

Dear Chairs and Committee members,

**RE: Legislative Consent Memorandum for the Nationality and Borders Bill**

Thank you for the opportunity to contribute to your scrutiny of the above.

We welcome the rights-based approach being taken to understanding these issues in Wales and the careful analysis of whether these proposals are in compliance with provisions within the UN Convention on the Rights of the Child to act in the best interests of children; and any potential impact on areas of devolved competence where there are now established ways of working based on approaches informed by the UNCRRC.

As Officer for Wales at the Royal College of Paediatrics and Child Health (RCPCH), which is the membership body for paediatricians, I will comment primarily on the issues around age assessment of Unaccompanied Asylum Seeker Children.

We have published [guidance for paediatricians](#) on Refugee and unaccompanied asylum seeking children and young people which aims to support paediatricians in the assessment and management of children and young people of refugee background. I note that the Welsh Government's [Unaccompanied asylum seeking children: age assessment toolkit](#) references this guidance in its list of guidance and best practice documents. Please note that at the time of writing, we are reviewing this guidance and may update the guidance over the coming weeks, in which case we will let you know. Drawing upon this guidance, I would highlight a number of principles to Committee members:

**Overview of RCPCH position on age assessments**

- Most refugee children and young people will not have a passport, although some may be given a passport to help them to leave a situation where they are at risk.
- Sometimes a child's stated age may be disputed, with serious implications for the outcome of their asylum claim and for their ability to access health services, education and welfare support.
- There are considerable risks to children who are identified as adults. However, it is also true that adults wrongly identified as children may pose a risk to the children that they then subsequently encounter.

**Proposed methods for conducting age assessments**

- There is no single reliable method for making precise age estimates.
- The use of radiological assessment is extremely imprecise and can only give an estimate within two years in either direction. The use of ionising radiation for this purpose is inappropriate.
- On this basis, it is a concern that Clause 51(2)(a) suggests "examining or measuring parts of a person's body, including by the use of imaging technology" as a possible scientific method for making an age assessment.
- Paediatricians should not need to be involved in age assessments as they won't add any further information to the process.
- It is important for paediatricians, if contacted, to explain that dental x-rays, bone age and genital examination will currently not add any further information to the assessment process.

My thanks once again for the opportunity to add a paediatric perspective you your scrutiny.

For further discussion of any of the points made above, please contact

With kind regards,

RCPCH Officer for Wales