

Mental health of child refugees is global problem

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An estimated 18 million children worldwide are forcibly displaced as a result of conflict and persecution.

(Medical Xpress) -- A recent two-part study, published online in the *Lancet*, highlights the urgent need for high-income countries and international agencies to contribute towards the funding of interventions to tackle the significant unmet mental health needs of some of the world's most vulnerable children.

An estimated 18 million <u>children</u> worldwide are forcibly displaced as a result of conflict and persecution. Most of these children remain within or near their country of origin; and each year only half a million seek asylum in high-income western countries. Although low-income and middle-income countries take in most of the world's refugees, research has focused mainly on those who have resettled in wealthier countries.



Catherine Panter-Brick, professor at Yale University, and researchers from Oxford and Harvard universities reviewed the evidence for the risk and protective factors that affect the <u>mental health</u> of children forcibly displaced to low-, middle-, and high-income countries.

The increasingly restrictive asylum immigration policies of many highincome countries are leaving less affluent countries to cope with large numbers of displaced children without the necessary resources to prevent poor mental health outcomes. Prolonged bureaucratic asylum processes in wealthier countries also are having negative effects on children's mental health.

"High-income countries need to take responsibility for developing and evaluating effective interventions," Panter-Brick said. "It is vital to clarify which risk and protective factors are truly predictive of mental health problems, and assess which social, economic and legal policies are most effective in alleviating this avoidable and very unnecessary burden."

The research highlights the negative post-displacement impact of frequent moves, prolonged bureaucratic delays, or legal and social marginalization on children resettled to foreign countries. The study concludes that, since mental health problems originating in childhood and adolescence are often long lasting, high-income countries must implement immigration, health-care and social policies that support family units, and keep adverse consequences for child health and development to a minimum.

Provided by Yale University

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