

Section 9. Safeguards for children and applicants with special needs

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vulnerability

EU legislation contains provisions to address the special needs of applicants who may be considered particularly vulnerable in the asylum system. These provisions ensure that applicants in a vulnerable situation receive adequate support to benefit from their rights and comply with the obligations which are defined under CEAS so that they can be on an equal footing with other applicants.

The concept of vulnerability is present across the legislative instruments under the Pact, obliging authorities in Member States to swiftly identify and follow up on potential special procedural and reception needs. The assessment of special needs must start as soon as possible and be completed in 30 days, after which an applicant’s situation is to be monitored throughout the asylum procedure. The assessment is individualised and undertaken by staff who must be qualified, specialised and continuously trained. If needed, the process is assisted by an interpreter.

The best interests of the child must be the primary consideration of national authorities when applying the Pact instruments, in all decisions that affect a child. Applicants must receive information within 3 days about their rights, obligations and consequences of not complying, with consideration given to their special needs and the help of an interpreter provided by the authorities when necessary.

For children, the information must also be available in a child-friendly format. A representative is appointed as soon as possible within 15 days for unaccompanied children for the entire procedure. The representative is a natural person who must be qualified and trained, may be in charge of a sest number of children and has specific tasks identified under each piece of legislation. As a rule, children are not detained. When detention would put an applicant’s physical or mental health at serious risk, they should not be detained either.

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While the Pact introduced strong safeguards for the swift identification of and support for applicants with special needs, one of the main challenges for EU+ countries remains the operationalisation of these measures. In the screening stage, national authorities are required to conduct preliminary health and vulnerability checks within 7 days and ensure adequate and timely follow-up. Based on the newly-developed screening toolbox, the operational testing of screening started in October 2025, with funding provided by the European Commission, the EUAA and Frontex.460

At the national level, several asylum authorities focused on capacity-building by training staff. With several stakeholders involved in the identification of and support for applicants with special needs, training was often provided to a range of professionals, for example police officers in Croatia461 or lawyers and social workers in Bulgaria.462 As part of an AMIF project on vulnerabilities and special procedural needs, the CGRS refined its practices, created new practical information sheets for case officers and developed a train-the-trainer programme about its implementation. It also organised several information sessions and workshops for case officers on understanding vulnerability.

Strengthening cooperation among stakeholders was another key objective in many countries. The MIGRA information system in Slovakia, used jointly by the Migration Office and the Border and Foreign Police, was updated to include official documentation on vulnerabilities and the person's social situation. Through the system, competent staff can access up-to-date information and exchange information rapidly with all stakeholders. In the Netherlands, the IND started a pilot project to allow additional stakeholders, such as COA employees and lawyers, to request a priority assessment of cases involving highly-vulnerable applicants. Romanian authorities were working on improving their identification and referral mechanism as part of the operational plan with the EUAA, based on the EUAA's vulnerability toolkit.

The Spanish government approved amendments to implement urgent measures to guarantee the best interests of children and adolescents "in situations of extraordinary migration contingencies".463 Under the measures, an autonomous community hosting triple the number of unaccompanied minors than its ordinary capacity can request the government to activate a relocation mechanism, establish criteria for the relocations and provide funding for ordinary capacity in the reception system. To alleviate pressure on the reception system of the Canary Islands, internal instructions were issued to prioritise applications from unaccompanied minors. Focusing on long-term perspectives for unaccompanied children, the EU-funded CO.A.ST project promoted closer collaboration between guardians and legal professionals to ensure strengthened support for unaccompanied children as they transition into adulthood.464

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In 2025, 22,000 asylum applications were lodged by self-claimed unaccompanied minors, approximately one-third less than in 2024 and the least since 2020. Despite recording the largest absolute decline, Germany continued to receive the most (4,100 applications), accounting for almost one-fifth of the total *(see Figure 14).* Germany was followed by the Netherlands (3,600), Italy (3,400) and Greece (3,100). Among these top receiving countries, only Italy recorded an increase in applications by unaccompanied minors in 2025. In fact, applications there rose by two-thirds to the highest level in 7 years. On a smaller scale,

applications by unaccompanied minors also rose sharply in Poland (480) and Latvia (210), where they reached unprecedented levels. In Poland, this was mainly due to more Ukrainians and to a lesser extent Belarussian unaccompanied minors applying, while in Latvia they were almost exclusively Somalis.

Five nationalities accounted for more than one-half of all asylum applications lodged by unaccompanied minors in 2025, namely Afghans (2,800), Eritreans (2,400), Egyptians (2,300), Somalis (2,300) and Syrians (2,100, the least on record). Previously, Syrian and Afghan unaccompanied minors topped the list, however their applications dropped sharply in 2025, as well as those by unaccompanied minors from Egypt. Conversely, applications by unaccompanied Eritrean minors almost doubled and were the most since 2015 on account of a sharp increase in the Netherlands. In far smaller numbers, applications by unaccompanied minors from Mali (880, mainly in Spain), Peru (700, almost all in Italy), Ukraine (450, more than half in Poland) and Sudan (440, mainly in the Netherlands and Greece) all rose substantially in 2025 and were at the highest level since at least 2014.

Figure 15. Top 10 EU+ countries receiving applications by self-claimed unaccompanied minors, 2025 compared to 2024 and share of applications lodged by the main citizenship of unaccompanied minors, 2025

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Source: EUAA EPS data as of 3 February 2026.

Asylum authorities continued to review their laws and policies for multidisciplinary age assessments, as required under the APR and in line with the EUAA's practical guide published in 2025.[465] In Spain, the reform of the age assessment procedure was proposed, changing it from an administrative to a judicial process.[466] In practice, Fundación Cepaim observed delays with the age assessment procedure, often prolonging access to the asylum procedure.[467] The Cypriot Asylum Service drafted a manual and standard operating procedures on multidisciplinary age assessments, with support from the EUAA.

In Greece, a joint ministerial decision established a new framework for age assessments, whereby instead of a cascade approach using different methodologies, three different methods must be implemented on the same day.[468] Civil society organisations expressed concern about this approach and noted that non-medical approaches must be given priority and the *in dubio pro minorem* principle must be respected.[469] An application was filed by one of the organisations for the annulment of the legislation with the Council of State.[470]

Legislative amendments formalised the practice that the Maltese AWAS must carry out an age assessment for certain categories of foreigners when there is doubt about their age, including for applicants for international protection, people considered for resettlement and humanitarian admission, relocated applicants and beneficiaries of international protection, and people disembarked after a search and rescue operation.[471] Following the ECtHR judgement in *F.B.* v *Belgium*,[472] a series of judgments in Belgium addressed the reliability of and safeguards for age assessments, especially on the need to give express consent to medical age assessments,[473] as is required under the APR. From 25 April 2025, the Guardianship Service amended its

procedure to comply with the ECtHR judgement: the Guardianship Service verifies age by examining all evidence in the file from the interview and, in the event of persistent doubt, by a medical examination as a last resort. Consent for the medical examination is always sought from the applicant.

Several EU+ countries were faced with an insufficient number of legal guardians who are appointed for the care and support of unaccompanied children.474 The EU-funded GuardianXChange project continued to strengthen guardianship services in the four EU+ countries involved (Belgium, Poland, Portugal and Slovenia).475 In Bulgaria, UNHCR proposed the establishment of a national working group to assess different guardianship models and find the most suitable solution for the country.476 The rules on remuneration and the reimbursement of costs for statutory representatives of unaccompanied minors were amended in Slovenia, increasing the remuneration for representatives and clarifying the criteria and procedures for claiming remuneration and reimbursement.477

Unaccompanied children in Slovakia are now entitled to free legal aid also during the procedure at first instance. Previously this was available only during the appeal stage.478

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With the revised EU Anti-Trafficking Directive to be transposed by July 2026, EU Member States implemented various projects and training for the prevention of trafficking in human beings and better identification of victims.479 EMN published a study which identifies several areas for improvement, such as strengthening existing institutional structures, better coordination, more robust financial investigations related to trafficking networks and addressing issues of trafficking in the digital space.480 ECRE's policy note offered recommendations on adopting gender-sensitive laws and policies throughout the ongoing legislative process, highlighting the need for clear safeguards for the non-punishment and non-prosecution of trafficking survivors for acts they may have been forced to do.481

Since the presentation of the Pact proposals, several stakeholders expressed concerns about the potential negative impact of the changes on applicants with special needs throughout the asylum procedure.482 As the legislative process is ongoing at the national level, those concerns often re-emerged in the national context through comments on the law proposals.483

Academia provided insights for a fairer treatment of applicants with diverse sexual orientation, gender identity and expression, and sex characteristics (SOGIESC) in the asylum procedure.484 The new legal framework on safe countries of origin raised special concern by LGBTIQ advocacy groups.485

Many initiatives focused on better support for applicants with special needs in reception. In Cyprus, the competences for the reception of unaccompanied children were transferred from the Deputy Ministry for Social Welfare to the Deputy Ministry for Migration and International Protection, and the Cypriot Asylum Service was designated to take over the operation and management of unaccompanied minor shelters from the Welfare Services. In Greece since January 2025, the Reception and Identification Service (RIS) can undertake the full registration of unaccompanied minors in the RICs of Malakasa and Diavata, without having to refer them for

this purpose to the competent asylum offices. In addition, several projects in Greece were launched or continued to be implemented to support children and victims of domestic violence, including training organised by RIS in thematic areas related to vulnerability, child protection, gender-based violence and the prevention of sexual exploitation.[486] Following consultations with its staff in the field, and other stakeholders with relevant expertise (including the National Centre for Social Solidarity), RIS updated its guidance on the identification and management of cases of human trafficking. In addition, RIS issued new guidance for its staff on how to respond, depending on their role, to cases when residents have expressed the intention to harm themselves or others.

The Bulgarian SAR launched a pilot project providing specialised social services in four municipalities. [487] Fedasil in Belgium concluded several AMIF-funded projects, for example on child-friendly reception centres,[488] LBTIQ+-friendly reception and a restorative approach, and a new reception centre opened for applicants with special medical needs at the beginning of 2026. [489] COA and COC Netherlands renewed their partnership to strengthen safety and inclusion for LGBTIQ+ applicants.[490] ECRE analysed the potential of the recast RCD 2024 to strengthen the protection of women and girls in reception.[491] Civil society organisations continued to deliver crucial services to support applicants, either as a service provider contracted by national authorities or through initiatives funded through the EU, international or private funds.[492]

Despite ongoing efforts, inadequate conditions and insufficient support persisted in several EU+ countries,[493] for example due to the lack of resources[494] or gaps and delays in funding. [495] Following the change to use more collective accommodation centres instead of small-scale housing in Sweden, the Swedish Federation for Lesbian, Gay, Bisexual, Transgender, Queer and Intersex Rights highlighted the potential negative impact on applicants with diverse SOGIESC, who may be at more risk of harassment and harm.[496] The Refugee Law Clinic at the Justus Liebig University reports that on several occasions applicants told them that their cancer treatment was paused while waiting to be transferred to another federal state within Germany or to another EU+ country under the Dublin III Regulation.[497] The French National Assembly concluded in its inquiry report that foreign unaccompanied children often received lower quality support than other children in the child protection system and urged for measures to ensure that they benefit from equal treatment.[498]

Concerns about the detention of persons with special needs, especially children, continued to be voiced and documented in court judgments[499] and reports from international and civil society organisations.[500]

Several court cases analysed special needs and vulnerabilities in the context of Dublin transfers *(see here)* and returns *(see here)*. CEDAW highlighted in several cases that victims of trafficking and victims of gender-based violence cannot be transferred under the Dublin III Regulation without an individualised, gender-sensitive assessment of the real risk of harm.[501] Two cases by the Luxembourgish Administrative Tribunal annulled inadmissibility decisions for applicants who had already been granted international protection in another Member State. In the first case involving a couple with newborn twins, the court concluded that the presumption of adequate protection by the other Member State was rebutted, while in the second case concerning a pregnant woman with a young son, the court found that the authorities failed to demonstrate that adequate and immediate medical care would be available upon their return.

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