People Seeking Asylum, Refugees and People Refused Asylum

JSNA Profile

May 2024

Nottingham City Council – Produced 31/05/2024.
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Why is this Topic Important?



Inequality and Inequity

People seeking asylum, refugees and people refused asylum are estimated to make up between 1.7- 3% of Nottingham's population. Over 70% of people seeking asylum in Nottingham are under 35 years old.

Despite the relatively small numbers and younger age, there is evidence that this population faces increased risks in many areas when compared to the general population. Evidence also suggests that this population also face increased barriers to accessing services.



Changing Structures and Uncertainty

Major changes to legislation and asylum application processes took place in 2023, through the Illegal Migration Act and the Streamlined Asylum Process. Various aspects of the new legislation are yet to come into effect and there is uncertainty around the long-term pathways that exist for this population.

Funding arrangements that provide support and infrastructure to these populations are currently short term and there are few guarantees for Local Authorities and Integrated Care Boards regarding long term government support for this population.



Emerging Pressure Points

There is evidence that across the country there are key pressure points emerging regarding support for this population. In particular, relating to statutory services provided around housing and to care leavers.

In Nottingham this population makes up a large proportion of the total number of people seeking support around homelessness and young people leaving care. The voluntary and community sector also reports pressures to meet the demands for support for this population.



Preparing for the Future

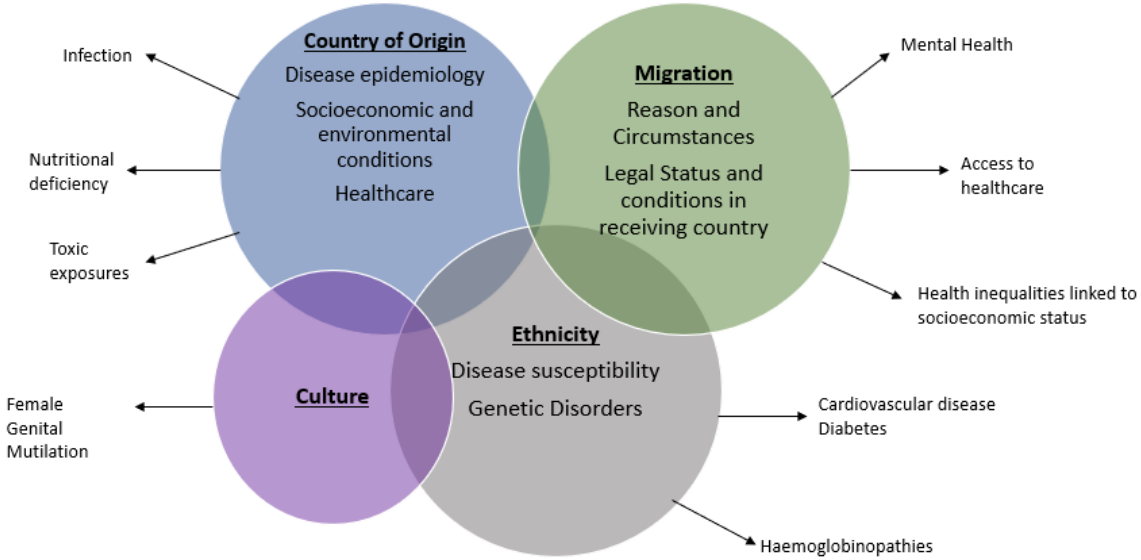
It remains likely that Nottingham will support a significant number of people seeking asylum, refugees and people refused asylum for the foreseeable future. Support will be provided both through statutory functions and through the work of the voluntary and community sector.

This population faces increased risks in many areas and are likely to have had experiences of war and climate related disasters. It is important that the current and future needs of this population must be understood, and sustainable long-term plans should be developed.

Health and Wellbeing - Overview

People Seeking Asylum, Refugees and People Refused Asylum in the UK are a heterogeneous population that is comprised of people from a broad range of places with significant diversity relating to ethnicity, socio-economic background, faith, language, culture, politics, and education. A person's circumstances will be shaped by multiple factors, including conditions in their country of origin, their migration journey, and their experiences on arrival in the UK. People seeking asylum and refugees are generally young, compared to the UK population, and there is a large body of evidence that this population faces increased risks in many forms and additional barriers to accessing services and support. There is generally a low level of recording of health needs of this population at a local level, however there are a large number of studies which outline some of the key health risks, and the main barriers to accessing support. **Continue reading about health needs. Read more about background, legislation, and eligibility**

Factors influencing the health of people seeking asylum and refugees



Adapted from OHID Migrant Health Guide (2023)

Summary of additional risks associated with people seeking asylum and refugees

Mental Health
- Increased rates of Post Traumatic Stress Disorder
- High levels of stress
- High levels of mental distress

Physical Health
- Communicable diseases
- Untreated chronic conditions
- Poor oral health
- Reduced levels of immunisation

Women's Health
- Poor Maternal health outcomes
- Increased prevalence of Female Genital Mutilation
- Sexual and Gender Based Violence

Wider Determinants of Health

Inability to work

Discrimination Destitution Homelessness

Insecure and poor housing

Exploitation and trafficking

Poor access to services

Poor social integration

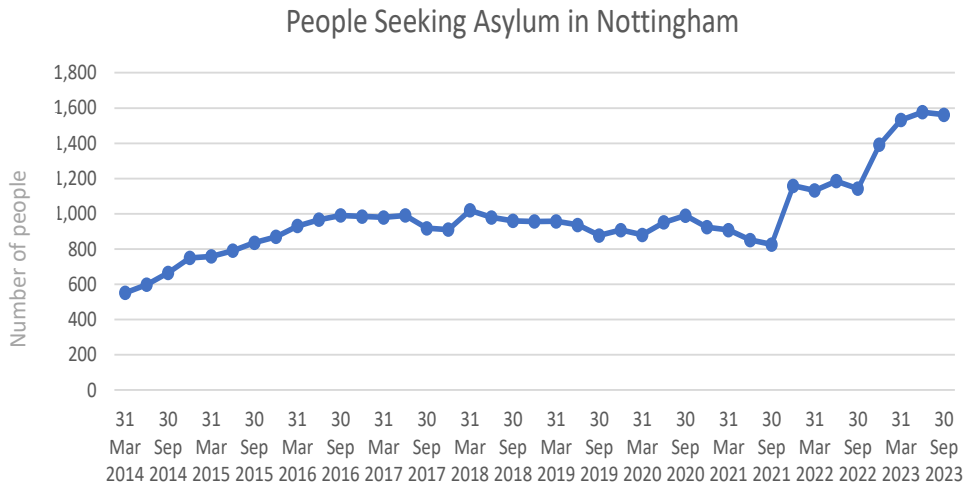
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Nottingham picture – People Seeking Asylum

Nottingham

According to the latest official Home Office figures there were around 1,550 people seeking asylum in Nottingham in September 2023; an equivalent of 0.47% of Nottingham's population. The number of people seeking asylum in Nottingham has increased by around 900 since 2014. Nottingham's total population is estimated to have grown by 22,800 people between 2011 and 2022 according to the most recent ONS estimates.



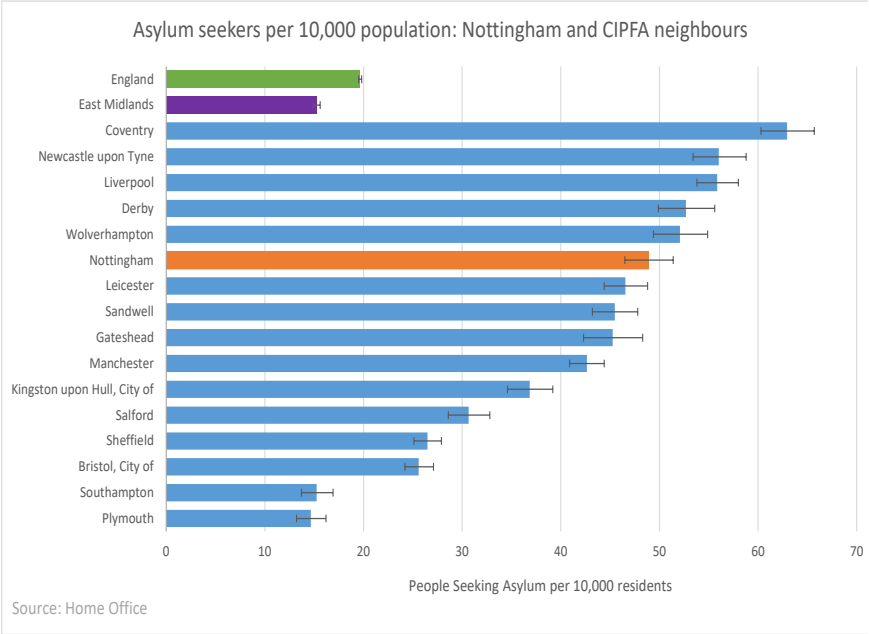
As of June 2023, around 75% of people seeking asylum in Nottingham in dispersed (Home Office funded community based) accommodation. Just under 25% live in contingency accommodation (Home Office funded hotel or hostel accommodation). A small number live in Nottingham and make their own accommodation arrangements.

As of June 2023, 60% of people receiving support in dispersed accommodation in Nottingham were male and 40% were female. 77% of people accessing support in dispersed accommodation in Nottingham were below 35 years of age.

How Nottingham Compares

Compared to the National and East Midlands averages of 20 and 15 asylum seekers per 10,000 residents respectively, Nottingham has a higher number (49 in every 10,000 residents).

Nottingham ranked 6th highest among Chartered Institute of Public Finance and Accountancy (CIPFA) nearest neighbours in terms of overall numbers of people seeking asylum and rate per 10,000.



Sources – Home Office 2024, ONS 2024.

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Nottingham picture – Resettlement, Refugees and People Refused Asylum

People who have received a positive decision on their asylum application are free to work and live anywhere in the UK. It is known that many people remain in Nottingham on receiving decisions on their asylum applications. Under housing legislation people granted refugee status are considered to have a "local connection" to the local authority where they were placed while awaiting their asylum application decision, so it is likely a large number of people who have been placed in Nottingham have remained in the area after receiving a positive asylum decision. Where a person has refugee status, they can also begin to pursue reunions with family members, so it is known that some people enter Nottingham on family reunion visas. There are no accepted ways of estimating either the number of people with refugee status or people who have been refused asylum and do not have an active asylum claim residing in a particular area, so it is not possible to know the true size of this population.

Resettlement

Nottingham also supports individuals through resettlement schemes. The combined number of people currently seeking asylum and accessing resettlement schemes from Ukraine and Afghanistan in Nottingham is just over 2,000. This is equivalent to **0.60%** of Nottingham's population (Home Office September 2023)

Refugees

In 2022 the United Nations Refugee Agency estimated that there were 231,597 refugees in the UK. Nottingham currently has 1.4% of the total number of people seeking asylum. If Nottingham were to have the same proportion of the estimated refugee population, this would amount to **3,242** people with refugee status living in Nottingham. It is likely that this would be a very conservative estimate and the real number is higher. Local services believe the real total is double this amount.

People Refused Asylum

Based on attendances at services, local voluntary and community sector stakeholders believe there are between **300-500** people who have been refused asylum and who do not have open asylum applications in Nottingham.

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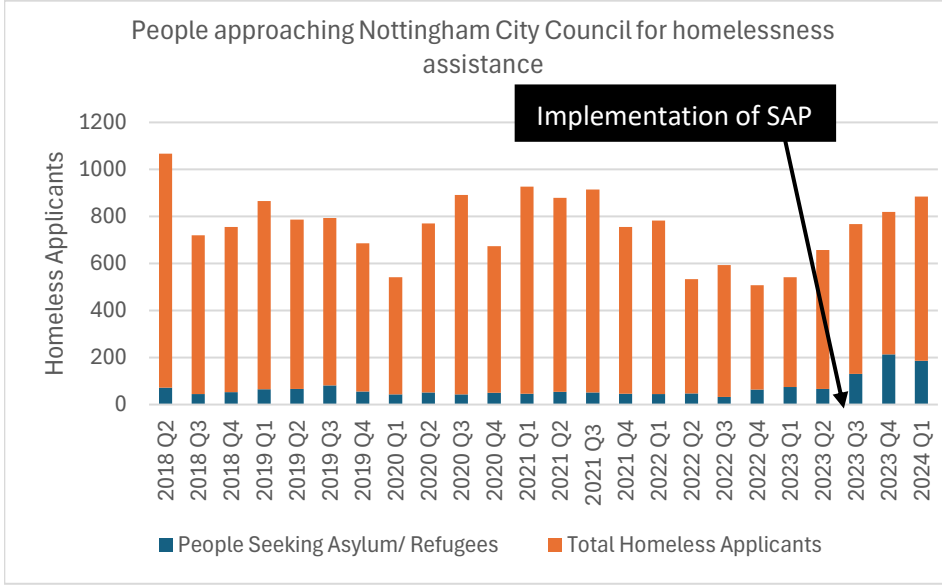
Nottingham picture - Homelessness

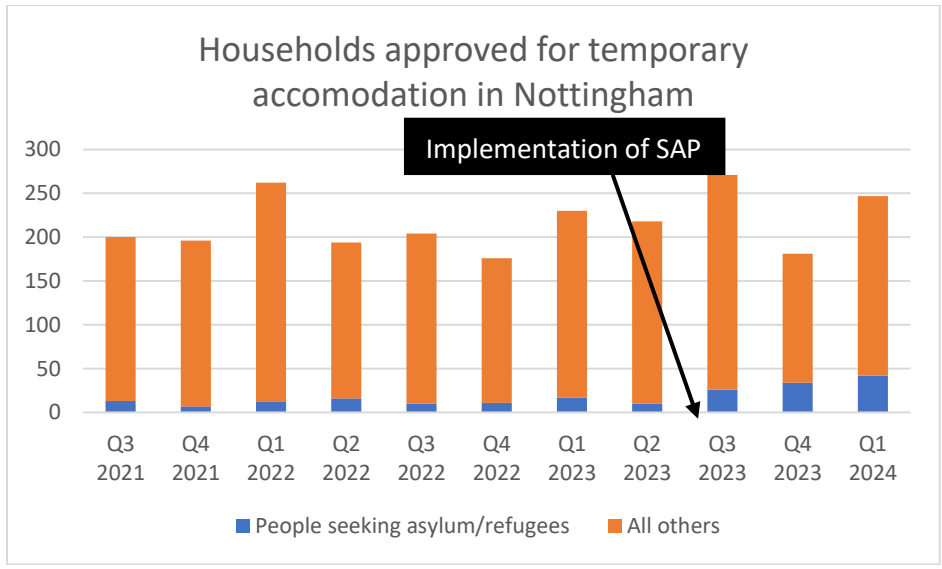
Numbers of refugees making homelessness applications in Nottingham had remained relatively consistent until July 2023. However, following major government policy changes in 2023 there has been a significant increase in homelessness applications received by people identifying as people seeking asylum and refugees. Streamlined Asylum Processing (SAP) was introduced by the government in 2023 to try and reduce the "legacy backlog" of asylum applications. The process simplified the asylum application for people from countries which had high grant rates. SAP increased the number of asylum decisions made nationally and reduced the notice period for exiting Home Office accommodation. This has led to large increase in homelessness applications from this population in many local authorities since July 2023.

The number of people seeking asylum and refugees approaching Nottingham City Council for homelessness assistance reached a high of 213 people between 1st September and 31st December 2023, accounting for 26% of the total for that period. This was an increase of 149 on the same period in 2022. Between 1st Jan and 31st March 2024, the number reduced to 186.

It is notable that only a relatively small percentage of this number were considered to be "Priority Need" through homelessness legislation and that most people approaching the local authority are not provided with immediate temporary accommodation. However, the number of households approved for temporary accommodation from this population did increase throughout 2023 and into early 2024 with 42 households being approved for temporary accommodation between 1st January and 31st March 2024.

Source for text and graphs – Nottingham City Council 2024.





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Nottingham picture – Unaccompanied Asylum-Seeking Children (UASC)

National Picture

- Numbers of UASC entering the UK has increased significantly since 2019
- In the year ending March 2023 there were 29% more UASC in the UK than the previous year, an increase of 1,630 children.
- In total there has been a 42% increase on pre-pandemic 2019 figures.
- UASC currently represent around 9% of all looked after children.
- UASC are generally male - 96%.
- UASC are also generally older, 14% are aged under 16 years (compared to 74% of all looked after children).
- Nationally 26% of care leavers aged between 19-21 were formerly UASC

Source - Department of Education 2024

Nottingham Picture

- Nottingham has seen a small increase in UASC in local authority care since 2019
- UASC currently represent around 6% of all looked after children in Nottingham.
- UASC in Nottingham are generally older, around 10% are aged under 16 years.
- Around 26% of care leavers aged between 18-25 in Nottingham were formerly UASC.

Sources- Department of Education 2024, Nottingham City Council 2024, East Midlands Strategic Migration Partnership 2024

UASC in the East Midlands

The number of UASC in Local Authority Care and Leaving Care in the East Midlands has increased significantly. This is partly due to the increased numbers of UASC arriving into the country and to the National Transfer Scheme (NTS) becoming mandatory in December 2021. The NTS is the process where UASC children are transferred to Local Authorities around the country to relieve pressure on areas with the highest numbers of UASC such as Kent. Local Authorities who are looking after UASC at a rate lower than 0.1% of its total child population are eligible to have UASC transferred into their care as part of the NTS. From latest official Department of Education figures there were 45 looked after children who were UASC in Nottingham in 2023, which represents 0.06% of Nottingham's child population. While Nottingham has received children through the NTS, it has been receiving them at a lower rate than many of its neighbours which have lower numbers of UASC compared to its child population. The number of looked after children who are UASC is almost the same in Nottingham as it was in 2019, while many neighbouring areas have seen larger increases. Notably Nottinghamshire (increase of 46 between 2019-2023), Leicestershire (increase of 56 between 2019-2023), and Derbyshire (increase of 43 between 2019-2023).

While the number of looked after children in Nottingham who are UASC has remained relatively stable since 2019, it is likely Nottingham will be impacted by the increases in other local areas, as children under the care of other local authorities may be placed in Nottingham.

In line with national levels, a significant proportion of Nottingham's 18-25 year old care leavers were formerly UASC. In Nottingham in February 2024 around 100 Care Leavers were formerly UASC in local authority care, representing around 26% of all care leavers. Sources – Department of Education 2024, East Midlands Strategic Migration Partnership 2024.

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Policy guidance and evidence of what works

Summary

There are numerous sources of guidance regarding how to provide healthcare to this population. However, overall, there are few examples where a single approach is used nationally to provide healthcare or support to people seeking asylum, refugees and people refused asylum. Even where there is clear guidance about steps that should be taken, for example for Initial Health Assessments for Unaccompanied Asylum-Seeking Children or screening for infectious diseases, evidence suggests there is significant variation with how these steps are taken at a local level.

Due to the variety of approaches taken nationally to provide healthcare and support there is limited evidence of best practice. However, there are case study examples of approaches used in different areas and emerging research about key factors to consider in Public Health interventions aimed at this population.

Read more about clinical guidelines and models of support for this population

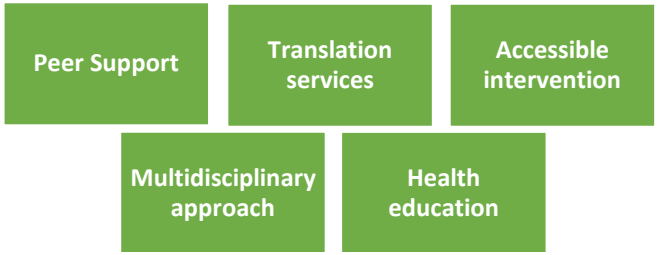
Types of Intervention for improving access to healthcare

Through a systematic review of 55 studies looking at interventions aimed at improving primary care access and health for refugees or people seeking asylum, Iqbal et al (2021) identified that interventions in this area generally focussed on 4 broad themes.



Elements of effective public health interventions that address barriers to health services for refugees

A 2022 systematic review explored key elements that contributed to effective public health interventions addressing barriers for refugees. The number of studies that met the inclusion criteria was small (6) and the studies came from around the world with differing policy and healthcare systems. However, the study provided the basis for basic elements that should be considered as a part of any public health intervention aimed at supporting this population. 5 themes were identified: peer support, translation services, accessible intervention, health education and a multidisciplinary approach. (Jallow, Haith-Cooper, Hargan, & Balaam, 2022



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Community and service user views

Service User Views

In 2020 Nottingham and Nottinghamshire Refugee Forum completed interviews with 58 people with experience of the asylum process in Nottingham. The findings showed that while many people report positive experiences accessing health services in Nottingham, this population can also regularly experience issues relating to interpreter access, incorrect charging notices and discrimination (Robertson, Bondareva, & Aspde, 2020).

The research found that generally GP registration was facilitated and that 80% of respondents who were registered with a GP found the process was easy. However, 14% of people found the registration process to be difficult or very difficult suggesting there can still be examples of barriers to registration.

Language was a key theme identified through the research. Interpreter access was reported to be inconsistent across different types of appointments and was reported to be particularly poor at dentist and optician appointments.

Charging and confusion about eligibility was also shown to be a consistent issue, with many individuals reporting that they had been refused a service or issued a charging notice. This factor was perceived to be of importance to respondents with 28% reporting avoiding healthcare due to concerns around charges relating to healthcare.

In 2023 interviews took place with 8 men in Nottingham with experience of the asylum process. These individuals were interview by a member of the Nottingham City Council's Public Health Team at a local support service with interpreter support. Those interviewed reported that they generally found GP registration in Nottingham to be relatively easy, with 5/8 individuals registering independently.

However, the process of actually making appointments with health services was deemed to be more challenging. All 8 participants reported needing some form of support to book health appointments. 6/8 individuals reported that they felt language was a key barrier to this, with reports that making calls to a health service and explaining their health needs in their native language were difficult.

In March 2024, 24 people refused asylum in Nottingham and who were accessing support around destitution were surveyed, with interpreter support. Overall, respondents felt Nottingham had a good range of services with 60% rating Nottingham's services as very good or excellent. Respondents also reported that generally healthcare was accessible even where asylum has been refused, with 96% having accessed GP support, 65% having accessed dentist support and 48% having accessed some form of mental health service.

However, 73% respondents also reported requiring some form of support when they wanted to access healthcare. 14 of 24 respondents required interpreter support, with other recurring forms of support being help filling in online forms, help to access transport and help to book appointments. Many respondents also reported that there were several barriers to accessing support, particularly in relation to oral healthcare.

Overall, respondents stated that they felt safe accessing services in Nottingham and many listed Nottingham voluntary sector services as key to this, although it was noted that services reported several people were fearful to complete surveys through fear of bringing attention to themselves. Further engagement work is needed with this population and also with women with experiences of the asylum system and UASC.

Service user quotes

(Robertson, Bondareva, & Aspde, 2020)

"When I went to the GP to do my registration, I did my registration very easy and the doctor had seen me and gave me treatment and I was very happy."

"Two, three times I was charged … penalty charges at the dentist even though I had an HC2 certificate. The certificate details didn't match my ID."

"When I needed a letter in respect of my wife's medical report it was fantastic. It was typewritten and signed and given to me."

"Just the way people talk to you at times. I find it's just not very polite. There was one time I went to the dentist and I knew that I wasn't being treated properly."

"I'm just worried about how can I pay. If they charge me at the dentist I don't want to go. One time they said I had to have a tooth pulled out, but I said OK I'll leave it because I didn't have the money to pay."

"It's good, it's mainly for the children. In general, it's good and thank God I'm receiving good treatment for the kids."

"My GP delayed appointment once because there wasn't interpreter."

"I was sent invoices for maternity care even though I was an asylum seeker."

"When I came to the GP I want a blood test. Then they told me I had Hepatitis B virus and they asked if I want to treat that and I went to City Hospital and they treated that and that was really helpful because I didn't know that."

"I've been told if I need interpreter, it will be one month or twenty days."

"Because we received letters from NHS business services asking us to provide proof that we were entitled to NHS services at the time. And the document showed quite a lot of warnings that there are serious penalties if you access particularly secondary health care that you're not entitled to… each time we need to go for any health need we receive a letter asking us to provide evidence that we're entitled to secondary health care."

Stakeholder Views

Key Nottingham Stakeholders were interviewed throughout 2023, with the findings confirmed at a stakeholder event in June 2023. Further stakeholders were identified from this event and additional interviews took place in September 2023 and February 2024.

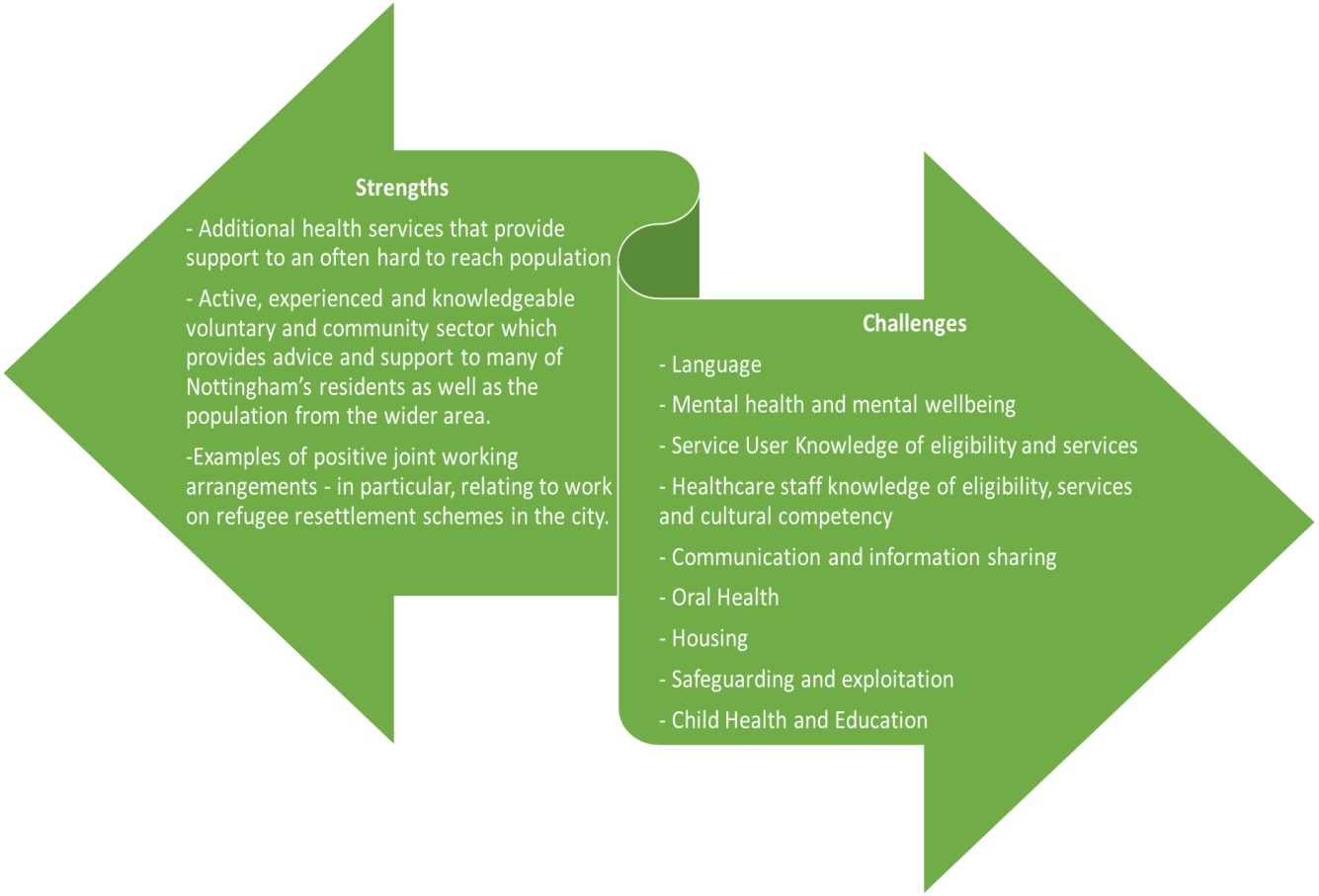
A wide range of Nottingham stakeholders fed back that while Nottingham has some key strengths relating to its specialised services and its voluntary sector, there were currently significant challenges in providing support to people seeking asylum, refugees and people refused asylum.

Some challenges such as language and mental health were seen as long-term challenges that are present across all settings, where some challenges such as housing, and oral health access were assessed to be emerging and becoming particularly relevant in recent years.

Stakeholders expressed that challenges are complex and interrelated, for example, the impact of housing insecurity being linked to other key challenges such as child health and education, and mental health and wellbeing.

Partners from the voluntary sector in particular have stressed capacity challenges and the need for longer term planning.

Read more about Nottingham stakeholder views



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What we are doing and assets and services we have in place

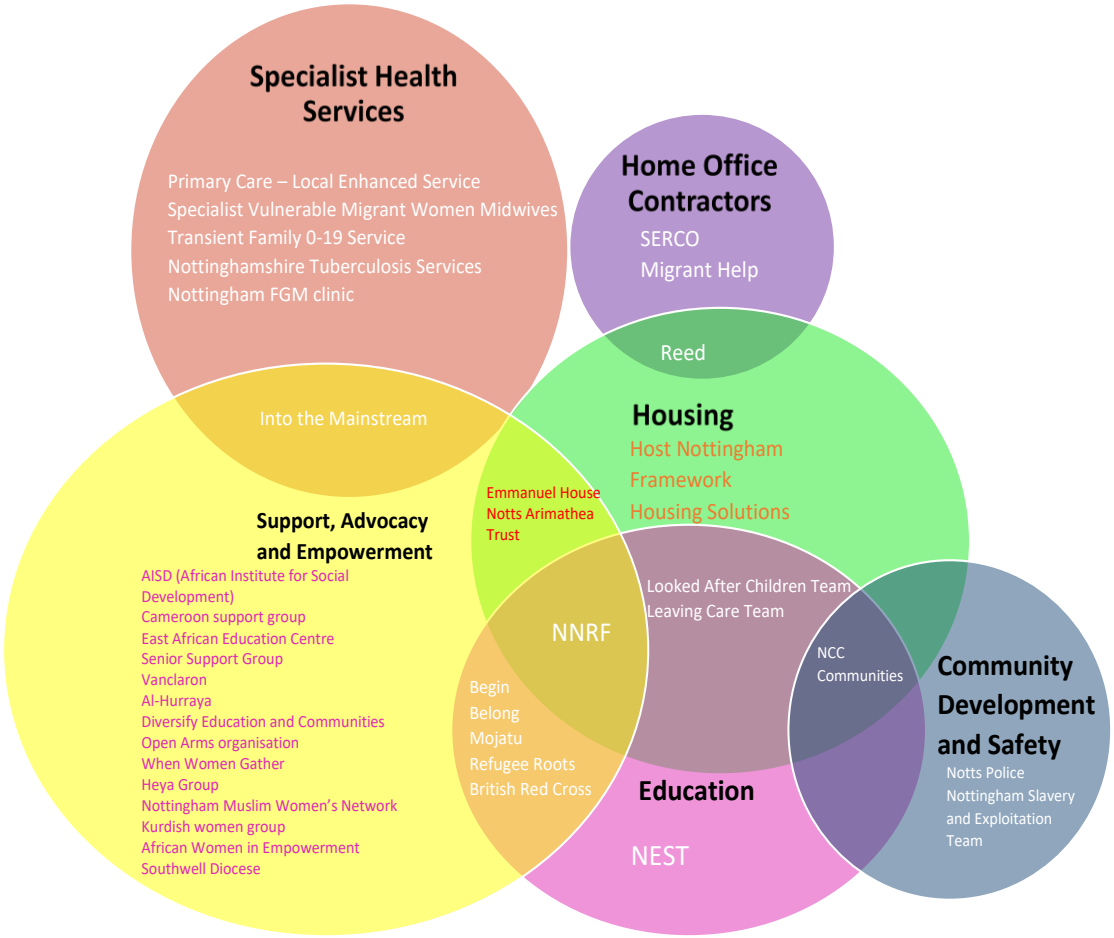
Summary

Nottingham has a diverse range of services that support people seeking asylum, refugees and people refused asylum. This ranges from specialist health services and local authority teams, through to the variety of smaller community organisations providing support to different communities, many of whom will have experienced the asylum application process.

Nottingham receives strategic support from the East Midlands Strategic Migration Partnership for different asylum and refugee populations. Operational arrangements for people seeking asylum and resettlement projects in Nottingham are generally overseen by the local authority Communities Division, with arrangements for UASC looked after children and care leavers coordinated by Children's Services.

Nottingham has a number of operational groups which discuss and address challenges to support for these populations including a multi-agency forum, a specialist multi-agency group that reviews complex cases amongst pregnant families or families with small children. A steering group for UASC is also in the process of being set up. There are currently very few existing strategies or policies in Nottingham relating specifically to these populations.

There is evidence that high quality training is arranged and delivered to health professionals working with children and adults in Nottingham, on areas such as eligibility, health needs and cultural competency. However, there is no general training offer and this training is generally dependent on unique offers from the experienced professionals in Nottingham rather than as routine training that is available across the city. **Read more about what exists in Nottingham**



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Opportunities for improvement and future development

Theme	Findings	Area for future development
1. Strategic Leadership and Planning 	People seeking asylum, refugees and people refused asylum are a diverse population in Nottingham. There are support services and operational structures in place, but Nottingham currently has no group with strategic oversight around health needs of these populations. It is likely this extends to other migrant populations in the city. New legislation is likely to bring significant changes to the support available to people seeking asylum. Recent changes to the asylum application process has led to increases in homelessness.	**1.1 A Strategic partnership should be established to bring together the NHS, Nottingham City Council, the Police, and the voluntary and community sector to address specific challenges facing these populations and to allow planning for the future in a joined-up way.** **1.2 When local strategies and policies are developed in relation to delivering statutory duties to looked after children, care leavers and people experiencing homelessness, they should clearly reference how the specific needs and barriers faced by people seeking asylum and refugees will be met.**
2. Information and understanding 	National research and data suggest this population is likely to have significant needs, however there are low levels of local data collected routinely. There are also gaps in the views obtained from local people with lived experience, in particular women with experience of the asylum process and UASC. Local partners and people with lived experience have highlighted various positives and challenges that exist in Nottingham. Challenges have been identified relating to oral health care, mental health need and the current high risks of homelessness and challenges for families placed in temporary accommodation. There are isolated local examples of excellent resources and training in Nottingham, but these are limited to certain service areas and are generally dependent on individual staff members. Stakeholder feedback has demonstrated that overall service user and professional knowledge of eligibility and service availability is	**2.1 Work should be undertaken to understand with greater clarity, the local health needs of this population and to learn from the voices of lived experience. Consideration should be given to completing audits of the health checks completed with People Seeking Asylum and UASC. Focused engagement work should be targeted with women with experiences of the asylum process and UASC.** **2.2 Key local challenges raised by people with lived experience and stakeholders should be explored in greater depth. Work should be undertaken to map mental health, oral health and homelessness provision and support for this population to clarify existing pathways and to identify gaps.** **2.3 The expertise of local professionals and people with lived experience in Nottingham should be used to develop local resources and training for citizens and professionals to improve awareness of health needs, eligibility for support, available services, and cultural competency across Nottingham.**

3. Service design and development



Feedback from people with lived experience and stakeholders has shown that there are a wide range of health services available in Nottingham, but that this population can face significant barriers to accessing services. There are specific barriers that are relevant for people seeking asylum and for UASC.

There is a growing body of national examples and research relating to best practice for delivering interventions for this population. Many of Nottingham's services currently involve elements considered to be best practice, but there is no current process to ensure that these elements of best practice are consistently embedded within commissioned services or through smaller grant funded programmes.

Language has been consistently identified as a leading barrier to accessing support, both through national literature and through local feedback.

This population face unique and specific factors that lead to homelessness, additional services and capacity have been created in Nottingham, however homelessness prevention remains a significant challenge.

3.1 Nottingham's service to improve access to healthcare for adult people seeking asylum, refugee and people refused asylum should be redesigned to reflect the increased demand. Services supporting UASC should encourage these children to follow up with health services following their Initial Health Assessments.

3.2 Nottingham should continue to learn from other areas and existing research. Best practice examples and elements believed to contribute to successful interventions should inform future commissioning and grant programmes. Key elements such as peer support, translation services, accessibility of intervention, health education and a multidisciplinary approach should be considered.

3.3 Opportunities to invest in and develop local interpreter training, access and capacity should be explored.

3.4 As part of the planning of homelessness prevention services, specific interventions should be developed based around the prevention of homelessness for people seeking asylum.

Acknowledgments

Many thanks to the people with lived experience and stakeholders in Nottingham who contributed to this JSNA profile. Evidence searches for this profile were supported by Sherwood Forest Hospitals NHS Foundation Trust's Library and Knowledge Service.

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