

PathFinders Limited

Oral Submission

to

**The Hong Kong SAR's Legislative Council's
Subcommittee on Children's Rights
"Rights of Refugee Children"**

Monday, 24 July 2017

Good morning. My name is Tomasz Zawada. I represent PathFinders;

From inception in 2007 to date, we have helped over 4,600 babies, children and their migrant mothers in Hong Kong;

In 2016, 52% of PathFinders' Indonesian clients had pending non-refoulement claims under the Unified Screening Mechanism (USM). They seek asylum for themselves and their children mainly because they are scared of the social stigmatization and discrimination they might face back in Indonesia, a deeply conservative country, for being a single mother with a mixed-race child;

In PathFinders' experience, refugee children face a myriad of problems and difficulties from the day they are born. These range from obtaining their birth certificates, to going to school, to seeing a doctor.

PathFinders is currently involved in a case concerning a former Foreign Domestic Worker, her boyfriend and their Hong Kong-born baby girl. The parents come from different countries and are both USM claimants. Both parents are drugs users. Consequently, the baby was born with serious developmental defects. She requires close care and a long-term plan for her future - and yet both parents are absent and incapable of caring for her;

The baby's immigration status is highly determinative of what will happen to her. However, her immigration status is attached to that of her parents. She does not have an independent USM claim or representation in respect of it. The baby languishes in institutional care. No permanency plan has been made. In effect, the baby will remain in care until the parents' claim(s) is determined and yet, there is no timeline on how long that might take;

In PathFinders' experience, the solution implemented by the authorities in such cases is to deport the baby to a country she does not know, to live with people she has never met, in a foreign language and culture and in a place where the social and medical facilities and support she desperately needs are likely unavailable;

We make 4 recommendations:

1. Assess children’s USM claims in their own right, independent of and unattached to the claims of their parent(s) and with independent advice and representation;
2. Make the welfare of the child the paramount consideration when assessing their USM claims;
3. Lower the costs and increase the efficiency of birth certificate applications for USM-claimant children, in compliance with UN guidelines;
4. Improve access to education for USM-claimant children and expand the education-related funding available to them; and
5. Make it easier for USM-claimant children to access General Out-Patient Care services at hospitals.

Thank you.