The health of refugee children – Position Statement

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The demography of refugees changes from year to year as the Australian and New Zealand governments, in collaboration with UNHCR, offer resettlement places to refugees from different regions. The majority of refugees now settling in Australia and New Zealand come from African countries such as Sudan and Liberia, with a sizable minority from the Middle East, Afghanistan and Burma. Since 2003-2004, Sudanese refugees have constituted the highest single group of refugees settling in Australia.

Everyone has the right to seek and enjoy in other countries asylum from persecution.
Article 14, Universal Declaration of Human Rights (signed by member countries in 1948, including Australia and New Zealand)
The child shall have the right to adequate nutrition, housing, recreation and medical services.
Principle 4, United Nations Declaration of the Rights of the Child. Proclaimed by General Assembly resolution 1386(XIV) of 20 November 1959

Most refugees adapt successfully to life in Australia and New Zealand, despite traumatic pasts and settlement challenges. Some asylum seekers face extra challenges due to government policies that restrict access to work rights and national health insurance. Refugee children and young people are recognised as having had special needs. The RACP supports the provision of multi-agency support both early, after resettlement and over the longer term to ensure that refugee families can optimise their potential in Australian and New Zealand society.

In May 2007, the RACP launched the refugee child health policy –“Towards better health for refugee children and young people in Australia and New Zealand”.

What your Fellows say about better health for refugee children and young people in Australia and New Zealand

Better health services
- All health services need to be enhanced in order to address the complex health needs of refugee children, young people and their families.
- Health care for refugee children should include adequately funded public services, with a mixture of targeted and mainstream services, and with access independent of visa status.
- All refugee children settling in Australia or New Zealand should have access to comprehensive health assessments post arrival (addressing physical and psychosocial needs) and appropriate follow-up care.
- Professional health care interpreters should be available and used to facilitate communication with refugee families who are not fluent in English.

High level research and data collection
- All agencies involved in refugee child health should promote research and the collection of data to develop an evidence base for the provision of optimal health care.
- All such research should encourage participation of refugees (including children and young people).
- All refugee policy workers and researchers should collaborate to address specific research questions that will inform future policy and practice in refugee child health, including long-term health outcomes and cost-effective service delivery models.

College training commitments for Fellows
- The College consider training in refugee health, multicultural health and human rights approaches to health as a way to improve the quality of services for refugee populations.
- The College promotes continuing professional development for Fellows in cultural and linguistic competence (including working with interpreters), human rights and advocacy for disadvantaged groups, and the provision of regular opportunities for professionals to update these skills.
- The College supports the establishment of training Fellowships in Refugee and Multicultural Health to build capacity and expertise in the workforce.

Physician practice
- Individual Fellows have a respected role in the community and an important voice in advocating for their patients and for refugee communities.
- Individual Fellows should be informed about the specific physical and mental health problems faced by refugee children and youth, the appropriate screening assessments and management issues pertaining to health problems, as well as local health and welfare services available to assist refugee families.

The RACP policy document and other important weblinks are now available on the RACP website (www.racp.edu.au).