendships and social relationships were also crucial in candidacy dynamics, explored in chapter 5.

Like children's friendships, parents' networks were impacted by deportability. Isolation was a common theme. When Amy (family support) talked of the corrosive impact of nonbeing on parents she worked with, including Nick (lone parent, asylum applicant):

> (Nick) finds it more difficult because he can't be in a relationship because he's not allowed anyone to stay with him. So that loneliness is there [...] He's got no-one, he's got no immediate family, he's got absolutely no-on in this world apart from [Maya] and he finds that difficult. He can't work, he can't meet people as in like a relationship, he can't have that.

Amy connected this to the complex of past and present circumstances impacting on Nick's ability to build meaningful, trusting relationships:

> [Nick's] very guarded and very aware because of all the torture that he's been through from people that he's trusted [...] he starts to think 'who can I trust?' He doesn't let anyone in there. (Amy, family support)

Practitioners described isolation as a denial of fundamental human needs - "we're social beings" (Pauline, family support). Frank (volunteer development) agreed – "I don't think

humans were designed to live alone." Abigail (parent, asylum applicant) made an interesting contrast between being isolated and being "yourself", having a sense of positive identity:

> "You will just feel like isolated or lonely and then when you just text someone and then you'll be like yourself again."

Parents faced multiple pressures towards isolation. Hypermobility was again relevant. Sarah (family support) described a family "really involved [...] really integrated into their local community" but then dispersed to a different city. Pauline (family support) described this as a "further trauma":

> They're then whipped from one community, you know which they might have built up links and, you know been really settled and then they're just taken, removed from that and put in a totally different community as well [...] losing all the kind of links and all the supports that they've kind of built up in one place.

Establishing relationships and roots became risky – as Abigail (parent, asylum applicant) put it, there are "risks of staying in one place and getting established" if one will inevitably move on. Immobility was required to develop and sustain relationships and a sense of relational security and belonging.

Welfare bricolage, risk and vulnerability

The image above is of social connections as unambiguously positive sources of help, but this must be balanced against the dangers of being forced to rely on friends, acquaintances or communities. Welfare bricolage is a matter of necessity, occurring in circumstances where formal systems to meet need are inadequate (Phillimore et al 2019). Parents expressed guilt, shame, or embarrassment about having to rely on friends, and described friendships becoming instrumentalised, transactional and even breaking down completely:

> Nina: There's nobody to provide you because when you're in such a situation everybody will go away.
>
> Calum: OK, yeah, so rather than people coming to, to help and support…
>
> Nina: yeah
>
> Calum: …they're more likely to step back?
>
> Nina: Yeah, they say 'you are burden, you can be burden on us', you know.

Harry: You have somebody very scared that he is not having money, he may ask us for some loan or something.

Calum: OK, and is that, is that your experience that [...] That people step back rather than stepping forwards?

Nina: yes [...] I have blocked 21 people in my contacts. (Harry and Nina, parents, NRPF)

Anna (parent, NRPF) described something similar, preferring services for support instead of friends because of shame to avoid jeopardising friendships:

I've got lots of friends but I was so shy to ask 'can you give me some food, can you give me some money?' Yeah, that was very shy, you know, in our culture we don't ask all these things, you know, then - my feeling is your friends will become distanced if you go through like asking money or food.

Being cut off from avenues to meet basic needs, being forced to rely on inadequate welfare provisions, and the fear caused by deportability created conditions for harmful social relationships including circumstances of domestic violence and exploitation - as Hope argued, people are "prepared to do anything" to survive. Harry (parent, NRPF) "worked as a slave" because his visa depended on his job, paid a fraction of his agreed salary. When he complained, his employer reported him to the Home Office and his visa was revoked. Sam (lawyer) worked extensively with survivors of gender-based violence and described how "a punitive welfare system and punitive immigration system" prevented women from leaving abusive situations:

It will often include times where 'I've tried to leave here, and I tried to leave there, and I tried to leave this other time.' And concerns about accommodation, concerns about care for their child, you know, how are they going to keep taking the kid to nursery, or keep the kid in school [...] Those are considerations that stop them leaving.

After Abigail's initial visa expired, she had NRPF, no right to work, nowhere to stay and no clear routes to meeting her everyday needs. She moved in with the man who became Ibrahim's father, who promised to support her to resolve her status while supporting her. After Ibrahim was born, he left, and she was "penniless":

Before I knew, I've already overstayed so there was nothing I can do. I don't have anything to pay my rent or feed my child or anything until I met a friend [...] I mean I call her a friend but she's not my friend because I only met her once and then

> she promised me, we were talking over the phone, she promised me that "you
> can come and stay with us until you sort yourself out." (Abigail, parent, asylum
> applicant)

This friend did not follow through on her promise, and Abigail and Ibrahim were left destitute in an unfamiliar city.

The "dark side" of social group dynamics (Allison 2017, p. 51) was evident too in gendered dynamics, cultural expectations and relations of power. Harris (third sector, community development) described working with one family - Olga and Daniel (parents) and their son Leo, 5 years old and with developmental disabilities. Daniel had been able to learn English and to adapt after migration, but his "super-controlling" behaviour prevented Olga from attending classes or groups that might help her develop social or cultural capitals. Sarah (family support) worked with Naomi, a parent similarly prevented from building connections by gendered caregiving duties – "[her husband] spends a lot of time with his male friends [...] so she's often by herself with the kids." Dee (family support) described Nadine, a parent trying to cope with the breakdown of her marriage whose social networks were unhelpful:

> Particularly I think this individual said that she can't speak to her family about it
> because the shame [...] particular cultures it's more shameful than perhaps the
> Western society.

Even with the elements of cultural essentialism or stereotyping that appeared in some narratives, the core point stood - to presume the positive nature of social relationships was dangerous, and colonial nonbeing intersected with other dynamics of oppression and exclusion to negatively impact wellbeing.

Summary and conclusion: status as a source of need

This chapter explored how immigration status influenced child and family wellbeing, and the key things that children, parents and practitioners felt were central to wellbeing. The findings suggest complex relationships between economic capitals, spatial and mobility capitals, ontological insecurities and emotional capitals. Immigration status was central to the causal complex in how it produced poverty, spatiotemporal instability and exclusion, stress and distress, and pressures towards isolation. In analysis, it was difficult to disentangle these influences as they were rarely discussed in isolation. Their recursive, mutually-reinforcing nature also made cause and effect hard to distinguish – e.g does poor mental health contribute to isolation, or does isolation contribute to poor

mental health? - although immigration status was often framed as the deepest and most profound influence.

 The chapter also provided insight into family members' strategies and tactics for bricolage; how they resist the pressures of life in nonbeing and to support both survival and more liveable, meaningful lives. Services were crucial as sites for gathering social, material, emotional and cultural resources that might be capitalised to support wellbeing. So too were networks of friends and acquaintances, although both services and networks could contribute to harm and to unliveable lives. The following chapters connect the issues explored here with the candidacy framework to explore the role of services around wellbeing.

Chapter 5: Identification, Navigation and Permeability

Introduction

This chapter focuses on candidacy identification, navigation and porosity/permeability. Identification refers to the identity-work through which people come to identify as candidates with needs to be met by services; navigation, the work required to reach point of entry through the accumulation and mobilisation of resources; and porosity the degree of "alignment" or "fit" between service systems or processes and the resources of candidates (Dixon-Woods et al 2005; Malzer 2013). Permeability and porosity include formal aspects of service design, practicalities of access and the unspoken and tacit rules of engagement that together delineate an ideal candidate, using the service exactly as intended and possessing all the resources that engagement requires (Dixon-Woods et al 2005). The chapter argues that migrant candidacies are prevented or suppressed by the intersection between status, other aspects of social position and the economic, social, cultural and emotional capital dynamics required to identify, navigate and render services permeable.

Emotional resources: fear, anxiety and distress

The most direct influence of status on identification was in formal eligibility, where categorical fetishism and welfare chauvinism meant that many people were actively excluded by status or fell into gaps in policy provisions that did not account for their circumstances. Amal (advocacy) focused on how certain candidacy routes were simply not available – "they don't have the right, even, to ask for the help":

> We are tied for action, our hands tied, so we cannot do any action. So I cannot apply for a benefit for them, I cannot apply for anything. They don't have the right.

Sam (lawyer) provided an example of categorical fetishism's failure to account for diverse circumstances, leaving some people with similar needs able to access support while others could not. The domestic violence concession, designed to provide temporary status and access to welfare provisions for survivors, applies only to adults fleeing partners:

> There is no DV (domestic violence) concession for children [...] It applies to adult women, but not to young women, under 18.

In denying formal access to certain services, status produced candidacy-identification for others. Denied access to the resources to live free, self-sustaining lives, many needs could only be met through engagement with services – as Frank (volunteer development) believed, families "have far more meetings with agencies than 'we' would have in the course of everyday life." Yet the candidacy framework is built upon the idea that candidacy identification is about more than formal eligibility; it is about identity and is subject to a range of complex influences related to deportability.

The first of these relates to emotional capital dynamics around fear, anxiety and insecurity. Fear of discovery by immigration authorities, or of doing something that might jeopardise an application and the resolution of status, suppressed candidacy for a range of services. Harry and Nina (parents, NRPF) described other families they knew – "all the time they are under fear" of being found and deported (Harry); "if they get sick they don't go to doctor" (Nina). They did not refer to themselves here, and this was one of many areas where I felt that Harry's professional background and knowledge – his cultural capital – was protective of emotional resources.

Practitioners similarly described parents being "scared from the system" (Amal, advocacy) or "very cautious" because of worries and fears (Pauline, family support). Toni described having to "tread with caution…especially for women":

> They want to play safe because they don't want to trigger anything because they don't know what the process entails [...] You find them not wanting to speak up because the kids have just been allowed into school, their refugee status is not confirmed. They don't want to be visible. (Toni, advocacy)

Practitioners often connected experience of immigration system with families being "frightened of different types of authority" (Ariel, family support). For Harris (community development), if immigration authorities and asylum support are a family's first experience of "white, Western bureaucracy [...] you don't want any more of that shit in your life." Practitioners also described more general feelings of vulnerability in relation to services, related to "confidence" (Toni, advocacy), where emotional resources, power dynamics and feelings of insecurity combined. Kate described accompanying people to GP appointments:

> A lot of them were very isolated, vulnerable asylum-seekers who cannot go to the GP because they're too scared. Or they get disorientated and they don't know how to get there. (Kate, migrant support)

These emotional capital dynamics connected to permeability and the emotional capitals required to access or engage with a service. Whether services projected 'formality' or institutional authority was relevant here. Sarah felt her service had a "relaxed atmosphere":

> People can literally just come in off the street, and make themselves a cup of tea, you know, have someone to speak to [...] somewhere that people can actually come and be a part of.

By contrast, Harris (community development) described another migrant support organisation with a drop-in whose spatial dynamics might act as a barrier:

> People don't even want to go in there because they've got like bells on the door, cos it's like you're seen as another Home Office. So I think there's an element of that as well, there's so much distrust.

Even services that considered themselves accessible or porous felt that people were "very anxious about coming along, initially" (Sarah, family support). Peter (community development) saw how emotional resources, structural positions and vulnerabilisation combined:

> We work with hundreds of people here but there's hundreds more people who I've never met in my life and never will [...] They might be intimidated to come to a place even like this which I think is fairly welcoming or they might see anywhere, a health centre or a hospital or a place like this as a place to be nervous about because of their past experiences.

Emotional capitals were also visible in discussions of the corrosive impacts of deportability. Harris described how the asylum system "repels people":

> It creates dark, dark energy within people and within, on an esoteric level it's fucked [...] if you're in a shit situation and you're not in a good place, you're not gonna like, really any of the services that you're being offered [...] It's like a self-fulfilling prophecy almost, isn't it? You give people shit, they're gonna be shit. (Harris, community development)

Practitioners focused on college or volunteering felt that candidates needed to have "developed some resilience" or had to be "together enough" (Frank, volunteer development). Frank described some new volunteers being preoccupied or anxious about their immigration status, unable to engage and ultimately falling away from his programme. This connected to temporal dynamics; Ariel (family support) described how

parents could become "stuck", unable to engage with services oriented towards the future:

> Some parents that have said, 'I just take every day as it is.' [They] just can't see tomorrow for worrying about today.'

Emotional capital dynamics connected closely to cultural capitals, particularly around knowledge and information which could render services more knowable and less daunting.

Knowledge and cultural capitals

The cultural capital domain includes knowledge of rights, entitlements; knowledge of available services and their roles; and the more tacit knowledge of "rules of engagement" in service access (Sime and Fox 2015, p. 531). Here I connect this to the nature of change that families experienced - changes of place brought by migration itself, but also those brought by hypermobility or changes in status where families found themselves with different rights and entitlements and a new social position. This is one way in which vulnerability is "bestowed upon" migrants (Lind 2019a p. 342); they are *made* vulnerable, as Kate (migrant support) argued - "maybe you wouldn't be identified as vulnerable, but you would definitely feel vulnerable if you hadn't been in that situation before."

The link between cultural capitals and emotional capitals was clearest when I spoke to Jan and Maria. They each used a similar metaphor for arriving in the UK – "being blind" (Maria) or "walking in the darkness and you don't know how to turn on the light [...] like a baby who was just born." Knowledge and ontological insecurity combined where parents had no clear sense of what to do next or who might help:

> Our life has changed and we're not allowed to work, we don't know what to do next. It was quite stress and altogether it become very difficult in, all our situation has changed. (Anna, parent, NRPF)
>
> --
>
> How help is coming, we don't know. (Philip, parent, NRPF)

Even positive changes brought difficulties here, as rapid move-on periods from asylum support combined with new, complex and often confusing systems in housing, benefits and other systems.

Cultural capitals connected to families' knowledge of the "social infrastructure" of services (Frank, volunteer development). Understanding who services were, what they

did, and what was required to access them was both essential and difficult. Kate (migrant support) described public services as "really hard to navigate when you're newly here":

> You're coming from maybe from places where those individual systems don't exist, and they don't operate that way, and you don't know that you're supposed to go to the dentist [...] or just go to the dental hospital instead of A&E.

Frank (volunteer development) saw language as significant when trying to explain what services were available to families, using social work as an example:

> If you're saying social work to somebody [...] You've, also, sometimes got to explain what the social work does [...] What's maybe similar in the country you've come from, but not quite the same [...] not just the words and not just the intent behind them [...] The words bring a lot of baggage with them.

In this, identification and navigation were related; a need can become a candidacy when one learns that there might be a service to meet it. For Abigail (parent, asylum applicant) the language issue operated differently. She described issues in navigation when she moved house, offered minimal support by her housing officer *because* she could speak English fluently:

> Abigail: I didn't know where the shops were. They just told me that 'oh, the shops they were just that way.' I didn't know where to go or where to start.

> Calum: So there was this expectation that you could be totally self-reliant from the beginning.

> Abigail: uh huh, or probably just like 'oh, she will know her way because she can just ask people' [...] What I realised is if you can speak English, people they tend to think that you know everything [...] they shouldn't just assume that you know everything and just let you struggle.

Cultural capital and social capitals were connected in discussions of where and how people obtained knowledge of services. Most often, information came through connections with others in similar circumstances. Philip (parent, NRPF), who above described not knowing what to do when his family's status changed, described meeting a stranger at a foodbank:

> One day we went to the food bank. We heard one guy, he said, he said 'here, have one [organisation] [...] maybe there can help you, your problem.'

Eva (14, asylum applicant) spoke of how family friends helped her family learn "how things run here" (Eva, 14, asylum applicant). Her mother Maria said her main advice for new arrivals was to build these knowledge-networks, describing herself as part of a "healthy chain (of) good deeds":

> Find people to create like a network of friends and acquaintances and to be active, communicate with them and you will get information that you need and obviously you will share information that you have [...] If I know some women and I have a phone and haven't talked to in quite a long time I will call and I will raise the problem if there is such or ask questions. (Maria, parent, asylum applicant)

In turn, she could become a "little island" for people struggling in turbulent waters. These narratives again showed the limitations of simple bonding/bridging capital distinctions. Eva drew a college she attended for summer activities, explaining that she learned about it through family friends who have similar immigration circumstances but are from a different cultural background:

Figure 15: The college Eva (14) attended for summer courses and activities

> We knew about it from our friends, they are Kurdish and they came to UK approximately the same time. (Eva, 14, asylum applicant)

When discussing the support she received from the groups she attends, Jane similarly described receiving information from "different people who have the same experience":

> Then they can even tell you some opportunities like 'this organisation is doing this course, you can go there for this 2 week course or 1 day programme' like that so, they tell us opportunities too. (Jane, asylum applicant)

Navigating relations of sameness and difference, of unity or diversity in experience and background, meant knowledge and cultural capitals were closely connected to social relationships.

Challenges in knowledge

Many participants described knowledge as the most fundamental part of candidacy. Harry's (parent, NRPF) main advice was for families to develop "complete knowledge of the system [...] if [people] don't know what their rights are, they can't get them." He connected this to navigation, but also to self-advocacy, resistance and persistence. In addition, practitioners described how candidates might develop confidence or self-esteem – emotional components of habitus - through knowledge and information,

rendering services more permeable. While knowledge was important, the evidence suggested it was not a panacea and a focus purely on the knowledge-deficits of family members ignores the differential distribution of information, knowledge and cultural capital connected to migration circumstances (Piacentini et al 2019). This risked viewing families as passive recipients and instrumental users of knowledge who, armed with sufficient cultural capital, would experience no issues.

Most central here is the sense that rights and entitlements around migration were complex, incoherent and often opaque, to the point where families could not reasonably be expected to know them. Harris (community development) reflected on NRPF provisions, arguing that for most families…

> …You're not gonna know 'oh Scotland's social security system's good because like that law covers me' [...] You're not gonna know the intricate benefits of what policy can do for you.

A complex relationship exists between policy and law in the abstract and their enactment at the practice level, making knowledge of entitlements an area of uncertainty and ambiguity. There is a difference in knowing information in the abstract and knowing the range of possibilities in a situation and how to approach or handle them. Jan (parent, asylum applicant) knew the dispersal rules for asylum accommodation, letting them guide decisions around Eva's education, but did not know that those regulations are rarely adhered to:

> Jan and interpreter back and forth. Interpreter: I just clarified because he said - they were told that they will live in that place 28 days and, but that didn't happen. It happens that they lived there for several months [...] They thought 'so if 28 days we would better not put the girl to school, we will wait until we change.'

Peter (community development) reflected on challenges in supporting those granted refugee status as they move to mainstream housing and welfare systems where much is simply unknown:

> All I can say to them which is 'you're going to be moving, you will definitely be leaving that house, but I can't tell you where you're going to go, and you're going to have to go to this homeless centre.'

While information about rights, entitlements and the "social infrastructure" (Frank) was important, a lack of clarity around entitlements, around what shape a service engagement might take or what the outcome might be could be significant barriers, particularly in concert with emotional capital dynamics where disorientation, fears and

anxieties might inhibit the development of confidence in one's knowledge or the ability to capitalise it.

Power and gendered dynamics

A further challenge in identification and navigation related to power dynamics within households, groups or communities. Peter (community development) expressed caution about reliance on social networks for information or advice, describing a nearby religious community:

> As a community they probably support each other very well but you do hear as well of like rumours or misinformation that goes about in these communities about what people are allowed not to do and it can get people into bother as well.

Several participants spoke of gendered issues here, in how community or family relationships could limit candidacies for important services. These were visible in Chapter 4, where caregiving duties and household power dynamics prevented some women from accessing groups, classes or volunteering by caregiving duties, leading to isolation. Harris (community development) talked more about Olga and Daniel (parents) and their son Leo, 5 years old and with developmental disabilities. Leo was exhibiting some worrying behaviours and Harris described how Olga was getting "no support." Daniel ruled out a social work referral:

> As soon as you mention social services it's like 'whoa whoa whoa whoa' […] So there must be some sort of perception that that's a big body that's not OK, but [charities] were OK. (Harris, community development)

Gender dynamics, anxieties about authority and social and cultural resources combined to suppress identification and navigation for Olga. Many participants in this research were women parenting alone, and practitioners often spoke of households headed by women, or where women had to balance household roles and candidacies. Toni identified a level of "emotional abuse" where women take on candidacy processes on top of other emotional labours:

> That feeling, that responsibility that you are the woman, you should do it. Then that feeling that 'I've come this far, I don't want to fail (….) whatever it will take I've got to survive this, I'm not going back.' So in a way you find the women especially, they're stretched mentally, and beneath that she still wants to be the mother of her children, she still wants to play that dutiful wife, she still wants to apply her skills. (Toni, advocacy)

In other circumstances, Toni saw examples where services are focused on women in ways that did not cohere with familial power dynamics:

> Maybe culturally the woman is not meant to speak, but in this case the woman is speaking, the husband finds it a bit absurd, you're the one speaking for the family when I should be the one speaking on behalf of the family [...] the woman has access to more resources, more help, her status is regularised with the children first [...] The woman realised she's got so many resources in her fingertips, the man wasn't as relevant as he should have been.

Any approach to candidacy must account for these intersecting aspects of social position, where status interacts with social and cultural capital dynamics within families and communities.

Practicalities of navigation

Childcare

This chapter now turns to practicalities of navigation, beginning with childcare. As outlined above, caregiving responsibilities had impacts on candidacy, and childcare was significant in two ways. Firstly, it was a candidacy of its own; a source of respite and a means to protect emotional resources. Many of the parents here were lone parents of young children, and pressure towards isolation could restrict the availability of informal childcare:

> Being single in a country that you've got limited support and you try to do it on your own, bringing up two plus children and that can be very tiring [...] So they don't have the networks there if they're on their own. (Dee, family support)

Secondly, childcare was essential to navigation and ongoing engagement with services. Abigail (parent, asylum applicant) discussed this extensively, explaining that she wanted to volunteer or attend college but "I don't have anyone to look after [Ibrahim] so I can't. I can't do anything." She connected challenges here to issues in accessing nursery entitlements (see chapter 6), and to isolation as social capitals had been part of her previous bricolage practices. Abigail had left behind a network of friends when she moved:

> I know people there and then I can say that 'oh can you just keep Ibrahim for me? I have a hospital appointment.'

Without childcare, she was almost denied medical treatment because Ibrahim went to an appointment with her:

> They said no, because the child was there they're not going to do what they're supposed to do. I'm like 'but I don't have anyone to babysit him and I'm in agony.'

By contrast, when I first visited Jane (asylum applicant) she was looking after a friend's son so they could attend an appointment, part of her networks of mutual care and support.

Many practitioners described the importance of providing childcare to support access and engagement, although other issues emerged. Toni (advocacy) described challenges for children with complex or additional support needs, where informal childcare may be less appropriate. Donna (family support) described filling out creche forms and finding out that parents had no emergency contacts:

> They'll say they don't know anybody [...] That's just something that comes up all the time, that they don't have anybody which is a shame.

Some childcare narratives built a picture of an informal economy of negatively-advantaged social capitals emerging through relationships of mutual support. Christine (family support) worked with Edith, a lone parent with NRPF who regularly works 50-hour weeks:

> She pays her friends who are asylum seekers to watch her children, her child, because it's cheaper than childcare [...] They're friends that she knows very well, they're sort of making some sort of community arrangement but there's then again migrant workers illegally trying to earn because they're so stuck they're kind of helping out between one another.

In childcare, social, emotional, and economic capitals influenced whether and how a parent could access services; conversely, services were often the routes to accessing the networks of care and support required to build relationships of trust, care and mutuality that could provide informal childcare support.

Economic capitals and costs of access

Poverty was a further influence on navigation because of direct and indirect costs of service access. Harris (community development) described how poverty meant that families were "exempt from participating in, in life", and she and others connected financial resources to services providing activities or leisure opportunities, determining…

> [...] what you can do at the weekend, what you can do during the school holidays. What you do over Christmas, what you do over Eid [...] A lot of that is informed by money, isn't it? Like, it's informed by the, by having the ability to provide either

> experiences for your children or to make it, to - even if it's a free event you need the fucking bus fare.

Parents and practitioners described how children "don't get many opportunities" (Donna, family support) because of financial issues. Philip (parent, NRPF) described how being unable to join a football club meant Kieran was cut off from sites of cultural and social capital:

> Kieran was very upset [...] that time, the particular time we cannot go to the, together we cannot join to that, yeah? Join to the football and everything. He said I need the - I think he's looking, he's, he's on same level as boys in this country [...] He's comparing to other boys.

Harry and Nina (parents, NRPF) spoke of how "everything is restricted" (Harry) in terms of leisure access for their children, part of the guilt they felt about denying their children's wants and needs.

This was not an area where children specifically described feeling restricted by poverty. In contrast to his parents' saying they could not afford to pay for him to go swimming, Ricky (11, NRPF) drew swimming as an something he does "often" as he spoke about it in the present tense. Kieran did not mention the 'upset' his father ascribed to him with reference to football. Huseyn was the only child who talked about being unable to participate in activities. He drew chess and football:

> Calum: Do you play a lot of football?

> Huseyn: No, at home I used to [...]

> [...] Calum: Is there a reason you don't play much football in Scotland?

> Huseyn: Yes because I don't go. (Huseyn, 7, refugee status)
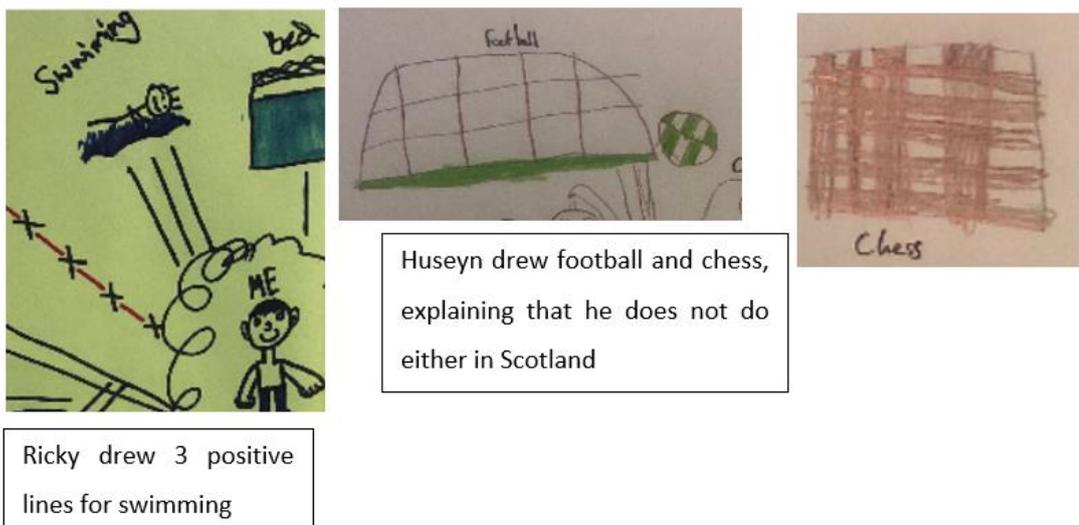
Figure 16: Various activities drawn by Ricky (11) and Huseyn (7)

Rather than describing what was absent, most children drew what they did do. Leisure activities typically included free community resources run by religious groups or community centres, extracurricular activities at school, or play in public spaces. The image was still one of activities limited by economic and spatial capital deficits:
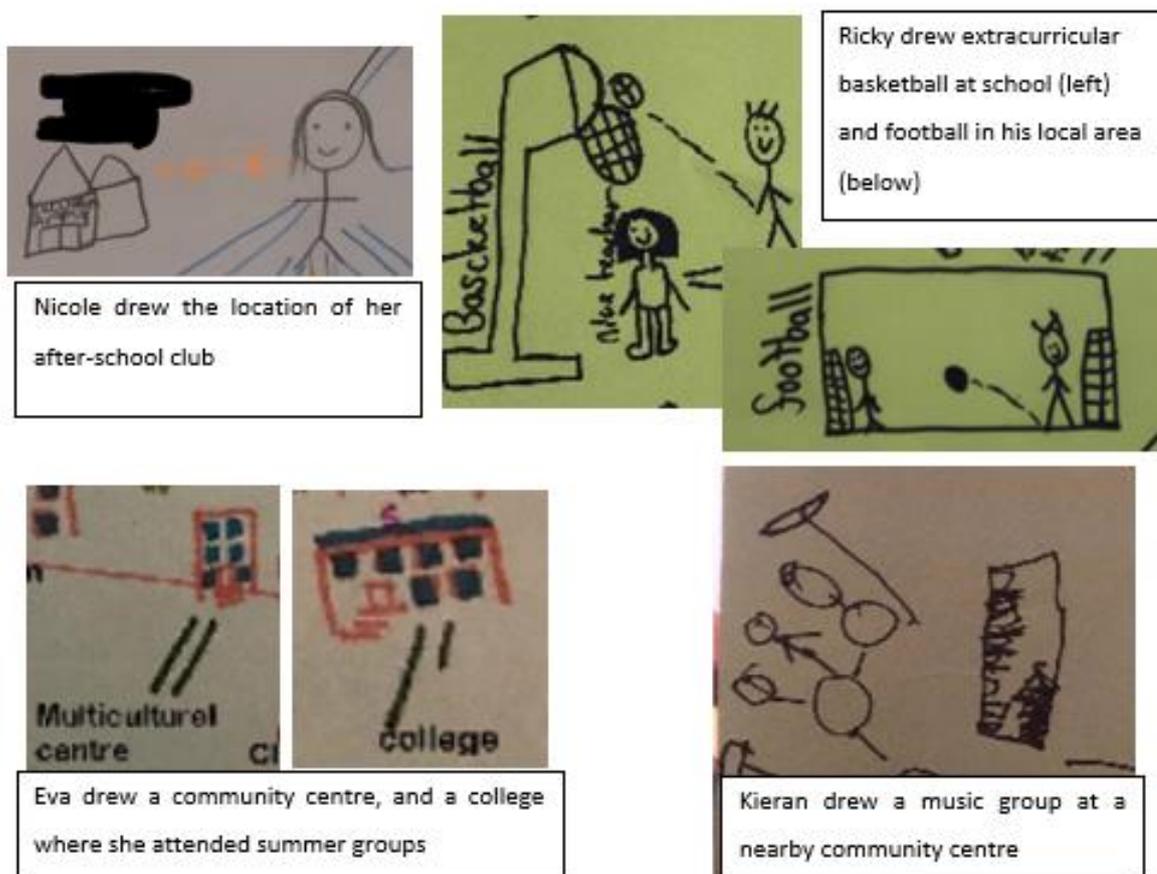
Figure 17: Leisure activities drawn by children.

Parents similarly described community events or activities that were free and local:

> [Refugee organisation is] very close here, I used to go there too once in a while. They, during the holiday at times they do programmes for children so we attend. (Jane, parent, asylum applicant)
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> -
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> [We] just go for a walk to [a nearby shopping centre]. There's a play area there, and then we had a wee play and then that's it, and then we come back. Sometimes we go to the park [...] we just go there or we just go to the shops there. There is a pet shop, we go and see the rabbit [...] just to make him happy and just get him out. (Abigail, parent, asylum applicant)

These narratives appear to echo wider literature exploring how children's activities are limited by direct and indirect costs of access (see Wager et al 2010; Forbes and Sime 2016; Seaman et al 2006).

Transportation and mobilities

Travel costs featured across as range of other candidacies where in-person engagements were required. Limited financial resources could not easily be converted into mobility capitals, and parents, children and third sector practitioners all spoke of costs as a major factor in immobility. Anna (parent, NRPF) explained that "wherever we want to travel there was no sufficient money to go" while for Abigail described buses as "really expensive", particularly when factoring in other living costs:

> If you want to do a wee trip you are better off buying like the whole day travel which is £4.70. You go for weekly and it's quite expensive. The money you're getting, if you just take that - and a child, whatever the child is eating is just not enough. It's like, the money is kind of too small. (Abigail, asylum applicant)

Children did not often discuss transport, but when I asked Huseyn (7, refugee status) about the hardest part of moving to the UK, he talked about walking long distances to services:

> In the beginning we had to walk a lot on foot. Now we have a car so it's easier [...] we don't have to walk so far.

Figure 18: Huseyn (7) drew a car with several strong, positive lines as he no longer had to walk.
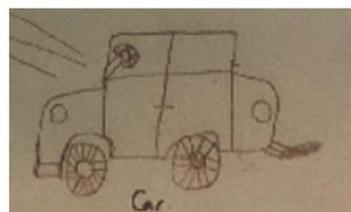
Huseyn drew a car on his map, something the family were able to buy after being granted refugee status, and he

expressed excitement in describing how this would open up possibilities for travel.

Practitioners described parents struggling to engage with services because financial issues restricted their mobility:

> If it doesn't cover travel expenses, 9 times out of 10 someone's not gonna go, especially if they're on Section 4, they're not going to get there. And if they have children that they have to pick up from school, they can't walk for 4 hours then as soon as they get there have to walk back. (Kate, migrant support).

As Amy (family support) argues, the inability to travel is "just encouraging isolation", restricting the ability to access services and their social capital benefits.

These issues covered services of all types. In health, Jane (parent, asylum applicant) felt she would struggle to travel to her GP if urgently required while Jenny (parent, asylum applicant) had recently been accepted by a tertiary mental health service:

> That's really important to me right now. But I don't even know how will I be going there for counselling because I have to take two buses [...] It's a long way, and travel costs as well.

I found feelings of frustration and powerlessness among parents and practitioners who explained that it was very difficult to get support with transport. Jane (asylum applicant) felt that this was the biggest gap in service provision, and she described going "round round round round" services unsuccessfully trying to find travel help. Immobility placed some services beyond her family's reach

> [Area] is far from me. They do a lot of activities, almost every day for children but it's far. That's why I don't take them there. They do singing, they do drama, they do art, a lot, but it's far away so.

Mobility also required other resources, including cultural and emotional capitals – knowledge of which bus to take, where to get off, how to get home again, confidence to travel through unfamiliar, anxiety-inducing spaces. Practicalities of leaving the house could be a barrier, particularly in inappropriate accommodation or where parents lacked the things they needed to be mobile. Ariel described working with Farida, a lone parent in the asylum system, who lived in a top-floor flat:

> She couldn't get up and down with her pram [...] She found it really difficult, because she would need to walk, I think she lived in [a more distant area]. So it is a quite a lot, with two wee ones, on a, you know, with a baby carrier [...] walking, like, for half an hour, 40 minutes, with a baby and a toddler. (Ariel, family support)

Indeed, sourcing prams was a common activity for practitioners, a crucial part of opening out spatial horizons for parents.

These issues meant that distance became a barrier because mobility had costs in terms of time, money and emotional energy with no guarantee of access or a positive outcome. While not wanting to reduce this merely to a cost-benefit equation, I did feel a sense that practicalities were connected to parents' sense of whether navigation would be worth investing their limited resources:

> Even though when I'm going to groups I have to pay £2 for [Yasmin], but it's still worth it because I can be able to chat with some mums there. And going to [family support service] was the best thing that could have happened to all of my family. (Jenny, parent, asylum applicant)

Given the significant challenges in presentation and adjudication described in subsequent chapters, travel might simply result in refusals, discrimination or outright hostility, influencing future cost-benefit considerations.

Some services addressed these practicalities in their design. Ariel (family support) explained that her service operated a bus to bring participants which "kind of helps relieve that stress", and Donna (family support) described her own organisation:

> Crèche and transport […] helps to support the women get to the buildings that they're not sure of where they are because they've never been before because they're quite isolated and just new maybe to the area.

Other practitioners described using their own cars to bring people to their services or to take them to others. Pauline's (family support) example shows the multiple practical issues in navigation for a parent who was "really keen to attend like classes for her English but again there was kind of huge kind of practicality issues":

> I would pick up her child from nursery and then bring her to the college and then pick up her and then take them back home, you know [...] She obviously was a single woman on her own with two young children, you know, and I just thought the difference of being able to access English classes was massive.

Through these actions, "provider-advocacy" became a practical issue; Pauline provided a service, but also support to navigate other services (Chase et al 2017, p. 59).

Hypermobility, transportation and service continuity

Transport and travel were particularly crucial when hypermobility meant movement from spaces of established support networks and services. This was most visible when

sudden moves placed families a significant distance from school - relevant for every family I spoke to, in every migration circumstance, and identified by practitioners as a frequent issue. Kate spoke in general, and Christine about a specific family:

> When they move to their dispersal accommodation and they can't get their kid to school anymore and they have to walk to school or to spend a massive chunk of their support on bus passes [...] It just adds so much strain on trying to then feed the rest of their family. (Kate, migrant support)
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> -
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> They've moved name away, and she was saying 'I might just bring him back to school here because I like it.' And I said 'that will be a bus and a tube every day, you can't afford that, that's too much money.' (Christine, family support)

Schools and nurseries were central to children's social and cultural capital development, and children themselves described feeling comfortable, settled, secure, wanting to maintain continuity:

> Just because I've made good friends now there and I've, I know, like, all the teachers and then I know my way about. (Ricky, 11, NRPF)

Eva (14, asylum applicant) chose not to change school after moving house, preferring the long journey to having to start afresh because of a growing sense of comfort and because she would have to move later:

It will be 2 lines and a cross because in the morning I don't want to go there, I just want to sleep." (Eva, 14, asylum applicant)

Figure 19: Eva's mixed feelings about school

> I also don't want to change to the closer school because I already know quite a lot of people there and all the teachers know and if I have to change then I'll need to do all of that from the beginning.

She drew mixed feelings around school in her map, explaining that in the mornings she just wanted to sleep, and that her journey prevented access to after-school activities. These costs were worthwhile for the sake of continuity. Eva's parents appeared to agree:

> Maria: We are waiting for the reply from the Home Office [...] so we still might have two choices to change the place of living, so we do not want to take the girl from that school and to put in two different schools.

Jan: And we think that moving, moving the girl from one school to another, it might have an impact on her studies so that's why we want her to stay in in one school. (Jan and Maria, asylum applicants)

These examples showed how family members resisted the pressures of mobility and tried to retain control over schooling, even if this meant significant costs. Anna and Philip refused an accommodation offer in another city with no clear alternative specifically to avoid disrupting Kieran's education, such was its importance.

In most cases, money for bus travel was the only way to meet maintain this continuity. For Jenny and for Jane these were worthwhile:

I was buying a 10-week ticket for £100-and something [...] That's like a lot of my budget because I don't have any money. Because of that I do struggle [...] I just have to squeeze it in my budget. Sometimes we have to lose other things but [Lisa] have to get to the nursery. (Jenny, parent, asylum applicant)

-

I have to pay bus pass for both of them [...] It's a lot, all the money we take, it's going for the bus pass. (Jane, asylum applicant)

Bricolage practices supported this; by using foodbanks and free food resources, limiting expenditure and using services to meet needs, money could be reserved for travel. Even limited financial resources could be capitalised, converted into mobility capital and to the social and cultural capital benefits of education. Networks could be beneficial too. Harry and Nina (parents, NRPF) received a car as a gift from friends, ensuring Ricky and Mia could stay at their schools. Choice, control and resistance were again central:

The housing lady and she said 'oh there are so many schools in [the new area] as well, why can't you move your daughter's school from [the old area] to [the new area].' I said 'you don't need to advise me when my children going to school [...] it's my decision.' (Nina, parent, NRPF)

Their social relationships became social capitals, educational continuity and its benefits maintained. Interestingly, Mia was the only child in this project who chose to move school, forwarding and progressing a candidacy for a different educational experience – "I decided that I'd try the school and maybe I would like it anyway, so it turns out I didn't like it, but yes." (Mia, 13, NRPF). Choice and control were the arbiters, and the car was part of the bricolage practice that made this possible.

Permeability issues

A further site of challenge lay in how a candidate might engage a service – whether in-person, by phone or online; whether appointment-only or via drop-in; and whether services had broad or narrow areas of support. Several parents spoke of services where they could drop-in, whose boundaries of eligibility were broad and inclusive. Alan and Layla (parents, refugee status) described some important services who provided material support, information, and advice on a range of issues:

> Alan and Layla speak, then interpreter: they were always open, if we had any questions we could just go.

This reduced the need to make appointments, to plan childcare around a pre-determined time, or to navigate multiple services where one might support several candidacies. Consequently, some participants felt that third sector services were more permeable:

> I think the third sector is more open [...] it's easier to access it than the third, than the statutory agency […] Third sector is, like, open door, drop in. I don't see many statutory agencies doing drop in. It's got to be an appointment or it's got to be a phone. (Hope, migrant support)

While these services appeared to require fewer resources to access, some felt this was a "presumption" (Pauline, family support) that missed critical engagement in how to make services more accessible and responsive to migrant families' candidacies. This is visible in the emotional capital dynamics above where apprehensions and fears around services impacted upon permeability.

Some services depended less on in-person engagement and more on remote contact. Having to phone a service or access an online system created a resource requirement that was difficult for families to overcome. Poverty made it hard to own and consistently top-up a smartphone, and an internet connection was both expensive and against asylum support regulations. Kate (migrant support) saw internet and phone access as "something we take for granted" and Amal (advocacy) described a "gap between the candidate, OK, and the services", reflecting on her own practice:

> I had a severe case once, I was saying to the guy, 'well it's something, it's very easy, why are you, even with your iPhone you can do it, or any of your phones can do it, a smartphone.' And he said, 'well I don't have a smartphone' […] That's my stereotyping, I was thinking that everyone has a smartphone.

Some phone-based support could be beneficial – particularly with named, responsive workers that parents could reach directly. Abigail would text her caseworker for help getting material items and for "moral support":

> Whenever I'm just like down with something, wanting someone to talk to, I can just pick up the phone or send a text and my caseworker will be on it, just try to help me, calm me down. (Abigail, parent, asylum applicant)

This was not a universal experience. Dee described another migrant support organisation with "caseworkers who (families) can't get in touch with," putting this down to high demand and "limited resources", and some parents described frustrations with being unable to contact or get hold of service providers. Being put on hold for hours, calls and messages being ignored, or being put through automated systems were also areas of frustration and impermeability.

Jenny (parent, asylum applicant) described a broad range of porosity issues in her discussion of the city's asylum support provider. She explained the process of getting utility top-ups. Previously she could contact an allocated housing officer who would bring her vouchers, but the process changed to a centralised phone line and a collection system:

> I will call that call centre, it will take me like 2 hours, they won't pick. And sometimes the phone will cut off, I have to call again. After getting them, they will say 'we will contact your accommodation provider.' Thinking that somebody is coming with vouchers for me. But all of a sudden I may have a call from them like 'you have to go to [the office]' [...] Nobody gives me fare to go there. I have two children, I have to take two buses. (Jenny, parent, asylum applicant)

Crucially, none of these examples or dynamics can be considered in isolation, as families were typically engaged with multiple services across a range of candidacy fields, each with its own resource requirements for navigation and permeability. "Provider-advocacy" (Chase et al 2017, p. 59) and practitioner bricolage (Pemberton and Doos 2017) became central hwere and are the focus for the final section in this chapter.

Provider-advocacy and practitioner bricolage

Both parents and practitioners suggested there were benefits to services that could respond to a range of needs and candidacies, whether directly or as proxies for candidacies in other spaces. Practitioner bricolage (Pemberton and Doos 2017) refers to the assemblage of diverse resources by practitioners in support of parents' candidacies. When practitioners described themselves as "holistic", this is what they

seemed to mean – acting as a central hub for several candidacies through referral or signposting, acting as "middle-men" in wider candidacy processes (Ariel, family support).

Parents often described how a single, well-placed and knowledgeable person or organisation could support identification, navigation and even presentation. Alan (refugee status) described two services he often approached:

> [One] helped us with the food banks and when we had various questions they would help us too [...] [The other was] mostly day to day questions or advice or where we needed questions answered like activities for children, clubs, where to go, where to find things.

These practices were important for parents struggling to orient to new circumstances of environments. Abigail and Jenny (asylum applicants) described their health visitors as crucial supports in this regard. Both women arrived in Glasgow from other cities with no connections and described being disoriented, isolated and struggling. Health visitors facilitated support around a range of issues:

> [The health visitor] sent me a family support worker who was taking me around and - you know, point me to normal places where I can go and take my son to play in playgroups [...] Just for a little while until I know my surroundings and then, you know, just get to know a lot of places. (Abigail, parent, asylum applicant)
>
> -
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> I was so isolated and down until the health visitor came and introduced me to certain services to be going to - baby groups. (Jenny, parent, asylum applicant)

Practitioners described their work in similar terms. Hope (migrant support) spoke about a "holistic" assessment her organisation carried out, covering physical and mental health, financial circumstances and other additional needs:

> We will then help them to apply for the long-term accommodation and link them with lawyers, education, social services if there are any risks, any other third sector organisation dealing with, like, domestic violence, torture, health team.

Material candidacies were the most-cited space of practitioner bricolage as practitioners described building networks and connections to meet these needs. Peter (community development) described "having to beg, borrow or steal" prams, nappies, milk, clothing and other items, and others described similar work:

> We have to link up with other agencies to provide. So sometimes they arrived
> with nothing, so we have to try and source that. (Hope, migrant support)
>
> -
>
> We were resourceful in getting [Farida] baby things, and clothes for herself,
> clothes for her wee one, and it's good that we can tap into other projects. (Ariel,
> family support)

Practitioners described well-worn paths or routes of referral covering a range of needs, or of charting new courses by networking and collaborating with other services, spinning threads or traces into paths of mutual benefit. They could learn of other resources, or could tell other practitioners about their work:

> I spoke to a lady [...] I think she was like a support worker for the health visiting
> team and she was in contact. I've ended up having a good relationship with her
> and now she's got her colleagues involved. I was in the health centre having a
> chat and telling more health visitors about it as well and they're like 'that's great,
> we didn't know.' (Donna, family support)

As with reliance on informal networks and social capitals, practitioner bricolage and provider-advocacy occurred in circumstances of inadequate mainstream provisions. There was a sense that third sector services played a role in the bricolage practices of the public sector, a means for them to abdicate responsibility for meeting needs. Hope's migrant support organisation had a narrow, remit but would often see migrant or minority ethnic parents sent to them by schools because "they're not white [...] they don't speak English or they're probably not citizens." Others spoke of social work departments providing food bank vouchers instead of direct support to families with NRPF (Pauline, family support). Harry (parent, NRPF) described how reliance on charities for material support occurred because of inadequate local authority responses:

> That was the responsibility of the social worker to provide us with that, at least
> the basics like. So they just directed us towards the various charities.

These issues connect to issues of presentation and adjudication in these service environments, the focus of Chapter 6.

Summary and conclusion

Chapter 5 connected capital processes to identification, navigation and permeability, finding that the uneven distribution of emotional, social, economic and mobility capitals due to immigration status inhibited families' ability to identify as candidates, to navigate

to services, and to make services permeable. Eligibility was only one part of the candidacy picture, with the connection between status, poverty, isolation (im)mobility, fear, anxiety and disorientation all central to the causal picture. Other dynamics, including power dynamics within communities and households, are also central to understanding these aspects of candidacy. Provider-advocacy became a central part of the candidacy process, extending from identification and navigation towards aspects of presentation. Presentational aspects of permeability feature in the next chapter, alongside dynamics of adjudication, offer and resistance.

Chapter 6: Presentation, adjudication, offers and resistance

This chapter explores what happened once candidates attempted to access or engage with services. It provides several cross-cutting themes and examples from multiple service strands to evidence the range of challenges that family members faced around presentation, adjudication, offers and resistance. Presentation refers to assertion of candidacy as legitimate, requiring resources to overcome porosity issues and to present "credibly" (Dixon-Woods et al 2005, p. 110). Through adjudication, candidacy is appraised according to alignment between the candidate and services' categorisations, heuristics and judgements. Adjudications result in offers that candidates can accept, refuse or resist.

The themes in this chapter combine the structural, the institutional and the interpersonal. It begins by outlining several themes – problematic presentational encounters, inadequate assessments of need, and the significance of persistence and provider-advocacy. Framing these as issues of recognition, the chapter explores how service-side capital dynamics, particularly around financial, emotional and cultural capitals – contribute to problematic encounters and to misrecognition. It then provides several service examples in health, education and social care to illustrate these themes.

Communicative encounters: a language problem?

Many participants focused on specific interpersonal dynamics in presentation and negotiation with services. Language was central, but must be understood as more than a deficit in candidates, incorporating service-side and contextual elements (Piacentini et al 2019; Phipps 2017). Most parents and children in this study spoke English either as a first language or fluently as an additional language, so language-related insights were more prevalent among practitioners and a small number of families.

Parents and practitioners identified a tension here between the responsibility of services to facilitate communication and the responsibility of candidates to accrue resources for communication For Jan (parent, asylum applicant), learning English was "the most important thing":

> Jan, in English: That's number one - English, English number one.

> Jan, via interpreter: Not speaking, not knowing language is like hanging in the air. Just imagine this lemon is hanging in the air.

Many practitioners described similar feelings. Peter (community development) believed that English was essential for parents "in order to progress successfully or comfortably"

in society, with a specific focus on supporting children and addressing dissonant acculturation:

> We had someone saying that 'I come to as many classes as I can because my child is forgetting our native language and is speaking almost exclusively in English whereas my English is very poor and I'm struggling to understand my child and help my child.'

Toni (advocacy) incorporated English into a wider causal complex of cultural and emotional capitals in presentation: "Language barrier. Not knowing the right place to go. Confidence" were all barriers to presentation. She argued that migrant families should learn to "think in the right direction", aligning with service expectations:

> It's about understanding their rights, and understanding their responsibility, so to meet the system [...] to make them to understand that, that if you want to be part of the society, you have a responsibility. (Toni, advocacy)

Other participants focused on how services approached language and communication, particularly through interpreting. Several parents described interpreting as a welcome, widely available feature of many services – "interpreters are offered everywhere" (Alan, parent, refugee status):

> Jan, Maria, then interpreter speak. Interpreter: I just clarified whether they are given interpreters [at the migrant support organisation], they said yes, at least on the phone the interpreter is there so it makes it easier to, to express wishes or to explain what they need. (Jan and Maria, parents, asylum applicants)

The absence of interpreting at presentation was a barrier to engagement and contributed to feelings of exclusion or discrimination. A range of localised factors appeared to influence whether interpreters were present - some languages lacked interpreters; interpreters might not turn up to appointments; some interpreting practices were problematic, worsening rather than improving communication; and sometimes the immediacy of presentations or services' limited financial resources meant interpreting could not be provided. It is also telling that almost all practitioners here were white and monolingual, and few services appeared to have multilingual staff. Amal (advocacy) was an exception; she talked about speaking to service participants in Arabic to allow them to "express their feeling" while colleagues believed this prevented people from developing skills to navigate future service encounter.

Some practitioners here had worked without interpreters, bricolaging communication from whatever resources were available. Some spoke about using translation apps or

highlighted non-verbal aspects of communication – "body language or sign language [...] you can still communicate, and they can still be included" (Donna, family support). While families did not talk of children as "brokers of care" (García-Sánchez 2018, p. 168) practitioners did, often framing this as poor practice driven by necessity. Peter (community development) worked with a family transitioning from asylum support to mainstream welfare provisions:

> The nuance of what [Moeen, father] was trying to tell me was getting lost and so it was, he was telling me how he was worried about [Ida, his daughter's] health […] Then he handed the phone to me and it was his daughter and his daughter sounded worried as well, like really worried about you know 'we don't know how we're going to live' and all this sort of thing. I couldn't go 'I'm not going to talk to you' because that would only make them more scared so I talked to the child about it and said 'well look, I've called the housing officer if they don't call back let me know.'

Harris (community development) described how children can become navigators, presenters and negotiators who "end up knowing about the services more than the parents." Employed in a small community organisation with a limited budget, she worked with one child who brokered service engagements for her family:

> I think the mother had [a learning disability] [...] the two kids would be here and the mum would be here, [Lara] did translation for her mum.

Harris expressed concern that brokerage risked exposure to inappropriate or harmful situations. Another child she worked with, Rena, supported domestic violence disclosures for her mother, Marina:

> [Marina] would come and tell me things about the husband, what he was doing, to do with sex, and the wee lassie had to translate that, or she expected the wee lassie to translate that […] I think that as a result, the wee girl has became kind of sexualised at a younger age. (Harris, community development)

Relying solely on practitioners' understandings of these dynamics provides only a partial picture, a consequence of the sample of families in the study. This would warrant further exploration.

Wider communicative dynamics

Other communicative dynamics intersected with language – not least complex circumstances which could be hard to explain. Anna (parent, NRPF) spoke about families that she met through volunteering:

> Because the language barrier, I don't think so they will explain all their situation. Because some of them, most of them they don't speak English very well so they are all, they are also going through situation like mine, very difficult.

She positioned language barriers and complex circumstances alongside the interpersonal orientation of practitioners she met. A visibly unhappy or outwardly hostile orientation inhibited presentation, while a friendly approach was significant – "talk to them nicely first of all [...] A smile, that is very important, you know?" (Anna, NRPF).

Throughout this project, service encounters were framed in terms of communicative orientations – from those rooted in helpful, empathetic and supportive approaches through to outright hostility, threat and discrimination. Family members spoke of the value of practitioners who were helpful, welcoming, friendly, *nice*. Kieran (14, NRPF) drew a doctor who "always greets us nicely", contrasting this with other practitioners in

Figure 20: Kieran (14) drew a doctor who "always greets us nicely."

social care. Similarly, parents described the importance of welcoming, friendly service environments:

> Alan, then Layla, then interpreter: "(The staff) were very friendly, they would always listen, always welcoming, they would listen to us, they wanted to help, we always felt welcome." (Alan and Layla, refugee status)

Being "nice" gains salience because of recognition dynamics – it suggested care and regard, while interpersonal service interactions that lacked warmth or empathy or were marked by outright hostility and discrimination increased the sense that families were other, did not belong, their rights fewer and their wellbeing less important. Family members described this across several service settings, as a general part of service experience:

> Sitting in one place thinking that you don't belong - that alone is just a torture. Because you can see, like we are trying so much to fit in this society so if you - they are pushing us like 'you don't belong' - can you imagine how that makes us feel? We are trying so much, so hard. (Jenny, parent, asylum applicant)

Practitioners similarly identified a widespread feature of service interactions where families became…

> [...] just numbers to people [...] This is what I've witnessed, it's as if they're
> nothing, they're here and they should be thankful for what they've got. (Amy,
> family support)

Other practitioners similarly felt families received a "hard deal [...] from most professions" (Sarah, family support) with a consistency that suggested a systemic or structural problem – as Kate (migrant support) put it, "they (parents) can't all be lying." In recognition terms, this was a matter of "invisibilisation" – a "harmful, disdainful disregard (where) warmth and acceptance…are withheld" (Houston and Montgomery 2017, p. 186). These experiences impacted on the likelihood of further and future presentations. Abigail (parent, asylum applicant) described avoiding some services because "the way they will just look at you", while Sarah spoke of families "treated so badly, they don't know who to trust", impacting on her own ability to build working relationships.

Locating problematic practice

Dixon-Woods et al (2005, p. 152) argue that experiences of discrimination are rarely rooted in the "moral failings" of individual staff members, instead caused by the "repertoire of routine judgements…and the routinely available means of solving these" under local conditions. Experiences of discrimination emerge from…

> "…the more generalised tendency of staff in health care systems to use
> heuristics, typifications and stereotypes to categorise patients, as well as more
> generalised forms of discriminatory attitudes at work in society." (Dixon-Woods
> et al 2005, p. 152)

Mackenzie et al (2013, p. 807) similarly describe how problematic practice is rooted in "implicit mechanisms" resulting from the interplay between institutional contexts, local conditions, structural circumstances and interpersonal dynamics. Some practitioners here did hold individual practitioners responsible:

> Is it a language barrier, is it the language barrier? Or is there personal prejudice
> this person's holding? Which maybe doesn't make the institution racist but they're
> a part of that institution. (Kate, migrant support)

Others believed service staff were not "malicious" (Peter, community development). Instead, capital dynamics within service fields influenced the nature of practice. Limited time and high caseloads impacted on practitioners' emotional resources, while the habitus of professional practice – the ways of seeing and knowing that produced patterns, heuristics and typifications – were a poor fit for migrant families whose

candidacies did not cohere with the "ideal user" (Dixon-Woods et al 2005, p. 53). Sarah (family support) described the combined effect as a "hassle factor":

> In the back of their mind they're like, 'oh, they just take up so much time' [...] I think it's about the volume of work. And also, the complexity of the issues. So, you know, as a health visitor, as a social worker, as a teacher, whatever, you know, you're trained, probably in the main, to work with [...] people that are here in this country, not people that are coming in.

Similarly, Amy (family support) argued that "everything seems to be geared around 'our own people' [...] it is a lot of extra work" to support migrant families. These dynamics influenced interpersonal orientations and adjudication processes; the "hassle factor"; alongside poor alignment between needs and the systems for understanding them, within local conditions of limited resources produced problematic practices. Hope focused on financial resources here:

> The budget is really, really making agencies to forget about their responsibilities [...] sometimes they have to make decisions on the basis of the money that they have. (Hope, migrant support)

Issues of alignment and service capital dynamics sit at the heart of the misrecognition that parents and children experienced. Rather than focusing solely on individual intent, analysis of service responses here explores whether they upheld and colluded with conditions of nonbeing through misrecognition, or whether they contributed to recognition and resistance.

Adjudication and unseen needs

Interpersonal dynamics were closely connected to instrumental aspects of candidacy – how candidacies were appraised and offers made. Some needs and circumstances fell outside standard frames of understanding and practitioners often spoke of migrant children's needs going unseen. Practitioners expressed concerns that only externalised, socially problematic, disruptive impacts were likely to be receive a response. Children might be "missed" where "nothing is glaring [...] in terms of their behaviours":

> You might have a child sitting there smiling, you know, you know and kind of, you know, outward, on the surface might look fine but that - underneath that, you know, could be some, you know really, really difficult stuff going on [...] Children that have experienced trauma and the impact of that has led to them just being kind of quite withdrawn, quite impassive. (Pauline, family support)

Pauline reflected on ideas of "resilience" here; a child might appear to be coping but "you know underneath that there will, there is a need." Understanding resilience as an individual asset evident in a lack of externalised behaviours was inadequate – a shallow perspective ignoring variations in when and how need manifests, children's agency in whether, when and how they might present, and the contextual aspects of resilience (Ungar 2018). As outlined in chapter 4, several parents spoke of perceived impacts on their children, while few children spoke in these terms and appeared superficially to be coping with adversities that still needed to be addressed.

Other practitioners described how responses to visible, externalised behaviours were inadequate and failed to account for children's circumstances. Harris (community development) described working with Tom, a boy with "attachment issues" and "behavioural issues":

> The support he was getting in school was being told sit in the corner as a dunce [...] there's no extra level of support to think like, 'alright, OK so that child's experienced trauma so what might that child need?' [...] If kids are just getting dumped and they're seen as kids that can't speak English with behaviour problems, how does GIRFEC adequately protect them?

In these examples, misrecognition occurred through "reification", where people are decontextualised, objectified and viewed apart from the "underlying tapestry of emergent and diverse situated practices" of their lives (Horlick-Jones 2005, p. 258).

Deportability issues were again influential here. Hypermobility often meant moving to new GPs, health visitors, schools, nurseries and support services, inhibiting disclosure, depth of understanding or assessments of change over time. Migrant families might have no records, no legible history that services could use to contextualise their needs. As Hope argued, "it takes time [...] for people to see" needs or problems in a context of corrosion where delays in identification only increase negative wellbeing impacts:

> It's going to take three months, four months down the line for them to intervene […] That's just too late. (Hope, family support)

Harris (community development) also described how needs might be missed or addressed later than those of non-migrant peers:

> So sometimes a kid will be assessed with autism (at) a later stage than would happen if they were born here or might have been identified a little bit earlier.

Movement between services was particularly significant. In chapter 4, Tara described how in her new school she did not talk as much, which impacted both peer relationships but may also influence teachers' assessments of her learning or wellbeing. For Harris (community development), children appeared to leave and arrive at schools with no warning, little planning and no transitional support for teachers:

> There's no communication with those schools about incoming children [...] [The head teacher] was like 'what the fuck's happening? I've got no kind of clue what's going on here. Why have I got kids coming in here and then they're being pulled back out?' [...] It's hard for a policy like GIRFEC or like raising the attainment gap or any of these things that are going on in schools, for that to be fully felt if a child is continually either moving, is moving school or the teachers don't know about the kids.

Structural aspects of nonbeing coupled local conditions to inhibit the presentation or adjudication of need.

Refusal, persistence and provider-advocacy

A further theme was the frequency with which first presentations were unsuccessful and persistence was required to present repeatedly or to resist problematic adjudications and misrecognition. For Harry (parent, NRPF), this occurred across services – "the first question, they will try to get rid of you." Persistence was perhaps the central arbiter of securing access or favourable adjudications, more so than entitlement or the existence and assessment of need. Jane (parent, asylum applicant) described being refused asylum support on first presentation, a situation only resolved through the work of a provider-advocate. Hope (migrant support) identified this as a common experience:

> They say, 'no, we know that you have children but we don't believe that you're destitute', they will tell you that they actually looked at the safeguarding and welfare of the child and then you have to refer them to social services.

Practitioners spoke of the time they spent "chasing stuff up" (Harris) or having to "follow up" with other services "because you can't be totally secure that they're going to be sorted out properly" (Peter, community development) . The need to "constantly be chasing things up [...] affects people's trust in these things, in these institutions" (Kate, migrant support) impacted on future candidacy identifications and cost-benefit analyses..

To persist required extensive resources or the proxy capitals of a provider-advocate. Ariel supported one parent in a family she worked with, Zara, through the resource-intensive process of securing maternity entitlements, navigating multiple candidacies:

> She went into town to ask the employer to fill in a form, and the employer said, they don't need to do anything, she just needs to download the form, and hand it to the DSS (Department for Social Security). So, mum, not knowing anything else, had phoned me, I've since then put that onto [a welfare rights organisation]. [The welfare rights organisation] says, no, they've contacted the DSS, and the employer, to sign the form. I took the parent back into town, heavily pregnant. [Zara's] already been here two weeks ago, and you know, she's obviously travelled in and travelled out, and she's not getting any correct answers. (Ariel, family support)

The emotional capital dynamics that limited navigation were also present in persistence, as Harry and Nina explained:

> Harry: They don't argue because they were worried about their immigration status.
>
> Nina: They don't, they don't fight for their rights […]
>
> Harry: Because they are scared that if you will do something the Home Office may deport us or do something like that. (Harry and Nina, parents, NRPF)

Participants who described challenges in presentation and adjudication often spoke of the importance of accompaniment as a form of provider-advocacy. Accompaniment was associated with reduced feelings of vulnerability, improved interpersonal dynamics and more favourable adjudications. Anna focused on social work services:

> When I go myself with my family, they treat like very badly. If I have somebody with me like organisation [...] they act like a different person, yes. (Anna, parent, NRPF)

Most perspectives on accompaniment came from practitioners. For Amy, her mere passive presence was significant:

> We were walking through Glasgow and a father turned round and said to me 'it's very nice when I come out with you because I get treated differently.' But that's awful, that is awful. (Amy, family support)

Ariel was more of an active advocate when she accompanied Farrah, a parent at risk of eviction, to a housing appointment. She felt like "they were interrogating [Farrah] in front of my eyes":

> She feels like they talk to her as if she's a wee girl [...] When I went, I did get that feeling myself, but I spoke up for the parent, and asked questions, and I think she

got some kind of help. And I think, I remember the mum saying, that was a wee bit different because I felt as if they were actually listening to what I was saying.' (Ariel, family support)

Persistence and resistance against flawed adjudications were made more difficult by capital inequalities, but also because routes of resistance and accountability were closed off, opaque or ineffectual. Yet resistance did occur where families were able to mobilise resources to refuse inadequate service responses and to advocate for candidacies to be adequately addressed.

Specialism, universalism and the ambiguity of knowledge

The final cross-cutting theme relates to the tension between universalism and specialism in policy, service design and everyday practice. Many practitioners were critical of the universalist ambition of GIRFEC, or indeed any suggestion that "one blanket policy" (Harris, community development) or approach to provision could be responsive to migrant candidacies:

> Harris: [GIRFEC] can't protect that child the same way as it can protect a child that's got its two parents and that's from a nice family in Pollok. Like arguably it's different levels of support are needed, so how can one blanket policy support such varying levels? Does that make sense? […]
>
> Calum: I think so. Is it a sense that there are such varying needs that you could never hope to grasp it with a kind of universal approach?
>
> Harris: Aye, yes, yes.
>
> --
>
> I don't see how GIRFEC is helping families who have these multiple barriers to their kids being, kind of, nourished in the way that GIRFEC suggests [...] it's just there isn't resource that will address their difficulties [and] the combination of being poor, of being settled and resettled and unsettled. (Frank, volunteer development)

As argued in Chapter 1, universalist approaches contain implicit ideological assumptions, and "implicit mechanisms" (Mackenzie et al 2013, p807), local conditions of operation and categorisations, heuristics and typifications failed to account for the specific circumstances of migrant children. Practice was not "structurally competent" when it did not recognise or address structural aspects of need, or power dynamics in service encounters (Metzl and Hanson 2014; Mackenzie et al 2019). Through

supportive, welcoming interpersonal interactions; by understanding need in the context of positionality (including status); and by addressing it in service design and everyday practice, some services were more structurally competent than others.

There was a tension among practitioners between universalism and specialism in everyday practice. Some felt that misrecognition could be addressed through a universalist focus on child welfare:

> If you see a need, you would just kind of respond to it [...] because it's about the learning and it's about the safety [as] that bedrock rather than the immigration. (Pauline, family support)

These practitioners felt that services' priority should be to "treat (migrants) as human beings" (Sarah, family support) to resist the dehumanising nature of misrecognition. Harris's response was interesting; she was more resistant than most to separating the needs of migrants and non-migrants, arguing that many structural issues were shared and that focusing on difference contributed to divisions rather than a focus on deeper, shared structural issues:

> Poverty, that's such a barrier to life, do you know what I mean like [...] That's true of not just people in the asylum system but of people who're at the mercy of austerity, people who experience disability. (Harris, community development)

Other practitioners felt the qualitatively different nature of precarious status required a different response oriented to specific needs and circumstances. Ariel (family support) called for "more empathy, more understanding" and described her growing awareness of migration issues:

> [Working here has] given me a different type of understanding of seeing it from their point of view, to be honest, seeing what people are going through, the Home Office stuff. I think, before I joined [this service] I probably wasn't exposed to that as much [...] So I'm kind of dealing with things on a different level, if you know what I mean. (Ariel, family support)

Some practitioners rooted their work in a knowledge- and value-base that connected migrant children's circumstances to perceived universal needs, while others spoke of developing a specialist knowledge base, increasing their understanding of law, policy, trauma or migration. Hope (migrant support) described a need to combine knowledge with a supportive, strengths-based orientation:

> Know the law. The processes. The legislation. What does it say? What is their status? What are they entitled to? Why do they come here? Why are they in that position? Because when they know all that, then it's easier to not be judgemental and not thinking that [...] they're coming to take something from here or they are not capable.

Knowledge had an ambiguous, complex role in practice. As Amy (third sector) argued of services more generally, people who are "educated" still "choose to be ignorant":

> If they don't know they don't need to feel part of it, they don't need to take responsibility for it [...] So is education the right word? I don't know anymore. We've got educated people that are causing the problems.

I reflected here on my own work, of how easy it can be for knowledge to become complacency and to allow practice-by-rote and routine to produce misrecognition, failing to engage meaningfully with candidacies. Knowledge was one resource among many, its role influenced by other capital dynamics under local conditions.

Structurally-competent practice also meant acknowledging and responding to strengths, capacities and contributions in order to resist families' social positioning as dependent, vulnerable, a drain. As outlined in Chapter 4, the immigration system both creates problems and makes them a central aspect of a person's being as it denies other claims to identity. This is visible in Hope's statement above, and in Sarah's (family support) narrative:

> People that they're meeting, didn't know them as they were. So they're, you know, judging them on how they are now [...] it becomes a part of who you are. (Sarah, family support)

Acknowledging strengths and competencies meant working in a non-pathologising way, avoiding reification by locating problems in structural circumstances and recognising the candidate's personhood as more than the sum of their problems (Zurn 2015). There was a sense that the third sector had more freedom to be structurally competent, responsive and adaptive – to "mould our services in a way (that) reacts to the needs of a community" compared to the "rigid" public sector and its established ways of working (Pauline, family support).

Education

Chapters 4 and 5 connected educational candidacies to learning and aspiration, to friendship and belonging, and to feelings of stability and ontological security. Many of

the candidacy dynamics around education (specifically nurseries, schools, and colleges) created problems in access and engagement that in turn contributed to challenges in these areas of wellbeing. This began with issues of permeability and presentation around registration.

Registration issues

Practitioners described school registration as a "real challenge" (Frank, volunteer development) or "not the easiest thing to do" (Peter, community development). For Peter, this lay in the cultural capital dynamics connecting knowledge, local variability a confusing, complex online system:

> You've got to know how to use it in the first place, and then you've got to have a grasp of formal written English and the particular, kind of, language - you know, formal language that you get in forms [...] Different schools having different ways of registering children or not being clear if they have places or not, or if they do they're not able to start and that sort of thing.

Consequently, some children missed out on months of school, particularly when they arrived during the school year, reflecting wider research findings (Gladwell and Chetwynd, 2018). Other practitioners described delays of "potentially months" (Kate, migrant support) or where families "may just have a year where the child did not go to school, because the parent cannot just keep up" with registration requirements (Hope, migrant support).

Provider-advocacy was a central part of resolving this. Eva (14, asylum applicant) talked about an organisation that supported with this:

> [Migrant support organisation] really helped us to register in school because we, we didn't speak any English at all in the beginning and the local school was, there were no places so I don't know, if they wouldn't have helped us maybe I would not have school. Or maybe there would be a delay.

Nursery placements were similarly challenging, with additional interpersonal issues as access relied on in-person presentation. Sarah (family support) described widespread "discrimination towards asylum-seeking families" requiring persistence and advocacy:

> For a white, Scottish family, you know, we'd apply for a place, they'd get a place. Whereas for an asylum-seeking family, we'd apply for a place, we wouldn't hear anything and we'd have to phone up, we'd have to check they'd have the application […] we'd have to put a case forward, and fight, fight, fight.

Parents described their own challenges here. Abigail (parent, asylum applicant) explained that Ibrahim's attendance at nursery was delayed by mobility and registration issues, his place only secured through her health visitor's intervention after a long period of delays:

> We arrived in April but we didn't go through Home Office system 'til May. And then - but still when we moved here it was end of June and I applied for a school and they said they couldn't get a place for him [...] He started in August but that's a different school.

Because Ibrahim attends a private nursery, he received fewer hours across fewer days, limiting the time he spends learning and interacting with peers and preventing Abigail from attending college or volunteering.[7] Jenny (parent, asylum applicant) moved from one city, where her daughter Lisa received nursery hours at 2 years old because of additional needs, to a new city where these needs were not acknowledged:

> They told us for asylum seekers they don't take them until their children are 3 [...] So that alone - that too made me feel marginalised. Being an immigrant who is not settled so they told you you can't have this.

Lisa was almost 3 and able to access her statutory entitlement, but "the nursery that we applied, that nursery didn't take us." Jenny described spending hours walking from nursery to nursery, unable to find a place, contributing to the sense that her children are punished for her decisions:

> I don't know if we are going to get a nursery or not. [...] I will be like 'oh, this is my fault.' (Jenny, parent, asylum applicant)

Registration issues were particularly pertinent in a context of hypermobility, which can cause children to move schools frequently as described in Chapter 5. Hope (migrant support) described the advocacy work required to resolve this for one family:

> It was emails after emails after emails. [If] all these agencies had not pushed, they would have started school maybe three months after everybody has started. Why? It's not okay. It's not.

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[7] Public funding is available for a certain number of hours in council-run nurseries; accessing a private nursery, hourly costs were higher, preventing Ibrahim from accessing the same number of hours.

Parents' educational candidacies could also be impacted by registration issues. Jane (asylum applicant) was refused a college place because the college misunderstood her entitlements – status intersecting with knowledge issues in a context of illegalisation:

> Because my card is showing 'no public funds, no work, no so on and so', that time when I first came, when I went to college to apply they said you cannot go to school because they said you are not entitled [...] For that year I could not go because it was too late before they do everything.

Both Jenny and Jane described how being asked for and judged on their identity documents, or being asked about status and judged on the answer, reinforced the exclusionary dynamics of nonbeing and was something "we encounter on a daily basis" (Jenny, asylum applicant).

Uniform grants and free school meals

Meals and uniform grants were crucial because of the material challenges and eligibility issues outlined in Chapter 4, and were described important by practitioners, by parents and, on one occasion, a child:

> We have lunch here, we didn't have lunch there and it's for money here (Huseyn corrected the interpreter – "no, no." Interpreter - no, it's free here). Until the 4th form, until the fourth year it's free. (Huseyn, 7, refugee status)

In Chapter 4, Harry and Nina explained that their children were ineligible for meals; for those who were eligible, the application process was "very, very stressful" (Amy, family support), "really tough" (Donna, family support) or a "big, big struggle" (Hope, migrant support). In simple terms, it required a completed form with bank details and evidence of eligibility; in reality, there was a multi-stage system of application, follow-up and advocacy because the system did not account for families' circumstances:

> They ask you for a bank account and it's not impossible for asylum seekers to get bank accounts but it is very difficult and so - and depending on who they talk to or if they talk to anybody at all that might be the stage where they stop applying for it because they think they can't get it [..] You need to make phone calls to the right people and they'll explain to you that they can send you a cheque and you can cash the cheque at these two particular banks. (Peter, community development)

Christine (family support) described how cultural capital inequalities met a complex bureaucratic process within a restrictive system of entitlements poorly-understood by

decision-makers. One family's application was refused because it did not contain a National Insurance Number:

> I did explain this on the form, I did explain it in a phone call, that she was an asylum seeker, and she didn't have a National Insurance number. I was then asked to send [an ID number]. I went down to mum's house, 'cause I thought I'll need to get this card, and photocopied it, scanned it in, emailed [...] Then I'm trying to explain through Google translate how to cash a cheque.

Schools were conspicuous in their absence in these situations. Hope believed they outsourced responsibility to the third sector:

> It's supposed to be completed at school. They can book an interpreter. Do it. No. But they just give the form [...] 'You go and find you, you know, somebody to help you.' It's not supposed to be like that. (Hope, migrant support).

Where schools did appear here, it was in using their discretion to support ineligible families. Kieran's primary school did not help, but his secondary school did:

> …they give some uniform [...] maybe the elder, elder boys trouser and jumper and everything [...] sometimes we got the lunchbox, books, everything. Yeah, school was very helping. (Philip, parent, NRPF)
>
> -
>
> The head teacher was so happy, he said no matter your situation we will provide him his lunch every day (…) they also started some, giving some uniform and everything, very supportive. (Anna, parent, NRPF)

Similarly, Ricky's school "gave him £100 to buy new uniform and school supplies" and Mia's "gave her £50 to buy school uniform [...] and a jacket. And they gave them a blazer from school" (Nina, NRPF). These schools were responding to need, not eligibility, showing structural competence and a more recognitive orientation.

Children's ongoing educational engagement

Within the school environment, there appeared to be a range of influences on ongoing engagement related to children's educational candidacies. Teachers mediated educational experiences. Many children described valuing teachers who were helpful, accessible, who answered questions and supported their learning. Nicole described how she liked learning "new stuff" and that this "depends on the teacher" – a good teacher helps when you need them, is funny and approachable (Nicole, 11, asylum applicant). Similarly, Kieran (14, NRPF) described teachers who are "really helpful [...] like, if I'm

stuck [...] they will, like, show me what to do", helping him feel supported in his learning. Mia (13, NRPF) described what makes a good teacher versus a less good teacher:

> Mia: Like, some teachers will just give you notes to copy down and other teachers will explain them all [...] like our maths teachers really explains the notes well, so we know what to do with our tests.
>
> Calum: Okay.
>
> Mia: Whereas some teachers just hand you out booklets and tell you to go over the booklets.
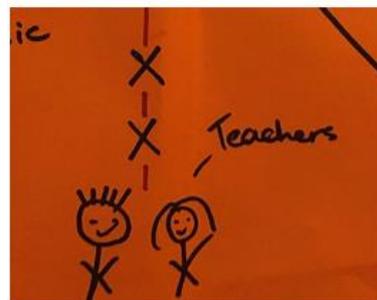
Figure 21: Mia's (13) mixed experience of teachers

Eva expressed similarly feelings, contrasting teachers in her country of origin with those her current school:

> One girl once raised a hand and said that she didn't understand this and that. The teacher just came to her and said 'you have to listen' and that was it [...] The teachers really help here a lot. They help everyone. (Eva, 14, asylum applicant)

Ricky and Mia discussed a "pupil support teacher" whose role involved supporting children with additional support needs in the school. Ricky (11, NRPF) added her to his map, saying that "she is really nice…she is a supportive teacher." He also spoke about his school creating a space for him and his friends to talk about their feelings and difficulties:

Figure 22: Ricky (11) drew a "really nice" teacher, as well as a "bad teacher" who gave him into trouble "for no reason."

> Ricky: The head teacher did this wee group thing with us, it was me, [my friends] and another girl [...] Every Monday afternoon we go in there and just relax and share our thoughts.

A less-good teacher was "strict", less helpful, less "funny" (Nicole, 11, asylum applicant) or more prone to giving people into trouble. Ricky described feeling "a bit upset" when a teacher gave him into trouble for "no reason", while Kieran (14, NRPF) said something similar:

> They shout and, like […] if you forget your pencil, you have to write, like, 50 lines.

Figure 23: Eva (14) drew the teacher who supported her to navigate her school environment.

Figure 24: Kieran (14) had mixed feelings about school connected to "less helpful" teachers.

Children's narratives spoke of more than teachers being just *nice,* but of teachers and schools treating them with fairness, supporting their learning and providing a scaffolding for their aspirations. This reflects wider research on educational inclusivity where children value teacher support to learn, grow in confidence and feel a sense of comfort and belonging (Amina et al 2022; McBride 2018; Sime 2018b).

As in other spaces, language issues did not feature among all children's or parents' narratives because many of the children here were fluent or native English speakers. Eva (14, asylum applicant) described language alongside other cultural capital elements, where her own candidacy as a learner was supported by a teacher who shared a language with her:

> When I don't understand something during the class I go to her and she explains me. And also I chose wrong subjects first, so she helped me to, to undo those changes and to choose the correct ones and it was really fast and effective.

Language and knowledge barriers were reduced by culturally and structurally-competent practice that significantly eased Eva's educational transition.

Parental engagement with children's education

Parents' engagement with education was a common feature in interviews with adults. Challenges adjusting to a new institutional environment were prominent for those who had experience of other educational systems. Maria (parent, asylum applicant) described the transition:

> It's so different, I still can't get how this education is arranged, 'cause in my, in our country, schoolchildren have homework, homework tasks, they have to fulfil

them and they are being checked and they are being evaluated. And here it's absolutely different [...] Really it's very hard for me to understand.

She described getting help and support from friends with more knowledge and experience, and from the same teacher that Eva mentioned. The negotiated, blurred nature of parents' and children's educational aspirations was evident here:

[Eva] picked some subjects and we went to school and we corrected a little but, just consulted and corrected the subjects. 'Cause we, we do not know the, the rules and moreover the girls also doesn't know the rules and how it works so we just consulted together and then just corrected a little bit.

Jan and Maria (Eva's parents, asylum applicants) were able to capitalise their cultural and social resources to support educational engagement with a school well-aligned to their circumstances, but the wider picture from practitioners suggested that poor alignment caused significant issues. Amal (advocacy) connected cultural capitals (language, knowledge) to emotional capitals in her work with parents whose children have additional needs:

Some women do not have that confidence to want to come out and say look, my child isn't getting the best help [...] Due to lack of confidence and lack of knowing how to access service she's just there not getting any help, and she doesn't know how much help she could get, if only she could ask.

Schools were seen to provide interpreters for parents' evenings, but not for more regular interactions, creating "a disparity, [a] gap that teachers have not been able to cross" (Toni, advocacy). Many third sector participants argued that schools were responsible for closing this gap – they "probably could do more to make sure the parent is fully informed of what is required of them" (Kate, migrant support) and to communicate with parents:

Where the teacher just needs to give the family a bit of feedback on the child, or the family just need to know that there's a school outing on Friday and they need to bring this and they need to bring that [...] Maybe the teacher wants to talk to the parent about some small thing about the child's behaviour, that gets unaddressed. I think, the impact is, actually, quite big. (Frank, volunteer development)

Toni's child was asked if she spoke Arabic when a new pupil started school. Neither the new pupil nor their parents spoke English, the school had no Arabic-speaking staff and had made no interpreting arrangements:

So things like that, they had to get a little child to come and speak to the parent. (Toni, advocacy)

Written communications from schools were seen to cause difficulty for those already anxious in their relationship with public services. Christine (family support) described a parent who received a form she did not understand that caused significant anxiety. It was a consent form for a school trip:

She didn't know what the form said so she wasn't going to sign […] So I was able to say to her 'they're going to the zoo' and she was like 'oh that's really nice.' I said 'can they go to the zoo?' She said yes, and we filled in the forms.

Peter (community development) connected these challenges to schools' normative expectations around parental engagement, and the challenges parents in deportability might experience in fulfilling them:

Things like trips and toy drives and things like that where [schools] say 'oh you don't have to do it' but there's a sort of pressure to do it sort of thing, I hear about that quite a lot as well. So being part of the school community and not wanting to seem like some sort of drain on that probably are - not wanting to seem that way or feel that way can cause a lot of issues for being and again I don't think that the schools necessarily understand that very well.

Parental engagement with education risked becoming an area of differential treatment, where structural dynamics, schools' institutional habitus and communication practices and parents' resources combined to produce circumstances of misrecognition. These could be structural, procedural, and interpersonal. Amal (advocacy) described working with parents who were mistrustful and felt discriminated against within a causal complex incorporating language and interpreting issues, a wider context of hostility and discrimination, and an absence of cultural and structural competence:

Amal: [The family] refused an interpreter, they wanted someone who they trust. […] The school brought an interpreter, they brought me, so I said to them, I'm happy to go with them. If the interpreter is mistaken, and didn't present your view, I'm quite happy to speak.

[…] Calum: What was the situation with the school in that case?

Amal: The lady think that her son was discriminated [...] It was just a lack of communication more than discrimination [...] Sometimes when you use words, okay, it has different meaning, okay. And because of the communication,

sometimes people perceive it, that word, aggressively, or calmly. So it's a lack of communication […] The family thinks the school were discriminating the children, the school think that the family were a bit aggressive.

There was evidence of schools attempting to mitigate these challenges. Some spoke of schools adapting through third-sector partnerships, specialist resources and other provisions, some supported by Pupil Equity Funding (PEF). Christine described a pilot project where an ESOL teacher and interpreter would regularly meet with parents:

> [...] There was things that parents wanted to know about their children that they just couldn't ask that you and I could ask. So language barrier was a huge thing. (Christine, family support)

Dee described a nursery bringing in a specific staff member to support these kinds of engagements:

> [They] would welcome the families, ask how the child was getting on and at the end of the session inform the parent what the child had been doing in nursery. (Dee, family support)

Eva (14, asylum applicant) described a "special subject" at her school aimed at the collective candidacy of migrant children:

> I think during this year they started to give more help to people like us. We even have a special subject, EAL, I don't know how to - what does it stand for exactly. They didn't have it before, it was introduced recently, so they help us with new words there.

Harris (community development) described how local schools engaged in third sector partnerships, using PEF to provide information packs to new families about services and operating a range of extracurricular programmes. She and others spoke about the need for a specific migration focus within schools, whether through individual practitioners or entire schools with some specific focus on migration issues, while also recognising the risks of stigma and exclusion:

> I'm not even sure this is a good idea now that I'm saying it […] In every ward you should have at least one school where there's a sort of specialism in working with kids and families from abroad [...] I'm not sure if it's a good idea to have certain schools that are known for that and then that adds stigmas and things like that so I'm not sure about that as an idea. It's either that or you do it in all schools and you just have specialist staff there. (Peter, community development)

The challenge in education was the extent to which education providers could respond to the specific needs of children with precarious, unsettled migration status. A case study provides additional insight here.

Case study: Maya and Nick

Amy (family support) worked with Nick (lone parent, asylum applicant) and his daughter Maya (primary school age) for years, and her narrative provided a microcosm of candidacy issues in education, showing how cultural capital dynamics (knowledge, language), emotional capital dynamics (fears, anxieties) and a lack of culturally or structurally competent practice combined to create misrecognition and reinforce dynamics of nonbeing. Amy described Maya's nursery's approach to communication with parents:

> They have all the books and the things that they make up that [Maya's] been doing and she's been achieving and they take pictures and they write it all out and then leave it in her tray for the parents to have a look at. But that was no good to [Nick] because he didn't understand it because it was all in English. Even the welcoming coming in the door was all in English, the notice board was all in English, and it wasn't until I'd had a conversation with [Nick], how [Maya] was getting on and he said he didn't know. (Amy, family support)

I had noted the use of multi-language welcome signs, information sheets and other public displays in Amy's service, and she seemed frustrated by what she felt was a basic lack of adaptation on the part of other services. She spoke next about Maya's transition to school. The nursery posted enrolment information in English on a noticeboard. Nick, unable to read it, had no idea. Amy raised this with the nursery:

> I was told, it's not our responsibility, we've put it all up on the noticeboard and he should have asked the questions himself [...] The nursery wiped their hands of it, passed the responsibility onto us, for someone who doesn't know the country, doesn't know the system, doesn't know anything. (Amy, family support)

Because of this delay, Maya missed out on a place at a nearby faith school providing education in line with her religious background, instead given a place "six or seven miles up the road." Travelling was impossible as she and Nick lived on asylum support. Amy successfully advocated for a place in their chosen school, but this school was "not accommodating, not in the least," with similar issues to the nursery. Reflecting on this experience, she described GIRFEC as "bullshit":

> Working in partnership with a parent, that was absolutely 100 per cent not done [...] At the end of term when we're graduating children from nursery into school and you get them big book of all they've achieved all through starting nursery and you get it handed over, and when I had a look at it every single thing was in English. Not even a goodbye in [Nick's first language]. (Amy, family support)

Challenges of navigation (language, knowledge, finances), permeability/porosity (registration systems, information-provision) and adjudication were only mitigated by persistence and the mobilisation of proxy capitals on the part of a provider-advocate (Chase et al 2017). Every interaction in the above is a failure of recognition – an absence of care and support for Nick and Maya, an ignorance of their specific circumstances, invisibilised and reified by a failure to facilitate equal participation (Zurn 2015). Amy connected these to wider restrictions on Nick and Maya's agency, produced by status and sustained by power dynamics in service encounters – "you're trying to include him, it's his life" but the overall picture is of exclusion and misrecognition.

Healthcare and health services

Healthcare was another space of difficulty in terms of presentation, involving a complex gatekeeping system of registration, appointment-booking, interpersonal presentation and adjudications. Chapter 4 described how fears and anxieties around information-sharing and deportability might cause an avoidance of healthcare encounters. Further challenges existed around permeability, presentation and the ongoing navigation of the NHS.

Permeability and Presentation

In some circumstances, families found challenges of alignment between their capitals and circumstances and healthcare requirements, even in universal primary care. Some challenges were closely related to migration status and its impacts. Jenny (parent, asylum applicant) was unable to register with a GP because she could not provide written proof-of-address after a sudden move; she was "35, 36 weeks pregnant", and she could not then access midwifery care. Jane's (parent, asylum applicant) experience combined concerns about GP processes with hypermobility issues. She registered her family with a GP, but they have since moved away. She expressed worry and concern about travel and the process of making appointments:

> Maybe the boy is sick overnight, there's nothing you can do. So in the morning you go like 'OK let me call GP so that I can book appointment.' They will say 'no, it's too close, no space, you have to wait for 3 days, you have to wait for 4 days.'

In an emergency! Or they can tell you to go to hospital. (Jane, parent, asylum applicant)

Concerns about healthcare were evident for those newly arrived, adjusting to a new and unfamiliar system. Jan and Maria (parents, asylum applicants) spoke of differences in the system - some better, some worse. Jan felt that everything was "slow", but some things were better:

From the clinical point of view it's better. [...] The most important thing is that the medications are free [and] if anything important or serious illness happens, so we will not be in need to collect money for the operation. (Jan, asylum applicant)

Maria (asylum applicant) was more concerned, having experienced discontinuities of care:

In my country [I have] one GP, same doctor through my whole life in the same health centre. And the GP knows all my problems, every time I come I do not need to start from the beginning. And here, every time when I come for an appointment, every time there is a different GP so I have to tell the story from the beginning.

Maria and Jan were both concerned about the gatekeeping role of GPs, describing them as a "thick filter" (Maria) for specialist care. They felt that persistence was required:

Jan and Maria both talk, then interpreter: […] Maybe, maybe we do not understand properly the system. Maybe we should, you know, 'knock' on them.

The first thing Eva (14, asylum applicant) mentioned in her interview was that she did not like the GP system, for similar reasons. Previously, she had one doctor – "he really knows everything about you and he can help much better." In Scotland…

[...] they keep changing the doctors and we have, I have to tell everything from the beginning again to different people and they just prescribe pills and they send us away and that's it [...] If you want to get more attention you need to keep going so that to basically attract that attention.

In a system of gatekeeping and referral, candidacy often required multiple presentations over time and across multiple spaces. For those who "may be less used to or less able to coordinate the work of their candidacy over these multiple forms", or who have resources poorly aligned to the porosity and presentational dynamics of services, this became challenging (Dixon-Woods et al 2005, p. 109). Kate (migrant support) described accompanying and advocacy when supporting a parent to present seeking referral to a

specialist trauma service. The GP was unaware that the service existed, something that was…

> [...] a bit shocking, a bit worrying [...] you're reliant on the GP being understanding and having some sort of knowledge of what people might be going through. (Kate, migrant support)

This service was only available via NHS referral, rendering it impermeable and reliant on successful negotiation of GP service dynamics. Candidacy for trauma and psychological services could also be undermined by deportability, a Catch-22 that Pauline (family support) described:

> If they're in the middle of having very unsettled immigration status then that isn't going to be the right time. They can only be supported I think at a time that they feel settled and they feel secure […] For a long, long time that's not something that they have.

This fit with my own practice experience as a provider-advocate, where were often refused because unresolved status made treatment pathways inappropriate. Even when service referrals were accepted, there were significant waiting lists. Jenny (parent, asylum applicant), referred for tertiary mental health support by her health visitor and midwife, had been waiting months for an initial appointment. She was also worried about travel; despite being referred and accepted, her candidacy was far from secure.

Interpersonal dynamics in healthcare

Interpersonal and communicative dynamics are evident in some of the above; continuity makes it easier to communicate, present and negotiate; the presence of an advocate can similarly support communication and understanding. Participant experiences suggested inconsistencies around GPs use of interpreters. Some spoke of good practice, from interpreting provisions when making appointments to standard bookings of double appointments where interpreters were needed, supporting discussion and disclosure. Jan and Maria described their old GP practice, in a highly diverse area, providing language support during the appointment-making process:

> The receptionist would take the phone, would contact interpreter and would help me with the, you know, appointment [...] I saw in the reception that there were so many different nationalities and that health centre already adapted themselves to provide services. (Maria, parent, asylum applicant)

Their new GP, by contrast, "did not provide an interpreter" (Maria) and the receptionist did not accept Maria using a phone translation app to make an appointment. This

difficulty was created in part by a sudden move and negotiation of candidacy under new local conditions:

> Jan and Maria both talk. Interpreter: This is just a speculation, they think maybe they, let's say speaking about [their previous area], they have more finances to provide interpreting services and maybe this part of the city is solely Scottish people living here and they are not financed.

Language intersected with the interpersonal orientations of health staff, in whether they were helpful, friendly, welcoming or whether they engaged in practices of misrecognition. Ariel described the communicative dynamic when she travelled with a lone parent, she worked with, Odette (asylum applicant), to get her baby vaccinated:

> Sometimes I think why could people not just be nice, and civil, without making faces [...] Because mum kept saying 'I don't understand, I don't understand', and I feel like she was just being very, very impatient with her. (Ariel, family support)

Communicative dynamics in appointments could open up or close down presentations, disclosures and negotiations. Kate (migrant support) described her role as a provider-advocate in health appointments for people "who you would deem more vulnerable" because of the interaction between individual resources and service dynamics:

> So people who can't really engage fully with their appointments, or want to bring up those vulnerabilities say to a GP if it was mental health needs but they don't know how to communicate those or think they won't be listened to.

Vulnerabilisation exists in the interaction between personal resources, structural positions and institutional practices, and presentation is an inherently vulnerable act – a presentation of part of the self that might be rejected or subject to misrecognition. Kate reflected on the sense of disrespect and humiliation a parent felt with she accompanied her and her daughter to the GP to ask for a medical device her daughter had used in her country of origin:

> The doctor was like 'nononono we don't do that anymore, like absolutely not' [...] You don't have to be so, you know, patronising about it. And then the interpreter said to the GP, 'Oh yeah, they always ask that' and the doctor was like 'hahaha', like laughing and I was like 'this is so unprofessional.' (Kate, migrant support)

The presence of an interpreter did not facilitate communication; instead, both doctor and interpreter closed the communicative space, contributing to misrecognition. Kate also

attended appointments without interpreters, where patients could not communicate their needs not communicate or receive adequate information:

> [The GP will] just sort of, you know, ask the person to like point and like figure out. That's not going to provide good health care at all. Or like any kind of diagnosis that's beneficial. And also can't be good if you're like diagnosing and medicating someone when you don't know anything about the situation. (Kate, migrant support)

The absence of interpreter provision and the closing of communicative space reduced choice, autonomy and the space for informed consent, negotiation or resistance. Ariel (family support) spoke again of Odette's vaccine appointment. There was an interpreter on the phone as the nurse described "what was going to happen, and all the repercussions [...] I thought, 'this is horrendous'":

> Mum couldn't understand, I think, when we were talking about the effects of this, that, and the next thing, what the injection was, she wasn't really understanding.

Other dynamics of misrecognition were also relevant. Sarah (family support) described a parent negotiating candidacy for mental health referral within a child protection context, denied by professionals who did not believe her:

> The health professional was saying, 'oh she only wants that so it can, like, help with her claim', and all this kind of stuff [...] So the family definitely didn't trust them. And I felt that that extended to me as well.

These interactions increased the likelihood of disengagement. Kate believed that "people don't go back to the GP when they've had a bad experience." Parents were the exception, their moral identity wrapped up in their children's candidacy:

> The only people that who consistently go back even if they've had a bad experience would be people with children, because you're going to always put your children first over […] whatever bad situation you've had. (Kate, migrant support)

Healthcare experiences included engagement with health visiting and midwifery services, the focus of the next section.

Health Visiting and Midwifery: structural competence practice from a distance

Maternity and health visiting services were central in the narratives of many practitioners and parents. There were many examples of good practice. Pauline (family support)

described an asylum-specific midwife within the NHS, an example of structural competence in service design:

> A great example of, you know, now, you know kind of, we're thinking about 'what are the needs of these women, you know, that are pregnant and arriving here pregnant?'

As a universal, invitational outreach service, health visiting was porous and required few resources to access. Health visitors could spark identification, facilitate navigation and overcome challenges in porosity and permeability. Parents spoke of health visitors and midwives as provider-advocates, connecting them to resources to overcome low mood, isolation and other needs. In Chapter 4, health visitors introduced both Abigail and Jenny (parents, asylum applicants) to support groups, advocated to health providers and connected them to other essential resources. Jenny's midwife was central in accessing accommodation when she had NRPF. Abigail described her health visitor as "really good", helping her register with nursery and the dentist, and providing a "family support worker" who helped with forms, school meals and other service engagements.

Practitioners described witnessing interpersonal practice among health visitors that evidenced structural competence and recognition. Some health visitors were "good" or "ultra-good" - "really, really nice, and very understanding" of the difficulties families faced (Ariel, family support), practicing in "a non-judgemental way. They didn't have, you know, a discriminatory attitude" (Sarah, family support). Some practitioners described health visitors arranging for additional support workers to provide a close, engaged level of involvement. A sense of closeness, consistency, empathy and understanding underpinned these examples, along with guidance through complex, unfamiliar and often disorienting service terrain.

There were examples of problematic practice from health visitors. Sarah (family support) worked with Mina and her baby Ruth, alongside a health visitor she described as empathetic and understanding of Mina's background and circumstances. She appeared to understand that Mina's parenting challenges came from a complex mix of pre-migration traumas and post-migration stressors, and to recognise Mina's strengths and progress. Mina moved to different asylum accommodation and was transferred to a new health visitor who spoke to her in ways Sarah described as "really derogatory":

> She's got all the information from the previous health visitor, and you know, there have been some, not child protection issues, but we've had to work really hard with her […] But I think, the health visitor brought this up with her, in terms of a sort of cultural, you know, 'you can't be doing that here' [...] Not knowing anything

about her background, or what she's been through, the trauma, and you know, and actually how well she's doing. (Sarah, family support)

Her adjudications and ongoing engagements were focused on parental culpability or deficits, not acknowledging structural circumstances. Where the first health visitor engaged in recognition-as-care and an acknowledgement of strengths and competencies (Honneth 2004), the second engaged in misrecognition through reification, a failure to recognise Mina's strengths and progress and an absence of structurally competent practice (Zurn 2015; Mackenzie et al 2013).

Other practitioners described health visiting adjudications made at a distance, using shallow engagements and problematic heuristics. Donna (family support) went on a joint visit with a health visitor. Where the visitor saw a "quiet and well-behaved" child, Donna saw a "lack of stimulation":

> I felt she had an awfully low mood [...] I phoned her health visitor just to talk to her about it because it's interesting how somebody is - she said, 'oh, that child was really well behaved', and I said, 'yeah, the child was but I think it's due to not a lot of stimulation there just because mum's not feeling herself.'

Ariel and Amy described referrals they received from health visitors for parenting support that evidenced distant, disengaged practice and heuristics and categorisations that were poorly aligned with families' needs, problematic patterns particularly visible in referrals for "people from other cultures" (Ariel, family support).

Referrals commonly cited "non-engagement", "isolation" or needs for "parenting support", terms that both Ariel and Amy felt contained problematic ideas of parental culpability. Ariel (family support) objected to how these referrals described the circumstances for one parent she worked with, Farida (lone parent, asylum applicant):

> The health visitor would say 'Mum's not engaging and she doesn't really talk much English.' But she spoke a lot of English to myself [...] she understood, you maybe had to speak a bit slower, but we had a general understanding.

She felt Farida's challenges in engagement came from fear and anxieties connected to her status, and connected "isolation" and "parenting" needs to structural pressures towards isolation, while referrals suggested "personal choice" or "a parent who can't be bothered":

> I think they were saying that mum's not being responsive to the child's needs. But mum was saying, 'I'm in the house all day, I do sit with her, but there's only

so much I can do', whilst attending to her baby [...] When it's worded to you, it looks plain, you know, like Farida, 'she's got two kids, she's not interacting with them appropriately, she's not taking them out, she's not doing this' [...] and when you actually go out and you think, well there is reasons. (Ariel, family support)

Amy worked with Tamara, a lone parent with a two-month-old baby (Violet), alongside a health visitor whose referral cited non-engagement through missed appointments. Amy felt this blamed Tamara for intentionally disengaging without acknowledging barriers to engagement:

You've got a heath visitor saying to me, 'oh she didn't come to her appointments.' Well she didn't know where she was going, how could she come to the appointments? [...] And this girl again had been traumatised and a victim of domestic abuse, torture, everything else [...] So what had this health visitor been doing for the last two months apart from saying 'she's not engaging, she's not engaging'? (Amy, family support)

The misrecognition here relates to both reification and to the paradox of individualisation (Zurn 2015), where problems and solutions are focused on the behaviours of rational individuals – in this case, parents – as the drivers of need, the sites for change and the root of problematic service interactions.

Both Ariel and Amy connected these challenges to local operating conditions, particularly resources – practitioners "overwhelmed" by caseloads (Amy, family support) or under "extreme pressure" (Ariel, family support). It was here that Sarah (family support) described the "hassle factor" where families do not fit within established practice frames:

As a health visitor going out, assessing a family, you know, white family, both parents are working, perhaps mum's feeling a bit low, but we know there's things that can be done about that. Whereas, with an asylum-seeking family, you're going out, there's a trauma from previous years, there's like, significant mental health difficulties since the birth of a baby [...] that's why, I feel, that asylum seeking families don't get as good a service.

Amy (family support) also described a sense of "professional snobbery", where workers maintain distance to evade responsibility – "if they don't know they don't need to feel part of it, they don't need to take responsibility for it" within a context of restricted resources. Instead, the third sector becomes responsible for responding to needs:

> The health visitor's like 'thank goodness, we've passed that on [...] we'll pass that
> onto the third sector, and it just gets it off my desk, it gets it out of our hands. The
> responsibility's gone, it's a relief.' (Amy, family support)

Practitioners often described feeling privileged to have closer relationships and meaningful engagements with parents, but they also described a paradox where public sector workers had institutional cultural capitals. Donna and Amy regularly attended a multi-agency meeting where public and third sector organisations discussed how to support specific families. Donna (family support) described this as a useful tool for support and prevention, but Amy (family support) felt that the most distant organisations possessed the power in a meeting that was just "ticking the boxes":

> It's all these professional people putting their cases forward, stating their
> opinions. They might have only seen the family once in three months, once in
> five months, but they're the people that the people higher up are listening to.
> Whereas in the third sector, we're saying 'no, we're working day in day out with
> these families and what you're saying is not reality.'

The sense of ticking boxes connected to adjudications through heuristics and typifications, and to the institutional and local operating dynamics that underpinned inadequate offers of support.

Social work and social care

Practitioner narratives around social work included positive examples of practice in areas more typical of social work involvement, including child protection, domestic violence. Pauline explained that she had "not experienced any differences" in responses to migrant families:

> if there's concern about a risk they'll respond, you know regardless and stuff so,
> so in terms of kind of in that way I've not really noticed a difference. (Pauline,
> family support)

Social work was often viewed as intentionally impermeable, a residual service with high thresholds focused on risk and protection. In other circumstances, particularly needs related to life in nonbeing, practitioners felt that social work would not respond – typically they were not "high enough of a tariff" (Pauline, family support) in local operating conditions of limited resources:

> You get a good sense of, you know, is this something that social work would pick
> up? […] That's a question that we have to ask ourselves as well is, is this high

> enough of a tariff that they will then, you know, actually respond to it? So, cos we can sometimes work that out ourselves. (Pauline, family support)
>
> -

> I've done this job for a long time. I know that social work are under so much pressure that there's nothing that they would do about things like that. They're literally at breaking point where they're only dealing with families where there is extreme poverty where it's impacting on a hugely detrimental scale. (Christine, family support)

As well as the degree of need, the *type* of need could be poorly aligned with social work systems for permeability and adjudication. Amy's (family support) narrative suggested that a parental culpability model struggled to respond to "statutory neglect" (Jolly 2020) even if needs and impacts were the same:

> Where's the borderline for neglect? Where's the borderline for abuse? […] If a mum's not got any clothes to go out, if a mum's not got the things that she needs for a baby for every day [...] Nappies, if she's not got bottles, if she's not got milk?

Sam (lawyer) felt that "cultural entrenchment" – the heuristics through which candidacies are appraised and adjudications made – produced problematic responses in the "insidious and complex area" of forced marriage. Legal ambiguities and entrenched practices led to inappropriate responses:

> (Lana, 17yo) was treated as an adult, in Adult Protection services. We kicked up fuss about it, and eventually got her reassigned to Children and Families under Section 25. We also advocated heavily for a forced marriage protection order. [The local authority's] line was that, because she was Section 25, they didn't need to, which is a complete misunderstanding of Section 25. (Sam, lawyer)

Lara was returned to her family "and, I suspect, put into a forced marriage" (Sam) on the grounds that this was her wish, and Sam expressed concern that the department had ignored coercion and pressure from her family. My impression was of a department with limited knowledge resources in this space and limited capacity, poorly aligned with an unfamiliar situation, relying on an inadequate and inappropriate frame for adjudication. Similar issues were evident when participants spoke of NRPF provisions.

No Recourse to Public Funds presentations and initial adjudications

Where families had NRPF, their needs for accommodation and financial support could be met by local authorities under S22 of the Children (Scotland) Act 1995. Participants described a range of challenges throughout the candidacy process. As outlined in Chapter 4, identification and navigation were often inhibited by the disorientation of a change in circumstances, the obscure nature of the provision, and fears and anxieties around immigration enforcement and institutional authority. Presentations often required a combination of in-person attendance at council offices or referral by phone or email through a provider-advocate. A single presentation was rarely sufficient; while referrals were "really easy" (Kate, migrant support), receiving an adequate response was challenging:

> "Nothing happens […] so you're chasing things up and I know it's all about resources and capacity but it's a struggle when someone really needs it [...] You're just chasing it up being like 'has this been followed up, is it ever going to be followed up? What else can I do?' (Kate, migrant support)

Hope (migrant support) described a "lengthy process" of variable, contradictory responses when referring families:

> We phoned social work direct and then they will tell you, no you're supposed to phone here. You have to phone the local - the homeless or children and families and you don't know which children and family department I'm going to call. And then it's really a push. Okay, then they will take the details, okay, I will call you back, and you're going to wait for them to call you back and it's, it's difficult.

Some services had institutional capital to ease referral paths. Jenny (asylum applicant) described how her midwife's referral produced a rapid, positive response:

> After two or three days the social service to call me […] The lady told me that I'm coming to see you [...] I explained our situation to her - 'we have nowhere to go, and this is our situation.' They said 'OK, I'm going to go and talk with my boss' and later she said to me 'you can go to house and we will pay for the accommodation for one week.' (Jenny, asylum applicant)

In-person presentations had problematic interpersonal dynamics. Anna, Philip and Kieran (NRPF) took all of their belongings to the social work office and were told that their last registered address – a house they left years prior – made them the responsibility of a different team. They travelled independently to the other office and waited hours before being seen. Anna described a threatening, hostile and unhelpful

interaction with a social worker with a "mourning face", focused on eligibility and on the need to contact the Home Office:

> They say that 'Oh, we have to go to, we have to contact Home Office, this is your situation' [...] That means the Home Office can approach any time at the door. And it was so - we don't know, we are so scared, where to go, how to go out, sometimes at the door somebody will be there. It was so stressful, they say 'we can provide you accommodation in your situation [...] Same time we need to approach the Home Office also.' (Anna, parent, NRPF)

Kieran (14, NRPF) drew two social workers and described how "they were threatening us", both in these interactions and in a general sense that they were colluding with immigration authorities. Each interaction threatened their physical and ontological security. The family refused support on these terms, choosing instead to rely on their networks of support until those networks were exhausted.


Figure 25: Kieran (14) drew two social workers that he described as "threatening."

Other participants also described a sense of threat. Christine (family support) accompanied a family to present at their housing department:

> The housing officer said 'well if you're telling me she's got nowhere to go' - I think almost pushing her hand to go back to this really difficult situation – 'we'll need to phone social work.' And almost said it me like a 'oh I mean are you telling me she's go nowhere to go because we'll phone social work' and I said 'I want you to phone social work. I want you to tell them this woman has nowhere to go.'

In both circumstances, accompaniment by a provider-advocate helped overcome the fears and anxieties these threats seemed designed to exploit. These examples show a lack of focus on need and a coercive use of institutional power. If structural competence lies in using awareness of structural circumstances to provide support, here this awareness was used for the opposite purpose – deterrence, avoidance, and refusal.

NRPF adjudication and ongoing provision

All families with NRPF here were either refused support or offered support that was inadequate to meet their basic needs. Many participants spoke of how immigration status led to outright refusal, delay, or differential response. Practitioners described how mentioning insecure status in referrals caused confusion, moving social workers from

needs assessment to eligibility assessments. Hope described how practitioners "have that hat", focused on eligibility first:

> They're, kind of, challenged and then they start doubting, 'should I do/should I not do? Oh I don't actually think I should be doing' [...] It's something they've not across before and then suddenly they completely, they doubt completely the process that they have in place - should I apply that to them?

Hope clarified that her requests were rarely refused outright, but she regularly saw delays and confusion. Others described refusals and assessments focused less on needs than on immigration status, credibility or parental culpability. When Abigail (asylum applicant) first arrived in Glasgow, she approached the "homeless team". They "didn't think of my son, no, they were only just talking about me":

> There were loads of questions asked, 'how did you get here, how did you get in a mess?' And I was like whole day, until in the evening finally I got somewhere to put my head down. And I was struggling (..) Then we just went again to the homeless office and they said they can't give me any support.

Harry, Nina, Ricky and Mia were told they were ineligible for help because of their NRPF condition, before being provided with accommodation only, expected to bricolage other things needed for survival - "it's up to you because you are surviving previously also, it's up to you to survive" (Harry, NRPF). Both parents cited the local authority's "lack of knowledge" (Harry) of legal entitlements and migration issues:

> She didn't have any knowledge - even the head, the head came in a meeting, even he didn't have any knowledge [...] Those who are in public offices, they must have knowledge about all the aspects. (Nina)

They and others called for more training on immigration systems and entitlements - on "processes and procedures" (Hope, migrant support), "increasing knowledge and awareness" among social work staff and management (Sam, lawyer) or "special knowledge" of migration issues (Harry, parent, NRPF). This implied a linear relationship between more knowledge and better practice, yet evidence suggested a more complex causal picture. Harry and Nina provided their social worker with legal and policy documents with no change in their support. Sam (lawyer) described an apparent paradox:

> In the more rural parts of Scotland, there was a lack of familiarity with the legislation, but practice instincts were quite good [...] It was kind of reversed in

the urban areas, where there was a decent understanding of the framework, but practice [...] wasn't as good. (Sam, lawyer)

Less experienced authorities made up for knowledge deficits with a needs-led orientation, sometimes providing support that families were technically not entitled to. Experienced areas had "greater awareness of things they can't do, and things they can do" (Sam), suggesting that they knew how to evade or provide minimal legal standards of support, and had developed problematic categorisations, heuristics and offers of support.

Knowledge existed alongside other factors, including local operating conditions of limited resources. Participants saw social work departments as "high pressure environments where nobody's patient" (Kate, migrant support) with workers "overworked" (Hope):

And when you're overworked, sometimes your safeguarding hat goes. You forget, you know? (Hope, migrant support)

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[Social workers] need more money and time, don't they? […] It's an extremely challenging job. (Sam, lawyer)

Informational and emotional resources combined with heuristics and patterns of practice to produce problematic interpersonal orientations and adjudications – and thus inadequate offers of support.

Chapter 4 explored how many families receiving NRPF support lived in inadequate accommodation and received insufficient financial support. Participants described extended periods in hotels, B&B accommodation, or temporary flats that were unsuitable and even dangerous. Two participants here were hospitalised. Nina's (NRPF) chronic health condition was worsened by her temporary flat, and Kieran (14, NRPF) became malnourished because his hotel had no cooking facilities, and his parents could not afford food. These occurred despite extensive advocacy from both families:

The head of the housing board, the housing, this department, he said "I am not aware about her health conditions." [...] We were telling in every meeting that she is having health conditions, even when we got the keys, at that time also we told them that it's not suitable. (Harry, NRPF)

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> After we gone to the hotel social worker never contacted us for 7 months. I keep on going to social work - no, to [migrant support organisation] to update our information because I don't have money to travel to the social work department and always go to [the organisation] to say that Kieran is in this situation, he's in very poorly, he's being taken to GP every day (Anna, NRPF)

There was an absence of any meaningful assessment of needs and circumstances in narratives suggesting routinised practices of distance and disengagement:

> I never saw a social worker and neither did that woman. [The social worker] checked in with me every week cos she bunged her £50 and kept her in B&B accommodation [...] She said 'it's OK, I don't need to see them because I know that you're seeing them and I know that this woman is taking good care of her children.' [...] GIRFEC was supposed to be the move away from things being physically safe and about having food in your belly and a clean house but I don't know if it technically has cos they were like 'well, you know what, this woman's not battering her weans and they're getting a bag of chips at night so actually I physically don't even need to see them.' (Christine, family support)

Again, the implication was that parental neglect would produce a different response to statutory neglect (Jolly 2018b). The only visible assessments were ongoing conversations about eligibility or families' progress away from NRPF support. Kate (migrant support) described a common response to her referrals for financial support when asylum support was cut or terminated:

> 'We can't do this long term so you need to fix this situation.' Which isn't always fair to us, obviously, it's also not fair on the person because sometimes it's just like an admin error by the Home Office that their support's been stopped.

Jenny (asylum applicant) received NRPF support before accessing asylum support. She described a social worker who was "at her throat" asking when she would move on. She also put this down to resource limitations, expressing empathy and understanding for the social worker's predicament – "they cannot continue helping one family, there are so many people that needed that help, which I totally understand":

> [Social worker] was constantly asking me 'when are you, do you know when is your appeal going to take? Do you know how long it's going to take?' [...] I'm pretty sure that her budget is so tight so that's why she wants to get rid of us. (Jenny asylum applicant)

Harry (parent, NRPF) similarly described pressure from a social worker to move into private rented accommodation when Nina was able to access some benefits payments, despite these payments being too low to cover any rent.

While the mobilisation of capitals for persistence and resistance featured throughout these narratives, it was made harder by the absence of proper assessments of need and any set routes for escalation or accountability. Harry and Nina were repeatedly told their assessment was ongoing or unavailable:

> She said 'we can't give you anything in writing.' She was so scared to give us any document in hand [...] She said 'my legal team said not to give you anything in writing.' (Nina, parent, NRPF)

Challenging refusals or inadequate offers of NRPF support was only possible through judicial review, which required its own candidacy – knowing about this provision, navigating to a solicitor, gaining legal aid and pursuing a lengthy legal process. Sam (lawyer) talked about how "lots of people don't have access to lawyers", particularly in other areas of Scotland. Harry and Nina described their lawyer making errors in their legal aid application, causing delays.

More often, changes in adjudications came through a combination of persistence and crisis. After Nina's hospitalisation, Harry mobilised his significant legal knowledge and his emotional resources, engaging in "adamant behaviour" by writing to department heads and refusing to leave the housing office:

> I was calling them, she was passing me to the social service, social service are passing to the housing department, that they have to do. So next day I went there, and they said 'OK you give your phone number, we will call you.' I said 'no, tell them to come downstairs, I am sitting here with my kids.' (Harry, NRPF)

After Kieran's health crisis, Anna's family moved from a hotel to a flat. She credited this change to the advocacy of their local MP, whose institutional power and linking capitals supported resistance and persistence.

Unresolved candidacy and the limits of service responses

I ended every interview with two questions about how to make things better for migrant families. What would they change in an ideal world? What more pragmatic or "realistic" changes would they make? Proposed service changes are included throughout these findings, but there was a significant thread suggesting that services had their limits. The ideal scenario typically involved changing the immigration system: faster, fairer, more

transparent decisions; the right to work; less mobility and the presence choice in where and how to live; and improved access to the things required to build a liveable life:

> They'd arrive in the country, they'd have everything that they would need, you know, initially, to make them comfortable [...] the same rights and access to things as everybody in this country has, in terms of housing, education, employment, benefits. (Sarah, family support)

Resolving status issues was often viewed as the best way to resolve needs or candidacy issues arising from deportability. Jenny (asylum applicant) called for an "amnesty", placing work and education at the heart of this:

> It would make us rebuild our lives. Like me, I've lost a lot it would make me rebuild my life. I could go back to college, after 1 year or 2 years I could go to uni and have my degree [...] Maybe through that I can work and maybe give my own back, back to the community.

Anna (NRPF) looked forward to getting "back to normal life" where she could work, her family could have a permanent house and greater autonomy, and their stressors would be eliminated:

> Without stress we can think about going back to work, that is the main thing. And I'm thinking we can stay where we want to stay, quite near to our son's school, you know? Yeah, thinking to stay, find an accommodation quite near to school and find a job for both of us [...] And then we can get back to normal life.

Practitioners similarly felt secure status resolved a range of candidacies, with the sense that parents' access to resources would support children's wellbeing in turn.

> It allows them to have a job, it allows them to feel as if they belong, and it gives them hope and the hope is that they can make a better future for themselves and their family. And it's just that isn't it, it's not rocket science, it's just so, so basic, that could fix a huge amount of issues and problems [...] It would sort out probably the biggest part in that and that's the mental health. (Amy, family support)

Many practitioners saw the right to work having significant positive impacts, but others were more cautious, seeing it as one part of a complex picture, one site of exclusion among others. Sarah (family support) described a friend who was unable to find a job after being granted status, connecting this to racism and exclusionary dynamics:

> Being discriminated against, one, because you're from a different country, two, because you look different to other people, three, because people think you're

coming to take their jobs [...] she has really, really struggled to get a job. Even once she got her status. And, you know, she will say that she feels it's because she's black. And, you know, with her history the way it is.

Cederberg (2012) argues that there are a range of cultural capital dynamics that prevent migrants from capitalising upon their knowledge resources and professional backgrounds; status only part of the picture. Harris (community development) described a concern that granting the right to work would simply subject people to the inequities of the labour market and mainstream welfare systems:

What about people who don't speak English? What about additional needs? What about trauma, what about all of these things? Like aye, right to work, sound, but what about all this, like how would that work?

Indeed, Jan (asylum applicant) felt that the asylum system allowed him and Maria to attend college and build up their skills, resources and networks before being expected to find work; in some ways, buffering them from challenges in the labour market and welfare system. They had been in the asylum system for less time than other families here and had some social and cultural resources protecting them from the corrosive impacts of the system. It would be interesting to revisit this with Jan over time. In general, the picture presented by participants was that almost all needs would be met, or at least mitigated, by resolution of status.

Summary and conclusion

This chapter argued that presentations, adjudications, offer and resistance were governed by complex causal interactions. Positive experiences of recognition were associated with services whose structures and practices were aligned to families' needs; whose communicative dynamics exhibited care, warmth and regard; and who exercised structural competence in recognising and responding to migrant candidacy dynamics. Misrecognition occurred when the marginalised social positions and limited resources of family members interacted with service structures, systems and practices that were poorly aligned to their needs and experiences. Hostile, exclusionary practice was associated with limited service resources and challenging local conditions. Misrecognition occurred where practitioners withheld care; where they lacked knowledge or understanding of migration issues or family circumstances; when they failed to address barriers to service participation; and in inadequate or inappropriate adjudications and offers of support poorly aligned with families' needs. Persistence, including the support of provider-advocates, was crucial to overcoming these issues and having candidacies acknowledged and resolved. Ultimately, some service interactions

were implicated in nonbeing, colluding with or contributing to coloniality. Others could mitigate some of the harms of nonbeing, but this was limited as many candidacies could only be adequately addressed by the resolution of status.

Chapter 7: Discussion and Conclusions

This thesis explored the lives and wellbeing of children and families whose members have unsettled, uncertain or precarious immigration status; the role of services in their lives; and the dynamics of service access, engagement, and negotiation. It considered the following research questions:

1. How is child wellbeing considered by the various actors involved with families with precarious immigration status – families themselves, public sector professionals and support organisations?
2. How is child and family wellbeing affected by immigration status?
3. What place do services have in supporting wellbeing under these circumstances?
4. What happens when families need extra support – how and when do they approach services, and how do services respond?

This final chapter provides reflections on the research process, before exploring key themes and their implications for policy and practice.

Reflections on the research process

The findings presented here reflect several decisions I made in design, recruitment, data collection and analysis. Findings reflect my own theoretical and positional engagements with data gathered through interviews and their complex relational dynamics (Braun and Clarke 2014; 2019). In critical realism, all knowledge of the world is partial and fallible. A different research design, a different person, or a different orientation to data collection of analysis would yield different insights. A longitudinal approach may have been well-suited to exploring changes and developments over time, particularly given the corrosive nature of nonbeing and the recursive nature of candidacy. Participant or non-participant observation would have provided direct observation of candidacy interactions and causal dynamics. Farmer's (2021) ethnographic study of NRPF provision provides an example, although this may have been impractical given the diversity of services explored in this project.

Findings also reflect the nature of the sample and my recruitment strategy. In five of seven families, all members spoke English either as a first language or fluently. I believe this reflected the limited interpreting budgets of services used in recruitment, as well as wider dynamics in migration. It is unlikely to be a coincidence that those whose status was unsettled for longer periods were in households headed by women who were fleeing gender-based violence. By contrast, one family achieved their status relatively quickly –

a family fleeing specific political violence headed by a male, middle-class professional. It would be too speculative to suggest a causal relationship here, but the evidence coheres with existing findings that LLR and NRPF conditions disproportionately affect households headed by women, and asylum policies often exclude oppressions or violence experienced by women (Crawley 2000; 2001; Dickson and Rosen 2020). Findings would also have benefited from the insights of families experiencing disability or ill-health, and this is an area for further exploration.

I have reflected on the validity of using status insecurity or precarity as a lens for the research. The findings suggest that there are causal dynamics specifically related to status precarity, and many participants saw similarities between those with different forms of status and differences between the needs and circumstances of migrant and non-migrant families. Some had reservations; Harris (community development) expressed a that ignoring similarities – poverty, punitive welfare practices, limits on autonomy – recreated social divisions and a sense of difference. I have tried here to do what Fanon's humanism suggests; to recognise human universality, but also the inequalities and specific circumstances that precarious migrant families faced in coloniality (Garrett 2021).

The study may have benefited from a more explicitly intersectional lens incorporating dynamics of race, class, gender and age. Systems of capital accumulation, conversion and the wellbeing that can be achieved through them continue to operate on racial lines, gendered lines and other lines of domination such that the resolution of status is simply the removal of one part of the causal complex of colonial oppression. The broad focus of the research, which included families in a range of circumstances and practitioners across multiple services, may have sacrificed depth for breadth. While the voices of children are threaded throughout the thesis, the ecomapping technique tended to favour the third and fourth research questions and provided only limited or indirect insights on questions 1 and 2. Narrowing my focus or taking a more direct approach to discussing precarity and its impacts may have provided a deeper perspective on causal dynamics around wellbeing in deportability.

The corrosive nature of insecure status

The first two research questions in this study relate to the nature of wellbeing, and how it is affected by immigration status. Findings suggest that status is a major part of a causal complex that has a significant negative impact on children, on parents, and on family life. Chapter 4 explored how post-migration stressors driven by status insecurities have a corrosive effect, limiting and eroding the resources required to generate and

sustain wellbeing across multiple domains. The research provides a complement to the work of Mayblin (2017; 2019) and the growing body of work connecting coloniality in policy to the everyday experience of nonbeing.

Economic capital and material wellbeing

Immigration status impacted on material lives and material wellbeing by denying access to financial resources and so to economic capital and its benefits. Despite the varied eligibilities and circumstances discussed here, a consistent theme related to families being reduced to material survival, to "bare" (Agamben 2000, p. 16) or "unliveable" lives (Butler 2004, p39). The foundational nature ascribed to economic capital by Bourdieu (1984) appears well-founded, as participants connected poverty to food, clothing and material essentials; to travel, transport and mobility; to service access, including leisure services and spaces for social and cultural capital development; to choice, control and autonomy, and to practices of care and identity. At its worst, material deprivation became a threat to physical survival; the "gradual wounding" of nonbeing a threat to life itself (Mayblin 2020, p. 110).

Spatial capital and ontological insecurity

The second corrosive impact connected to safe, secure and adequate accommodation. Asylum support housing was of poor quality, unsuitable to the needs and circumstances of children and their families, reflecting a longstanding trend in the literature (Allsopp et al 2016; Children's Society 2013; Embury-Ennis 2018; Grayson 2017; Mulvey 2013; Reacroft 2008; Smith and Lockwood 2019; SRC 2017). So too was NRPF accommodation, particularly in hotels without private spaces, cooking facilities or other essential qualities of an adequate living space (Dexter et al 2016; Jolly 2018b; McKenna 2016; O'Connell et al 2019; Price and Spence 2015). Children and their parents were denied access to *homes* – spaces of safety, ontological security, belonging and comfort – and narratives instead described spaces of discomfort and ontological insecurity. The experience of wider communities was also mixed, with narratives of racism and harassment and feelings of physical unsafety within alien, unfamiliar spaces.

These inadequacies often gained salience next to spaces lost and left behind by mobility. There were consistent narratives of transience and spatial insecurity, described by some as a "rootlessness" embedded in the migration system. Children, parents and practitioners frequently spoke of leaving behind spaces of familiarity and belonging, and of the expectation of further movement, of time experienced as a precipice (Griffiths 2014). Continuity or stability of place were significant in building and sustaining

resources supportive of wellbeing – ontological security, friendship, connection to place and a sense of belonging (Sime 2018a).

Ontological insecurity extended to the nature of time in deportability, with opaque timescales and the threat of refusal or removal a constant concern. This sense of "unknownness", as Alan (parent, refugee status) put it, was corrosive to mental health and wellbeing and was experienced as an everyday source of pressure and stress, particularly for parents or for children who were more directly exposed to or aware of the consequences of deportability. As Chase (2013, p. 1517) argues, there was an "existential struggle to imagine a meaningful present and a purposeful future" where that future was so uncertain.

This was particularly so for parents, whose sense of a meaningful present was undermined by restrictions on working rights, access to education and other avenues to inclusion, self-worth or parental identity. These experiences of "stagnancy" (Hocking 2018, pp. 162) or "ontological liminality" (O'Reilly 2018, p. 835) were expressed in terms of guilt, shame, lost identity, suffering and distress. I hesitate to support the presumption among some participants that children were less impacted by these elements. One limitation of this study is that it did not address this directly with children and findings here are influenced by adult's narratives about children's lives. This would be a beneficial area for more direct research with children on the impacts of deportability in the Scottish context, in the manner of Kalverboer et al (2009) or Smith (2020).

Social relationships and social capitals
Friendships were a central part of wellbeing for most children and for parents, closely connected to services including schools, leisure services and other organised activities. For almost all children, friendships connected to fun, joy and leisure, emotional support and as a bulwark against experience of exclusion or difference, reflecting wider literature (Mohamed 2012; Raghallaigh 2018; Smith 2020; Thomas et al 2018). Some peer relationships were marked by stress and strain, whether through bullying and exclusion or through friendships that appeared more fractious, ambivalent or insecure. Parents' friendships were also significant, with instrumental benefits in terms of knowledge information, material support, childcare and other candidacy domains, but also in the sense of reciprocity, of mutual care and recognition, and of time spent meaningfully.

The key theme here relates to pressures towards isolation. Living in poverty, and so unable to access spaces, activities, or cultural resources for friendship; being mobile and so leaving friends behind; and feeling a sense of difference or exclusion were all crucial parts of the experience of insecure status for children. For parents, there were narratives

of loss, absence and changes to friendship dynamics; experiences of shame and negative social comparison; erosion of the emotional resources required to access spaces of friendship; and strains places on friendships by poverty.

These findings provide additional nuance and complexity to ideas of bonding and bridging capitals. They support the findings of Strang and Quinn (2021), who argue that there is a continuum of bonding/bridging capitals, rather than a binary, and these dynamics go beyond simplistic cultural similarity to other forms of commonality and connection (Askins 2015). Children and parents both described navigating relationships of similarity and difference, closeness and distance (both geographical and emotional) through shared interests, activities, life experiences, or time and space. The findings also support ideas positively- and negatively-advantaged capitals proposed by Anthias (2007), as relationships here were often oriented to survival rather than social advancement.

It is also important not to lionise or reify the support provided by these networks. Welfare bricolage is necessary because of inadequacies in wider provision and the "precaritisation" caused by migration systems (Squire 2021, p. 141). Third-sector involvement here is also a consequence of inadequacies, filling gaps created and sustained by exclusionary policy (Mayblin and James 2019; Zetter et al 2005). These had implications during Covid-19 as social distancing, isolation from networks, and changes in access to service spaces creating barriers to bricolage resources (Jolly et al 2020; Mulvey et al 2020; McBride et al 2020). In addition, the relational dynamics encouraged by precaritisation contributed to violence, exploitation and problematic power dynamics within communities – the "dark side" of social capital and social networks described by Allison (2017, p. 51).

Wellbeing as mental, emotional and relational health
The final theme here relates to the corrosive impacts of the issues above on mental health and emotional wellbeing. These findings provide a qualitative, subjective complement to "risk factor" studies around post-migration stressors (e.g Fazel et al 2012; Hodes and Vostanis 2018; Li et al 2016). In a critical realist perspective, these stressors are not cumulative; rather, they interact in complex ways to influence wellbeing. Time in nonbeing was corrosive, connected to narratives of stress, pressure, distress, and suffering that were seen to impact emotional and psychological resources and practices of care or relationships in the home. These narratives often focused on parents, with a sense that children's experiences were mediated by parenting practices and parents' capacities to resist the pressures of nonbeing – to be a "protective shield" for their

children (Raghallaigh 2018, p. 856). Practitioners connected parental stress to reduced emotional capitals to invest in caring relationships, and to shielding practices that created further negative impacts on attachment, on children's mental health or their relationships. These are similar to ideas of "incapacitated mothering" (Smith and Lockwood 2021, p179), where structural circumstances systematically eroded parents' capacities to parent in ways coherent with their identities. Less visible in these findings was the role of children in contributing to or sustaining household relationships, and this should be an area for future exploration.

Bricolage, agency and the pursuit of liveable life

On reading early analytical work, my supervisors sometimes described feeling like I was repeatedly hitting them over the head – that in trying to state the severity of the issues families faced, I was detracting or undermining my key points. There was also a danger that my desire to highlight the impacts of coloniality and nonbeing would unintentionally recreate them by focusing on narratives solely of vulnerability or victimisation (Wroe 2018). Nonbeing is pervasive but not totalising, and children and parents engaged in extensive work to achieve a degree of wellbeing under adverse circumstances. Indeed, during the study, one family ended years of undocumentedness by receiving leave to remain; their survival reflected their resilience, agency and resistance. These findings support ideas of resilience as a matter of resources (Ungar 2019), limited or corroded by nonbeing and gathered or sustained through welfare bricolage. In bricolage practices, family members sought and secured access to social, cultural, emotional and mobility resources, constructing the means to survive but also to create lives of more than survival, lives that were liveable (Butler 2004; 2009). As Wroe (2018) argues, there should be space to explore *ordinariness*, and the presence of friendship, hope, joy, belonging and care in people's lives. I have tried to make these visible here.

Candidacy, recognition and service dynamics

Research question three asked: "What place do services have in supporting wellbeing under these circumstances?" It is necessary to rephrase this question, as services and service providers had a role in the creation and maintenance of need. A more appropriate question might be: "what role do services have *around* wellbeing needs under these circumstances?" The final research question asked "what happens when families need extra support – how and when do they approach services, and how do services respond?" Through the candidacy framework and recognition theory, the findings in chapters 5 and 6 outlined several themes connecting everyday service experiences to life in nonbeing.

Identification and eligibilities

The most direct link between status and candidacy came through eligibility and direct exclusion from welfare benefits, housing, access to further or higher education and other services. Eligibility issues had broader effects, contributing to feelings of difference, inferiority and exclusion. The *appearance* of ineligibility, like the appearance of illegality was central to service responses and candidates' self-identifications as it suppressed identifications or resulted in inaccurate adjudications (Griffiths and Yeo 2021; York 2018). Fears of deportability, of institutional authority or of refusal, discrimination or hostility made identification and presentation processes of anxiety and distress, suppressing candidacies at each stage. This was amplified by a deliberately complex, opaque system of entitlements and a sense of disorientation for those in new and unfamiliar circumstances, which made it hard for some people to know whether they could or should access services and on what terms. The sense of "being blind" (Maria, parent, asylum applicant) illustrates the anxiety and disorientation here. The recursive nature of candidacy was also evident; past candidacy processes influencing future identifications. While status was not the only influence here, it was a central part of the causal picture for many candidacies.

Practicalities

Navigation, presentation and ongoing engagement with services had practical and instrumental elements where families' limited resources had an impact. Poverty impacted on whether families could meet direct or indirect costs of access, including mobility. Travel was also inhibited by practicalities like access to prams; knowledge of bus routes and local areas; and the time, effort and stress required to go out. Childcare access impacted on whether parents could progress their own candidacies. The ability to access phones, phone credit or the internet was less assured for these families, which again caused issues during the pandemic where remote access to services became the norm (Mulvey et al 2020). In their bricolage practices, families described a range of strategies to overcome practical barriers: relying on friends and networks for childcare; saving money for transport by meeting material needs through services. The question seemed to be around whether the resource costs access and engagement were worthwhile, a calculation influenced by difficulties families faced in other aspects of candidacy.

From cultural to structural competency

One of the central themes here is a critique of "asset-based" approaches to cultural capitals and service responses focused solely on cultural competence (Erel and Ryan 2019; Morrow 1999; Williams and Graham 2014). Some findings did describe the

resources or assets of family members - English language skills, knowledge of rights and entitlements or service availability, aspects of confidence or self-esteem, an understanding of the "social infrastructure" (Frank, volunteer development) or the "rules of engagement" (Sime and Fox 2015, p531). There is a general need to move away from a focus on the assets or deficits of candidates towards a broader understanding of structural influences on candidacy. Cultural and emotional resource distribution is limited by unequal resource distribution influenced by immigration status (Piacentini et al 2019). Language skills could be inhibited by challenges in accessing or sustaining engagement with English classes; the social connections that are crucial for gathering knowledge and information could be inhibited by pressures towards isolation; and the fears and anxieties of nonbeing and its corrosive impacts on mental health impact on confidence and self-esteem.

The candidacy framework also connects these aspects to the institutional habitus of services (Forbes and Lingard 2015; Paterson 2021), and the alignment between families resources and the "implicit mechanisms" underpinning service provision (Mackenzie et al 2013, p. 807). These findings suggest that services excluded the needs and subjectivities of the families in this study, creating barriers throughout candidacy process based on resource inequalities. Some of these related to the cultural capital dynamics above, and whether services addressed barriers related to cultural resources. Others related to structural competence, and whether services recognised or addressed structural aspects of need and structural dynamics in service design, interpersonal encounter and adjudication (Mackenzie et al 2019). Structural competence in permeability means understanding how a bell on a door or a 'formal' office space projects institutional authority, contributing to fear and anxiety; how forms and applications require specific cultural resources or might similarly cause anxiety or concern; or how gatekeeping, referrals, or telephone and online systems can be harder for those without the resources required to engage or persist with them.

Structural competence also has an interpersonal element in how power dynamics, positions and orientations within interactions are acknowledged and addressed (Mackenzie et al 2019). The presence of interpreters was beneficial, but issues of availability, suitability and problematic interpreter practice could be impediments to communication, as in other research studies (Dixon-Woods et al 2005; O'Donnell et al 2007; Piacentini et al 2019). Beyond language provision, communicative orientation was important. Cold, hostile, disdainful and even threatening interactions should be understood alongside within the context of nonbeing as they reproduce and collude with dynamics of misrecognition. Misrecognition through invisibilisation contributed to

feelings of shame, neglect and frustration that had recursive impacts on future candidacies (Houston and Montgomery 2017; Zurn 2015). Friendly, welcoming, warm practice was associated with positive working relationships, improved candidacy dynamics and better service experiences across multiple services. It could reduce fears, anxieties and other barriers to presentation and negotiation, and facilitate aspects of choice and control for those with less control in other aspects of their lives.

Findings here cohere with Dixon-Woods et al's (2005, 152) contention that adjudication is based on tacit rules, categorisations and heuristics. There were examples throughout education, health and social services of needs receiving inadequate responses because of a poor fit between the circumstances of families and the institutional habitus of adjudication in many services. These issues of alignment meant many families' circumstances resulted in refusals, inadequate responses and unresolved candidacies.

Locating problematic practice, persistence and resistance

As with the impacts of deportability, there was a risk in focusing only the negatives of service provision - families framed as vulnerable victims and practitioners as villains and perpetrators within dramatic narratives of discrimination and hostility. Capitals and candidacy perspectives contextualise these issues within institutional habitus and the resource environments of services. Participants described how limited staffing, high caseloads, limited time, and limited emotional resources resulting from stress and strain all impacted on service responses. The idea of the "hassle factor" (Sarah, family support) spoke to the ways in which many services were oriented towards circumstances that did not incorporate the families included here, creating additional work. In addition, adjudication and assessment could be impeded by transience and mobilities, which brought moves between schools, doctors and services, preventing the continuity or relationships required to support disclosure or identification of need. While individual hostilities and opinions had some relevance, local operating conditions were a crucial part of institutional habitus and misrecognition in service responses.

There were also examples throughout the project of culturally- and structurally-competent practice. Parents and children described services supporting access to broader resources; assisting in the navigation, presentation and negotiation of other candidacies; and recognising and supporting core aspects of identity in candidacy processes. Some practitioners framed their work here in humanitarian or universalist terms, and I saw a risk here in depoliticising or missing the specific needs of migrant children (as in Cairney et al 2018). Others described how service providers could gain knowledge and skills or adapt services to account for families' specific needs, whether

alone or in partnership with others. Through practitioner bricolage, practitioners could gather and mobilise their own resources to support positive practice at each stage of candidacy (Pemberton and Doos, 2017).

The final theme here was that persistence had a far greater role in having needs recognised and met than perhaps any other causal factor. Persistence required many resources: cultural capitals and knowledge of rights and entitlements; emotional capitals to advocate despite corrosive circumstances and repeated refusals; and the practical means to make and maintain contact with services. Provider-advocates (Chase et al 2017) had a central role in accompanying people as a source of reassurance or as active advocates whose own resources could support candidacies. These dynamics appeared with such consistency, suggesting that persistence, far more than the existence or assessment of need, was the central causal arbiter in service provision. Families' agencies were also visible where they refused services, engaged partially or on their own terms; people "refuse, reckon with, play with, turn away from, subvert or seek alternatives" to the recognition processes they encounter (Balaton-Chrimes and Stead 2017, pp. 4-5). The active avoidance of exclusionary, hostile and potentially risky services, a reliance on informal networks of mutual support, and practices of resistance, selective engagement, advocacy and persistence all speak to expressions of agency against dynamics of misrecognition.

Policy implications

Chapter 1 of this thesis argued for the need to explore whether devolved policies that appear more inclusive or supportive towards migration in Scotland produce meaningful positive impacts in the everyday (Mulvey 2018). This thesis suggests a complex picture, where influences at multiple scales produce variable outcomes. The apparent distinction between children's policy and immigration policy is less evident in the experiences of these families, and indeed the findings suggest that policy and practice often collude, whether actively or implicitly, with elements of the hostile environment.

The universalist orientation of GIRFEC and the invisibility of migrant children and families in multiple policy strands contributed to an environment where their specific needs and circumstances were not adequately considered. As Amy (family support) argued, policy was geared around "our own people", containing assumptions that were poorly aligned with the needs of families here. Failure to adequately address the specific needs and circumstances of migrant children and families in policy, in the structuring of services and in their practices, risks perpetuating differential humanity and the sense of exclusion in nonbeing. There are several current opportunities in national policy. The increased

attention to migration in the recent destitution strategy and child protection guidance is encouraging (Scottish Government 2021b; 2021c), and the ongoing consultation around the New Scots strategy is an opportunity to increase the visibility of migrant children within families (Rigby et al 2020). Other policy spaces would benefit from inclusion of migration issues and consideration of the candidacy issues outlined here. The expansion of childcare entitlements is an example; a promising policy that needs to be matched with adequate resourcing and removal of the barriers for migrant families. Pupil Equity Funding is an opportunity for local adaptation to migrant children's needs (Chetwynd and Gladwell 2018), although PEF is allocated according to the number of free school meal recipients – a system that families here were ineligible for or struggled to access - and the exclusive focus on poverty limits the focus on other influences on attainment (Forbes and Sime 2016). Increasing the focus on the needs of migrant children and families to counter their invisibility and the issues of universality needs to be matched by sufficient resourcing – in money and capacity; in knowledge, training and education on migration issues; and in the design and structuring of services to support cultural and structural competence and recognitive practice in the everyday.

There are limitations in what devolved policy can achieve within the wider hostile environment. Many of the wellbeing impacts and candidacies here could only be resolved at the scale of immigration policy. Welfare chauvinism and the use of destitution as a deterrent (Guentner et al 2016); narrowing routes to settlement and policies of illegalisation (De Genova 2002), crimmigration (Serpa 2021) and everyday bordering (Yuval-Davies et al 2019); the extended precarity caused by temporary forms of status; and ongoing attempts to restrict access to appeals and judicial reviews are foundational aspects of the causal complex impacting on child and family wellbeing. All indications are that these issues will worsen, broadening the scope of illegalisation, increasing the nature of ontological insecurity, and making life increasingly difficult for those living beyond the increasingly narrow frames of acceptable mobility.

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Appendices

Appendix A: research participants

15 practitioners in 7 third sector organisations, 11 parents and 8 children (aged 5-18) across 7 families participated in the study. The following contextual data is included as a guide to inform the reading of the thesis.

Families:

1. **Anna (mother), Philip (father, Anna's husband) and Kieran (son, 14)** had been in the UK for several years, starting with Anna's visa and Philip and Kieran as dependents. Both parents worked, but the family became undocumented when their visa renewal was denied. They became destitute, moving between friends' and acquaintances, then a hotel and temporary flat paid under local authority NRPF provisions. During the course of the research, the family were granted Limited Leave to Remain.

2. **Jan (father), Maria (mother)** and **Eva (daughter, 14)** are asylum applicants who had been in the UK for a few months at the time of interview. They had been dispersed to Glasgow and were in receipt of asylum support. These interviews were carried out with the support of an interpreter.

3. **Jane (mother), Nicole (daughter, 11) and Jamie (son, 7)** had been asylum applicants for two years and were dispersed to Glasgow. They were living on asylum support. All family members spoke English as a first language. Nicole and Jane consented to participation while Jamie did not.

4. **Abigail (mother) and Ibrahim (son, 3):** Abigail had been in the UK for several years, initially arriving on a visa before becoming undocumented. She lived and was financially supported by her partner (Ibrahim's father) for several years with the promise that he would resolve her status. He left her with status unresolved, and Abigail came to Glasgow, was briefly supported under NRPF provisions and then entered the asylum system. At the time of the research, she was an asylum applicant living on asylum support.

5. **Alan (father), Layla (mother), Huseyn (son, 7), Tara (daughter 9)** had recently been granted refugee status after several months as asylum-seekers. Initially dispersed to asylum accommodation in Glasgow, they were now living in a temporary furnished tenancy and were awaiting permanent accommodation. They were in receipt of universal credit, and interviews were carried out with an interpreter. Both Alan and Layla and Huseyn and Tara were interviewed together.

6. **Jenny (mother)** lived with her partner and their two daughters **(Lisa, 2** and **Yasmin, 1),** both born in Scotland. They had lived in the UK for several years, having been undocumented and supported via NRPF provisions before entering the asylum system and being dispersed to Glasgow. They lived in asylum support accommodation.

7. **Harry (father), Nina (mother), Ricky (11), Mia (daughter, 13).** This family's circumstances were the most complex, involving student visas, work visas, family visas and undocumentedness with NRPF. At the time of our interview, the family were accommodated by the local authority social work department and were living on an obscure benefit provision while they tried to resolve their status. Harry and Nina were interviewed together, as were and Ricky and Mia.

Practitioners: 15 practitioners across 7 third sector organisations participated here. I have attached generic role titles to each to group them together while protecting anonymity. These groupings are based on my own assessment, designed to support a contextualised reading of the data; others may have grouped or labelled them differently.

1. **Donna, Kate, Dee, Pauline, Christine; Sarah, Amy** and **Ariel** were involved in "family support", a title that either reflects their individual roles or the remit of their organisations. This category contains some diversity including practitioners focused on groupwork, those carrying out individual casework, those supporting only asylum-seeking and families and those with a diverse caseload. All worked primarily with parents in their roles

2. **Harris** and **Peter** worked in "community development", carrying out activities focused on inclusion and integration.

3. **Toni** and **Amal** worked in "advocacy" and both worked with minority ethnic communities more widely.

4. **Kate** and **Hope** worked for organisations whose work is best described as "migrant support", but were not exclusively focused on migrant families.

5. **Sam** was a "lawyer", his organisation providing legal advice and support to migrants.

6. **Frank** worked in volunteer development, supporting candidacies for volunteering and education among migrant communities.

Appendix B: information sheets

Information sheet: Practitioners

Getting it Right? The role of children's services with families with precarious immigration status.

Participant information sheet – professionals

My name is Calum Lindsay, and I am a PhD researcher in the Faculty of Social Sciences at the University of Stirling. I am also employed by the British Red Cross Refugee Support service in Glasgow, although this research is being conducted independently of the Red Cross. I have contacted you to see if you are interested in participating in a research project about what happens when refugee and migrant families need additional support for their children's wellbeing. If you have any questions after reading the information sheet, or feel anything is unclear, please feel free to contact me for more information.

What is this study, and why is it being carried out?

In Scotland the current policy system of Getting it Right for Every Child (GIRFEC) aims to create a system of seamless services where children and their families receive the help they need when they need it. There has been limited research on how GIRFEC relates to children and families whose immigration status is insecure, precarious or otherwise unsettled.

The research will use semi-structured interviews to explore how the different people involved in work with precarious migrant families manage the complex dynamics of service provision to build a picture of practice in Scotland. This is an area that has been neglected in research, and one which is important for understanding the current landscape of service provision.

Why am I approaching you, and what would your participation involve?

I am approaching you because I am interested in your experiences in providing services to precarious migrant children and families in your area. I am asking you to participate and to be **interviewed** about your experience working with migrant families. These interviews will be audio-recorded and transcribed. You do not have to take part. You can choose not to participate or to withdraw from the research or immediately after the interview without any adverse effects.

What will happen to the information that you give?

After interviews are recorded, they will be transcribed and then analysed by the researcher. All recordings and documents will be securely stored in password-protected files on the University of Stirling server and deleted from the original recording device, and written notes destroyed after being digitised. While extracts from your interviews may be used in published work, your name and other identifying information will not be used, and every effort made to ensure you cannot be identified. All research data will be stored on a secure server for 10 years after it is last used. After this period expires it will be destroyed.

All information is kept confidential and will not be shared with anyone unless I am worried that someone is at risk. If this happens, I will tell you why I need to pass this on, what I will

say and who I will talk to. This research is funded by Children in Scotland and Social Work Scotland, but the research is being carried out independently of both and neither will have access to your data. This project has approved by the University of Stirling General University Ethics committee. Your data will be managed securely in line with the General Data Protection Regulation.

What are the benefits of taking part in this research study?

By taking part your views will contribute to the growing body of knowledge on how services for children are provided in Scotland. The ultimate goal of the research is to influence policy and practice around the support of children and families with precarious immigration status.

If you would like to take part, or would like more information about this research project, please contact me using the details below. If you have any concerns or complaint about the study you may contact Dr Helen Whincup (PhD Supervisor).

<table>
<tr><td>
Calum Lindsay
Room 3S5
Colin Bell Building
University of Stirling, FK9 4LA
Email: calum.lindsay1@stir.ac.uk
</td><td>
Dr Helen Whincup (PhD Supervisor)
Lecturer, Social Work, Faculty of Social Sciences
Colin Bell Building
University of Stirling, FK9 4LA
Email: helen.whincup@stir.ac.uk
Phone: 01786 467713
</td></tr>
</table>

Information sheet, parents (English)

UNIVERSITY of STIRLING

Getting it Right? The role of children's services with families with precarious immigration status.

Information sheet for parents

My name is Calum Lindsay, and I am a research student in the Faculty of Social Sciences at the University of Stirling. I am doing research into how children's services in your area help families with whose immigration status is not settled. I am approaching you to see if you and your children would be interested in taking part. Please take time to read the following information carefully and discuss it with others if you wish. If you have any questions, or feel anything is unclear, please feel free to get in touch and I can provide more information.

What am I interested in and why?

I am researching how children's services in Scotland, including health, education and social work, work with children and families who don't have settled immigration status. This might include families seeking asylum or who are refugees, families with student visas, families with no recourse to public funds, or have human rights claims. I am interested in finding out what happens when families need extra help, and how families get what they need.

Why am I approaching you, and what would your participation involve?

I am approaching you because I want to find out more about what life is like for families in your situation. I would like to ask about the different people, organisations and services in your family's life. I would also like to ask about some of your experiences of living and raising a family in the UK. These interviews will last 1-2 hours. You do not have to take part. Choosing to take part or not in this research will not affect the services you currently receive. If you decide to take part but then change your mind during or immediately after the interview you can withdraw and this will not affect the services you receive. You won't receive anything for taking part, but I hope that your input will help improve services for migrant families in Scotland.

What will I do with your information?

If you agree the interview will be audio recorded, written up on a computer and stored securely on the University computer system for 10 years. I will write up my research and while some of what you have said may be used in the final written part of the research, your name and other identifying information will be removed. All information is kept confidential and will not be shared with anyone unless I am worried someone is at risk. If so, I will tell you why I need to pass this on, what I will say and who I will talk to. I work for the British Red Cross, but this research is not connected to my work. Choosing not to participate will not affect any current or future help you receive from them or any other organisation. Your information will be kept securely in line with data protection laws and the General Data Protection Regulations. This project has been approved by the University of Stirling General University Ethics committee.

UNIVERSITY *of* **STIRLING**

What happens now?

If you would like to take part, or would like more information about this research project, please contact me using the details below. If you have any concerns or complaint about the study you may contact Dr Helen Whincup (PhD Supervisor).

Calum Lindsay
Room 3S5
Colin Bell Building
University of Stirling, FK9 4LA
Email: calum.lindsay1@stir.ac.uk

Dr Helen Whincup
Lecturer, Social Work CPD team, Faculty of Social Sciences
Colin Bell Building
University of Stirling, FK9 4LA
Email: helen.whincup@stir.ac.uk
Phone: 01786 467713

Information Sheet: older children (English)

UNIVERSITY of STIRLING

Version 1 Date 11/02/2019

Information sheet for children: Your views on the support you receive

Hello, my name is Calum Lindsay, and I am a student at Stirling University. I would like to find out about your experiences of growing up in Scotland, about the people who help and support you and your family, and about the different things that make it difficult for families like yours.

Do I have to take part, and what will happen if I do?

I would like to talk to you about your life, and to hear your views on the help you and your family get from different people. If you would like, you can also help me make a map of the different people that help your family. Each interview lasts about an hour. I'd like to audio record this meeting to help me remember what we talk about.

What happens to the information I tell you?

After our interview, I will transfer the recording to a password-protected computer and will write it up in a big essay. Throughout this process what you tell me will remain confidential, and I will not pass on any information unless I am worried someone is at risk of harm. I would discuss this with you first. While some of what you have said may be used in the final essay, I will make sure you cannot be identified.

What happens now?

If you and your parent(s)/guardian(s) would like to take part, or would like more information about this research project, please contact me. If you have any concerns or complaint about the study you may contact Dr Helen Whincup (PhD Supervisor).

Calum Lindsay
Room 3S5
Colin Bell Building
University of Stirling, FK9 4LA
Email: calum.lindsay1@stir.ac.uk

Dr Helen Whincup
Lecturer, Social Work CPD team, Faculty of Social Sciences
Colin Bell Building
University of Stirling, FK9 4LA
Email: helen.whincup@stir.ac.uk

Information sheet, younger children (English)

An Invitation to Take Part in Research

Hello, my name is Calum and I'm studying at Stirling University. I am a social worker and I'm interested in what help children and families get from other people. I would like to talk with you about the people who help you and your family, and whether you think this help is right for you. I'd like to record our talk if that's OK, but it's OK if you don't want to be recorded.

Calum Lindsay
calum.lindsay1@stir.ac.uk

When we talk, I would like your help making a picture of the things you need, and the people who help you. I won't talk to anyone else about what you tell me unless I'm worried someone isn't safe. If you are happy to talk to me, please tell your Mum, Dad or carer.

It's OK if you don't want to talk, or if you change your mind

Appendix C: Consent Forms

Consent form: parents
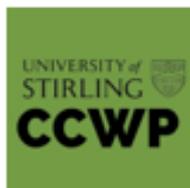
Getting it Right? The role of children's services with families with precarious immigration status.

Consent form for parents/carers

(Please tick as appropriate)

I confirm that I have read the information provided about this project, and have had the opportunity to consider and ask questions about the study. ☐

I understand my participation is voluntary and that I'm free to withdraw from the study before, during or immediately after the interview without giving a reason. ☐

I understand that what I say will be treated confidentially. The only exception to this would be if I say something that raises concerns that someone may be at risk of harm. In these circumstances the researcher will tell me what will be shared and with whom. ☐

I agree to the interview being recorded and then transcribed, and understand that the recording and transcription will be stored securely under the terms of the General Data Protection Regulation 2018. ☐

I understand that neither I nor my child will be identified in any transcription of the interview or reports and presentations of the study findings, and agree to the use of anonymised, small, direct quotes in the study's findings. ☐

I agree to take part in the study:

Name:...

Signature: .... Date:...........................

For further information, please contact Calum Lindsay (researcher):
calum.lindsay1@stir.ac.uk

Parental consent form for children's interviews

SEAMLESS SERVICES?

Getting it Right? The role of children's services with families with precarious immigration status.

I've read and understood the Information Sheet and had opportunities to ask questions about children's participation in this study.

I consent to my child taking part in the study and give Calum permission to talk with him or her.

Name:..

Signature: .... Date:........................

For further information, please contact either:
- Calum Lindsay (researcher): calum.lindsay1@stir.ac.uk

Consent form: practitioners
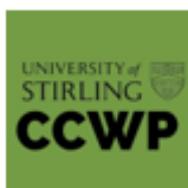
Getting it Right? The role of children's services with families with precarious immigration status.

Consent form for practitioners

(Please tick as appropriate)

I confirm that I've read the information provided about this project, and have had the opportunity to consider and ask questions about the study. ☐

I understand my participation is voluntary and that I'm free to withdraw from the study at any time, including at any point during the interview, without giving a reason. ☐

I understand that what I say will be treated confidentially. The only exception to this would be if I say something that raises concerns that someone may be at risk of harm. In these circumstances the researcher will confirm what will be shared and with whom. ☐

I agree to the interview being recorded and then transcribed, and understand that the recording and transcription will be stored securely under the terms of the Data Protection Act 1998. ☐

I understand that I will not be identified in any transcription of the interview or reports/presentations of the study findings, and agree to the use of anonymised, small, direct quotes from me in these findings. ☐

I am interested in participating in a focus group at a later date. ☐

I agree to take part in the study:

Name:..

Signature: .... Date:.........................

For further information, please contact either:
- Calum Lindsay (researcher): calum.lindsay1@stir.ac.uk

This study has received ethical approval from the University of Stirling. If you have any comments about the study please contact either

Dr Helen Whincup (Primary supervisor): helen.whincup@stir.ac.uk or

Prof. Jane Callaghan (Director, Centre for Child Wellbeing and Protection): jane.callaghan@stir.ac.uk

Consent form: children

An Invitation to Take Part in Research

Would you like to talk to Calum?

Yes ⚫   No ⚫

Is it OK for Calum to record your talk?

Yes ⚫   No ⚫

Calum Lindsay
calum.lindsay1@stir.ac.uk

Would you like someone with you when we talk?

Yes ⚫   No ⚫

If yes, who would you like?

………………………………………………….   Date……………

UNIVERSITY of STIRLING 50 YEARS

-

Appendix D: Data collection tools:

Research schedule for parents

Introduction: Reintroduce myself and interpreter if necessary. Briefly discuss the research topic and confirm interest and any questions before beginning. Explain contingent confidentiality and confirm consent for participation, recording, and procedures for stopping if necessary. Introduce recording device and discuss who will listen to recording, where it will be stored, and anonymity. Ensure signing of consent form. Unpack materials for mapping/diagramming exercise. Last check of questions before we start.

Possible questions: There will be some core questions/issues to cover but a loosely structured and fluid approach to interviews.

Can you tell me about your family's immigration situation – how long you have been in the UK, why you came, what it's been like as a family in the UK?

What are the main things that your child(ren) need(s) to be well/happy?

Have there been times when it has been difficult for you and your family, and you've needed some extra help with the things you need?

Who/what have been the most important sources of help for your family and your children's wellbeing? (mapping/spidergram?)

- Expansion on specific sources: education, health, social work, **other include:**
    o Who helped and how?
    o Have you had any problems trying to get help/support?
    o What happened, and why?

What kind of impact has your/your family's immigration status had on your children/getting what is needed in the past/present/future.

Who/what has helped the most.

What changed for your family since your immigration status changed? How does this affect your children?

What would make life easier for you or for other families who are/have been in your situation? What would make it easier for you to get help? **Or** What changes would you make that might make it easier for families in your situation in the future?

Endings: Thank for participation. Discussion of next steps: speaking to professionals, other parents and children. This will take time, but I will be in contact to let them know

the research findings. Check in on how interviewee is feeling. Provide information sheet on relevant support services (British Red Cross, Govan Community Project, Positive Action in Housing, Social Care Direct). Any last things they want to add that we haven't discussed? If have anything to discuss, how can contact in future? Can they involve other families/practitioners?

Ecomapping tool for children

Introduction: Reintroduce myself and interpreter if necessary. Briefly discuss the research topic and confirm interest and any questions before beginning. Explain contingent confidentiality and confirm consent for participation, recording, and procedures for stopping if necessary. Check whether want anyone with them. If not, agree where parents/guardians will be, how we will let them know when we are finished or if we need them. Introduce recording device and discuss who will listen to recording, where it will be stored, and anonymity. Ensure signing of consent form by parents and children. Unpack materials for mapping/diagramming exercise or for drawing/play while talking. Last check of any questions before we start.

Can you tell me a bit about you, and what you like doing?

What are the important things that you/children like you need to be well/happy?

What are the most important things **you/children like you** need to be well/happy?

- Who/What **influences** these things? Are there things that make it easier/harder?
- **Who** helps you get the things you need? **Who** helps your family get the things they need to be well?
- Are there people/things that make it **harder** to get the things you/your family needs?

What are the important things that your family needs?

Who are the people who help you/your family with these things? (mapping, see below).

Are there some things that make life harder for you/your family?

What would you change to make things easier for your family?

If we go forward in time (2 years/5 years) what do you think you will remember about life just now?

- Going forward in time, what do you think/hope will be different for you and your family?

Anything we haven't talked about/anything missing from the map? Any questions?

- Are there people/things that make it **harder** to get the things you/your family needs?

(From https://mswcareers.com/the-ecomap-a-social-work-assessment-tool/)
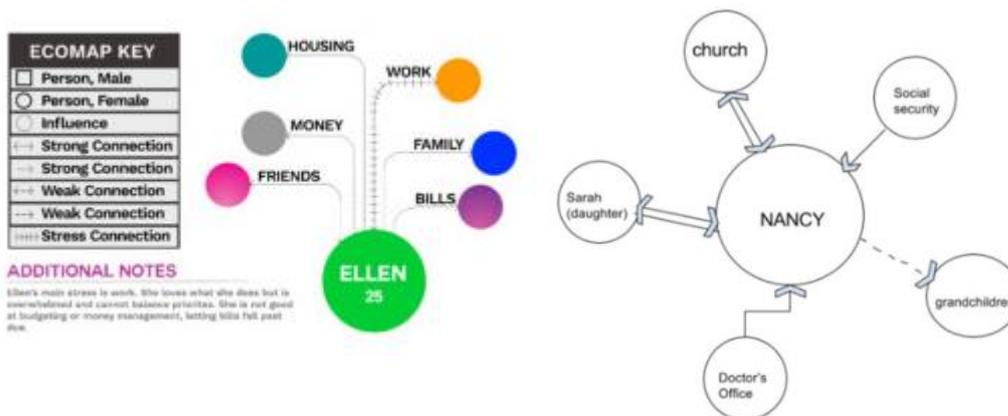
Rather than drawing the maps, I like the idea of having a set of pre-made, laminated tiles in different colours, placed down on a large piece of paper with arrows either drawn between them or also laminated. This allows for some editing, and I could take a photo at the end for the final map. Different types of arrows/connections might include:

- Double lines for **strong, positive** relationships
- Wobbly lines for **stressful/difficult** relationships
- Dotted lines for **distant/weak** relationships
- Arrows for direction of relationship; arrows towards the centre for sources of assistance, arrows towards the periphery if the person feels they also contribute to the relationship (as between "Nancy" and "church" above.
- I'll continue to look at other ways of connecting, but don't want to overcomplicate things.

I'd also like to get a sense of how young people feel they **provide** support, rather than just as recipients, as this has come up in some reading as a potentially important insight. I'll ask questions as we go according to what influences/sources of support or stress come up:

- How do/did they help you/your family? What do they help with?
- How does this stress/support affect you?
- How do you think they could do things differently?

Endings: Thank for participation. Discussion of next steps: speaking to professionals, other parents and children. This will take time, but I will be in contact to let them know the research findings. Check in on how interviewee is feeling. Provide information sheet on relevant support services. Last things they want to add that we haven't discussed? Ask if ready for adult to come back in.

Interview schedule for practitioners

Introduction: Reintroduce myself. Briefly discuss the research topic and confirm interest and any questions before beginning. Explain contingent confidentiality and confirm consent for participation, recording, and procedures for stopping if necessary. Introduce recording device and discuss who will listen to recording, where it will be stored, and anonymity. Ensure signing of consent form. Last check of questions before we start.

What is your role/the role of organisation in working with families with insecure/precarious immigration status? **Or** Can you tell me about the support you provide to children and families with insecure/precarious immigration status?

- What kinds of problems do you usually help with? What kinds of issues do families face?
- What resources are available to you to support families with these issues/problems? **Or** what can you do to support families in these situations? What can't you do?
- What are the challenges that you face in this role?
- What is different between working with families with settled immigration status vs those without?

What are the main things that children/families need to safeguard or promote their wellbeing in these situations?

Do you think families' immigration status contributes to/affects the issues they have?

How does it affect their ability to get help/affects the response from services/affect the help they receive?

What would you change about children's services to make things easier for families with precarious/insecure immigration status who might need extra support?

Ending: Thank for participation. Discussion of next steps: speaking to professionals, other parents and children. This will take time, but I will be in contact to let them know the research findings. Check in on how interviewee is feeling and discussion of any difficulties. Last things they want to add that we haven't discussed? If have anything to discuss, how can contact in future? Can they involve other families/practitioners?

Appendix E: Ethical Approval

UNIVERSITY *of* STIRLING

General University Ethics Panel (GUEP)
University of Stirling
Stirling
FK9 4LA
Scotland UK

E: GUEP@stir.ac.uk

Calum Lindsay
Faculty of Social Sciences
University of Stirling
FK9 4LA

calum.lindsay1@stir.ac.uk

5th March 2019

Dear Calum,

Re: Ethics Application: Getting it Right? The role of children's services with families with precarious immigration status -GUEP 614

Thank you for your submission of the above to the General University Ethics Panel.

The ethical approaches of this project have been approved by GUEP and you can now proceed with your research.

Please ensure that your research complies with Stirling University policy on storage of research data which is available at:
https://www.stir.ac.uk/about/faculties-and-services/information-services-and-library/researchers/research-data/before-you-start-your-research/our-policy/

If you have not already done so, I would also strongly encourage you to complete the Research Integrity training which is available at: https://canvas.stir.ac.uk/enroll/CJ43KW

Please note that should any of your proposal change, a further submission (amendment) to GUEP will be necessary.

If you have any further queries, please do not hesitate to contact the Committee by email to guep@stir.ac.uk.

Yours sincerely,

Pp *Katie Hamilton*
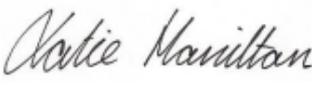
On behalf of GUEP
Professor xxx
Deputy Chair of GUEP

## Appendix F: Ecomap examples
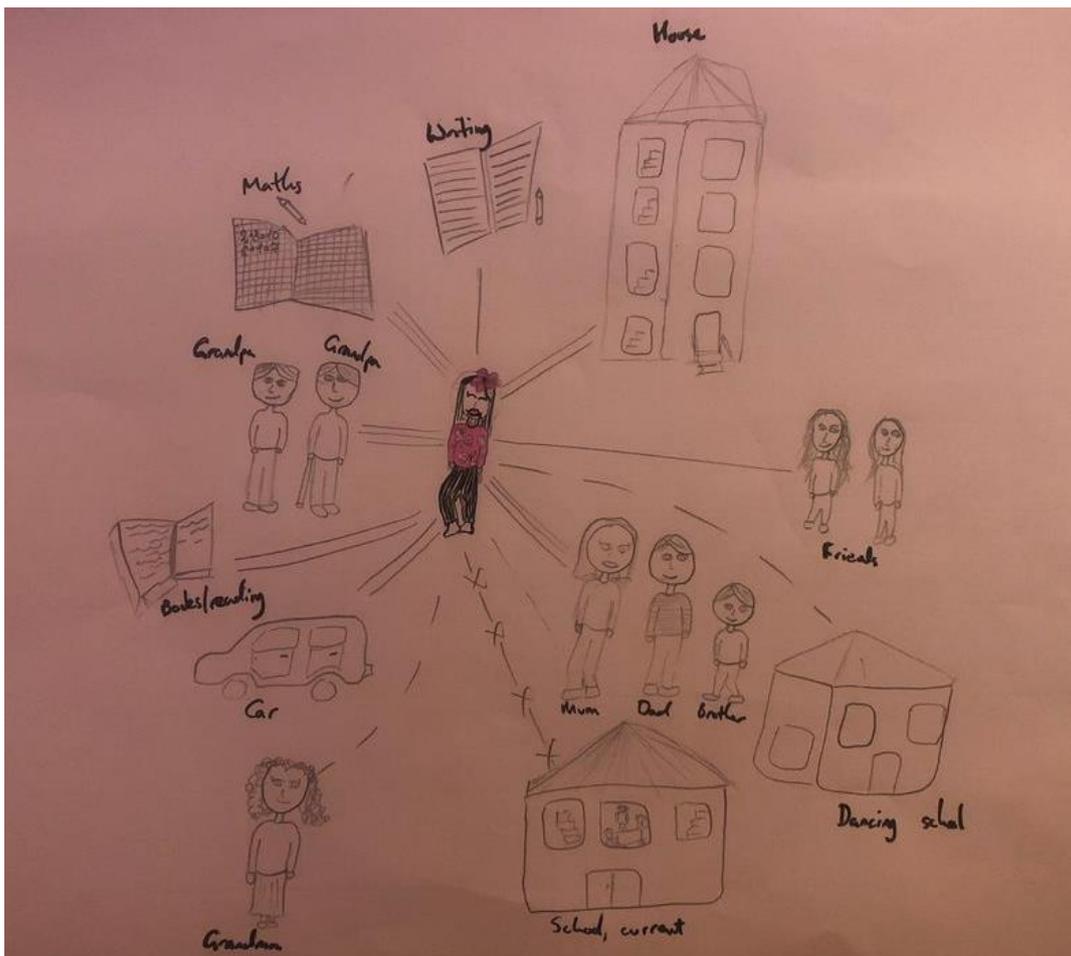
Figure 26: Huseyn and Tara's ecomaps

Figure 27: Kieran's map (above)
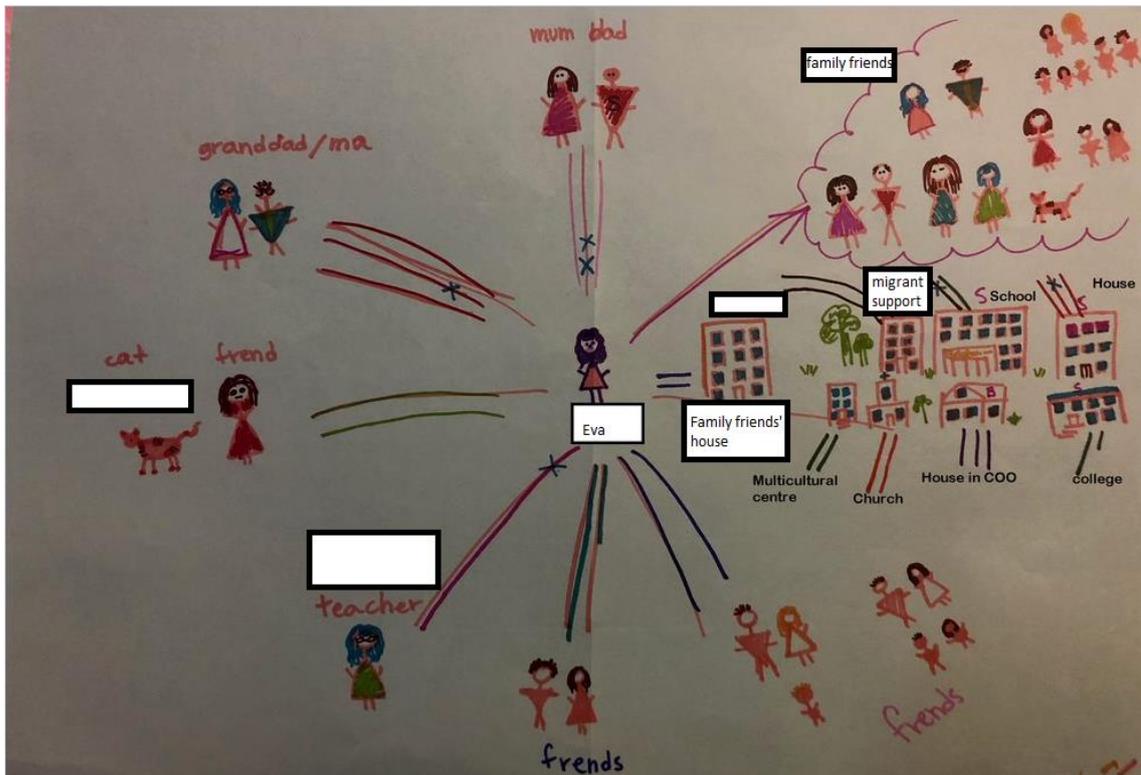

Figure 28: Eva's map (above)
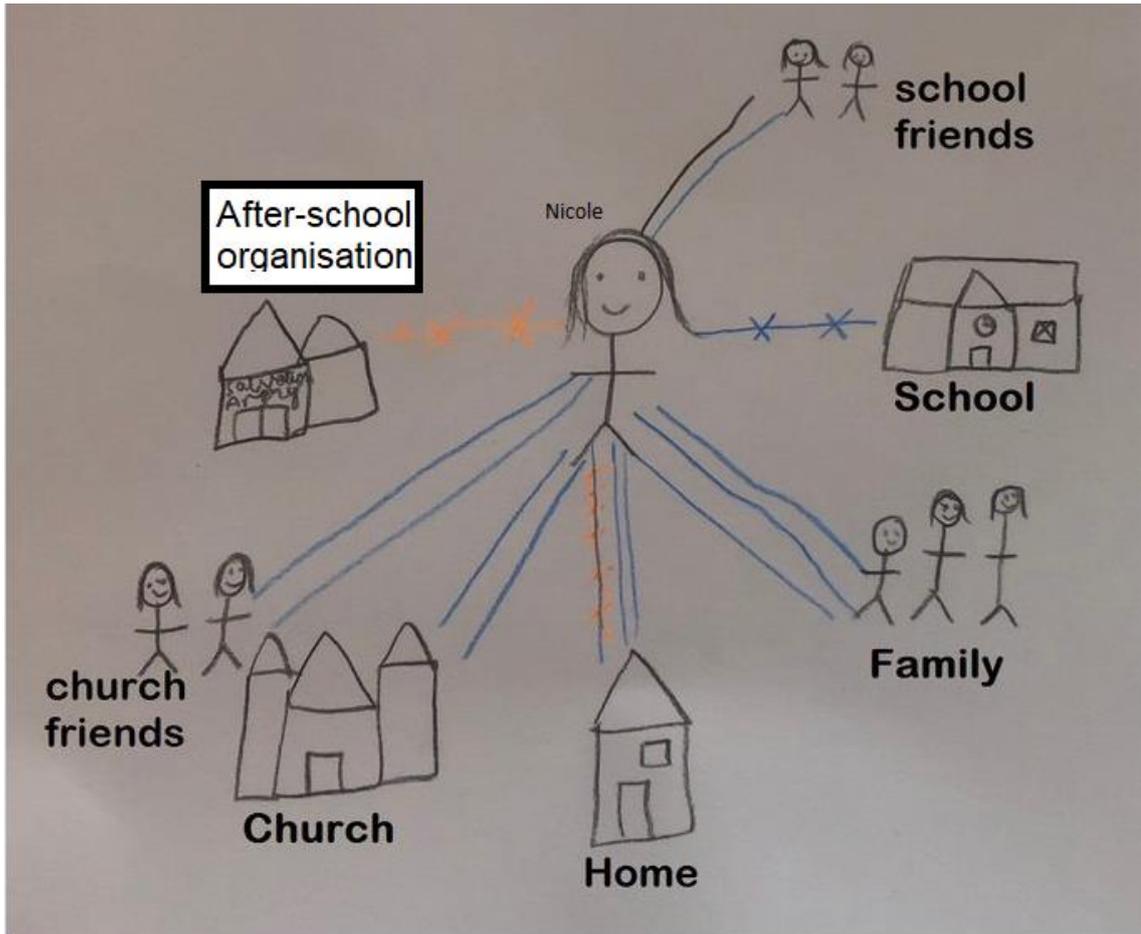
Figure 29 Nicole's map (above)
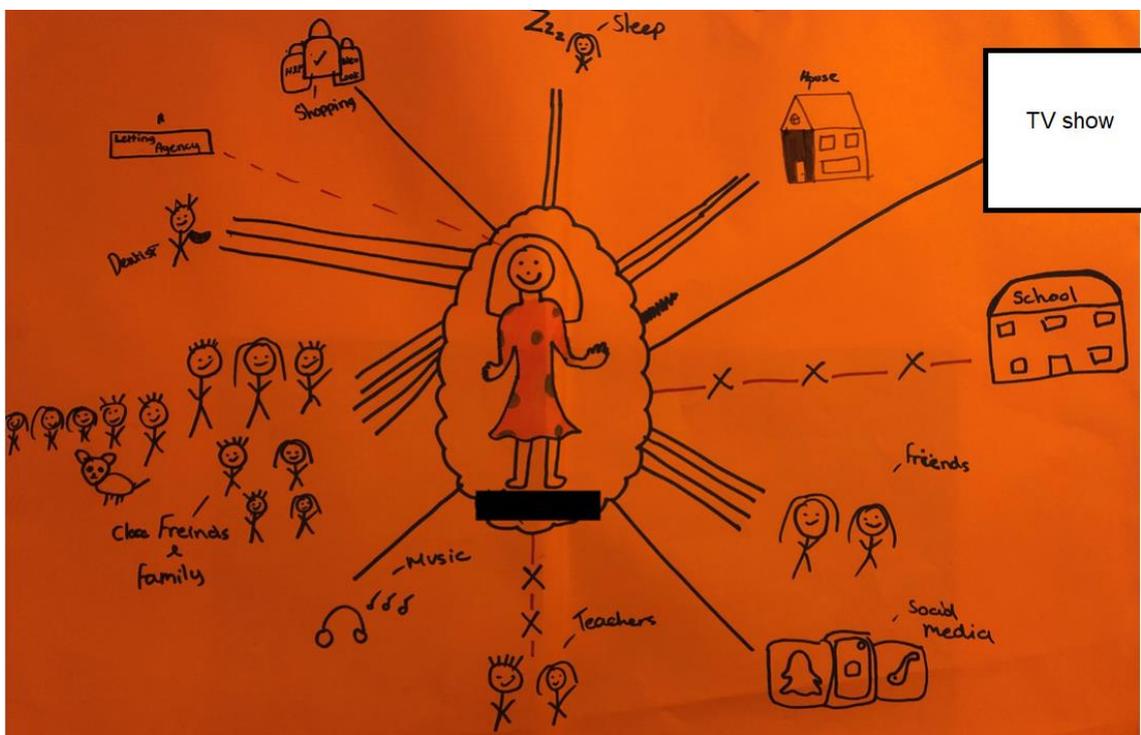
Figure 30: Mia's map (above)
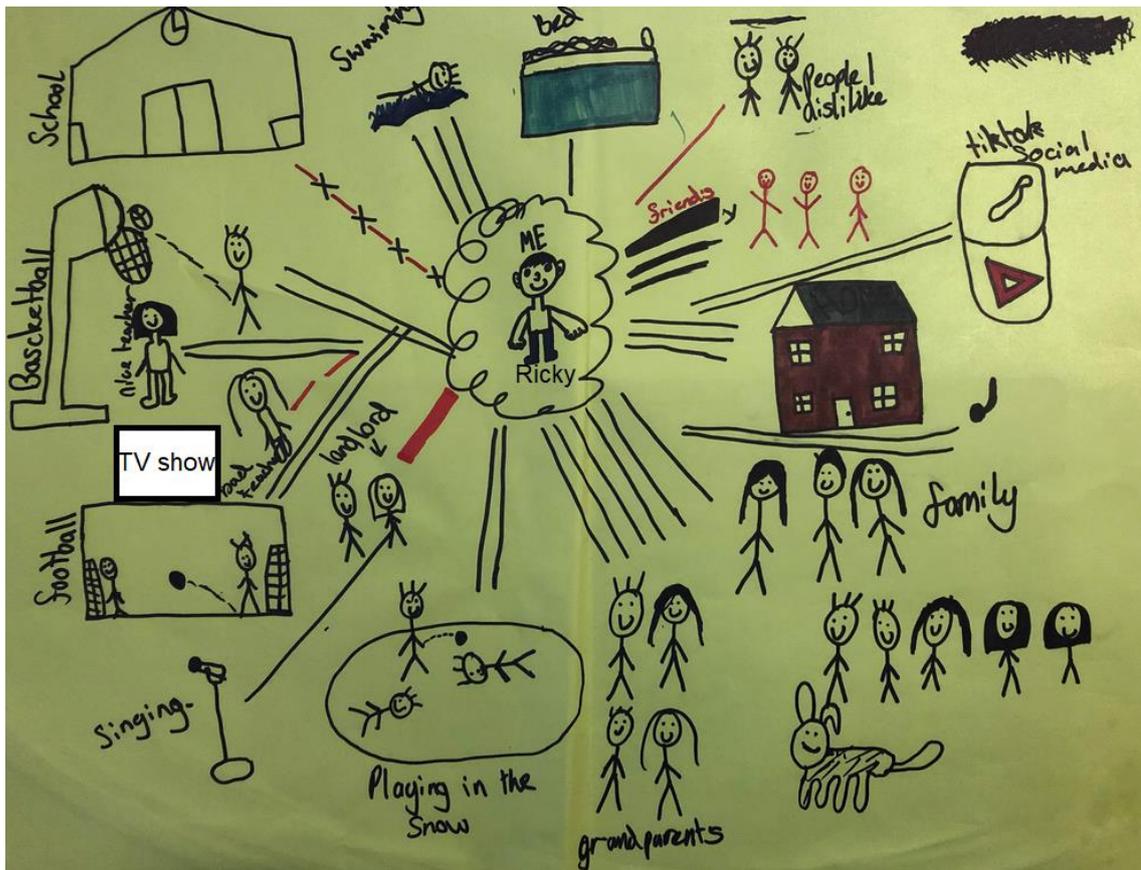
Figure 31: Ricky's map (above)