

AT EMN NCP Conference

**«The establishment of identity in the
migration process»**

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Age assessment in Norway: present practices and research results

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Why age assessments of UAMs in Norway?

- **Children < 18 years should not be treated as adults** according to
 - International conventions
 - Norwegian legislation
- **Adults > 18 years should not be treated as children**
- **Many asylum seekers, including UAMs, cannot credibly document their ID, including their age/date of birth**
- **To exercise your rights in the Norwegian society you need to have a date of birth**
 - All relevant PINs include the date of birth

Date of birth determination for asylum seekers

- **With credible ID documentation:** date of birth is known
- **Without credible ID documentation:**
 - Adults and accompanying children:
 - Year of birth corresponding to stated age
 - Month and day of birth = month and date of asylum application
 - Unaccompanied minors:
 - Year of birth corresponding to estimated age
 - Month and day of birth = month and date of asylum application

Age estimation for (claimed) UAMs without credible ID documentation

- **Stated age/date of birth:** may be accepted
- **Report from medical age assessment,** carried out by independent medical specialists
- **Other relevant information available,**
 - submitted by appointed guardians, staff at reception centres a.o.
 - emerging during asylum interviews
- **Decision on date of birth is taken together with decision on the need for protection**
 - The decision on date of birth makes use of all available information

Medical age assessment: normal procedure

- 1. X-ray image of least active wrist to determine skeletal development:** manual examination using Grylich-Pyle atlas development stages
- 2. Dental X-ray and clinical dental examination:** using Liversidge and Haaviko tables to determine development stage, and clinical experience from working with children of known age
- 3. Summary report to UDI based on independent reports from 1. and 2.,** prepared by experienced paediatrician

Summary report to UDI from medical age assessment

- **Estimated age** expressed in full years until 20 years of age
- **Compability with stated age** (ruled out, very unlikely, unlikely, likely)
- **Probability of UAM being under 16 or 18 years:**
 - **A: certain to be over 18**
 - B: very unlikely under 18
 - C. Unlikely under 18
 - D: doubt
 - **E: under 18**
 - **F: certain to be above 16**
 - G: very unlikely under 16
 - H: unlikely under 16
 - I: doubt
 - **J: under 16**

Medical age assessment: simplified procedure

Introduced to cope with the dramatic influx of (claimed) UAMs in the fall of 2015

- **Wrist X-ray**
 - **If wrist X-ray indicates age > 18 years -> normal procedure**
 - **If wrist X-ray indicates < 18 years -> assess this result with other available age relevant information**
- **Make decision on age and date of birth**

Claimed UMAs in 2015 by type of medical conclusion about age, and percent decided by UDI to be < 18 years old.

Medical opinion	Total number	% < 18 years
A: > 18 certain	129	4
B: > 18 almost certain	146	10
C: < 18 not likely	84	76
D: doubt whether > or > 18	107	95
E: < 18 likely	370	99
Not medically assessed	671	93
Total	1507	78

FOUALDER: Research activities to improve age assessment methods

Background:

- Everyone complains about the methods, but no one does anything to improve them
- UDI invited research groups to propose projects to develop
 - improved methods for measuring the physical developments of a child or young adult,
 - improved methods for assessing and determining his/her chronological age on the basis of such measurements,
 - an improved basis for such assessments, and in particular whether s/he is older or younger than 18 years of age

FOUALDER activities

- ***WP1: Better understanding of combined data, impact of changing data capturing unit and using computer assisted interpretation of X-ray images***
- ***WP2: Better understanding of dental variations between groups at different ages***
- ***WP3: Exploring computer assisted analysis of MR images of skeletal development***
- ***WP4: Further development of new methods.***

WP1: Some results

- Same result from teeth and bone examinations in about 80 percent of the cases
- The results from the wrist bone examinations did not change significantly when the examining institution was changed, but
 - While there was no difference for the girls in the degree to which age assessment based on bone and teeth agreed (79 %) this agreement was above 85 % with the first wrist bone examiner and above 75 % with the second.
 - The change in the degree of agreement for boys may have been related to a different age and ethnic composition of the boys examined by the two examiners.
- Manual and automatic examination of the same X-ray wrist images agreed on the conclusion on whether the person was above or below 18 years of age in above 90 percent of the cases.

WP2: Some facts about the reference group for teeth development

- The mean age observed for each of the molar development stages was about one year higher with each higher stage observed, for both males and females, for both molars and for all ethnic groups.
- The average age for the next to highest stage (stage 14) observed for the 3rd molar (wisdomtooth) was higher for females than for males in all ethnic groups, but lower for the 2nd molar.
- 8 % of the youngsters with the 3rd molar at the highest stage (fully developed) were below 18,5 years of age.
 - Minor ethnic differences and by sex, except for UK Europeans (10 % (m) v. 4 % (f)).

WP3: some results

- Manual and automatic procedures for analysing MR images of wrist development agreed for 47 boys
- For 7 boys the automated procedure arrived at a higher development stage
- For 8 boys it arrived at a lower development stage
- The result for the automated procedure was never more than one stage higher or lower than with the (original) manual procedure.
- The automatic procedure developed managed to give development stage estimates with the same precision as the manual procedure, indicating that the suggested approach has a potential for automatic bone age estimation from MR images

WP4: Some results

- Established a platform for further research in this field, by preparing and developing one or more PhD programs to collate these findings and establish a unified holistic approach to estimate age from teeth and bones and quantify the uncertainty in age estimation.
- A literature review and initial exploration of alternative dental were prepared.

Possible follow up of FOUALDER results

Discussions will take place between UDI and its partners in age assessment to determine whether there is a basis for e.g.

- Modifying the manner in which the results are presented to UDI case officers, to better communicate a likely age and the precision in the age assessment
- Making use of more automatic methods to interpret the X-ray images of wrist and/or teeth development
- Using other parameters than development stages when interpreting the images (estimating chronological age from them)
- Initiating and seeking financing for new R&D projects in this area, preferably in cooperation with other countries and other interests

Thank you for your attention

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Further information about FOUALDER can be found on <https://www.nr.no/en/projects/development-improved-methods-or-basis-medical-age-assessments-minors-and-young-adults>

Reports from the project will also be made available there.