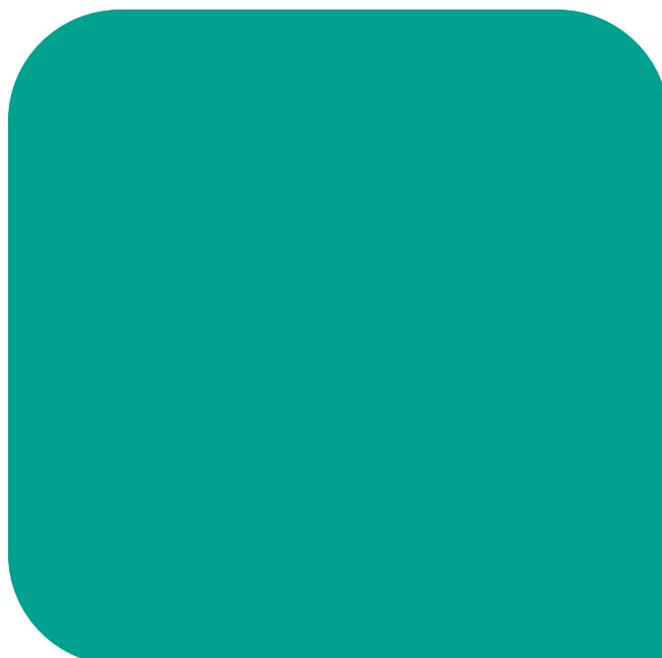


# Good practice in social care for refugees and asylum seekers



The purpose of this guide is to support commissioners and providers of social care services to work effectively with refugees and asylum seekers.

The Social Care Institute for Excellence (SCIE) was established by Government in 2001 to improve social care services for adults and children in the United Kingdom.

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# About this guide

## Introduction

The purpose of this guide is to support commissioners and providers of social care services to work effectively with refugees and asylum seekers. It is based on the fact that refugees and asylum seekers have rights, including the right to a high quality of assessment and provision in response to their social care needs. The guide will help practitioners to understand policy and practice relevant to asylum seekers and refugees. It is worth noting from the outset that this is an area where the legislative and policy framework changes frequently and some details may quickly become out of date. However, the general principles and approaches described in this guide will be longer-lasting. The guide provides:

- a rights-based approach
- key messages from the research evidence
- legal and policy framework
- the social care needs of asylum seekers and refugees
- barriers to accessing appropriate high quality services
- principles for practice
- suggested good practice
- practice examples
- information about resources and useful organisations.

The guide draws on SCIE Report 31 [Good practice in social care for refugees and asylum seekers](#). This features a literature review and a practice survey, including focus groups with asylum seekers and refugees and a survey of disability charities, asylum seekers and refugee organisations and local authorities across England, Northern Ireland and Wales in order to identify indicators of good practice and practical examples, which are discussed in this guide. These examples illustrate local positive responses to promoting the rights of asylum seekers and refugees.

### **Who is it for?**

This guide is aimed primarily at professionals working in local authorities in children's and adult services. It is aimed at both a strategic level for those planning and commissioning social care provision for asylum seekers and refugees and at professionals involved in everyday practice. It may be particularly useful for those organisations that have relatively little experience of commissioning and providing social care services for asylum seekers and refugees. It will also be of interest to asylum seeker and refugee organisations and relevant charities who may be providing social care, and to other organisations with a responsibility for meeting the broader health and social care needs of asylum seekers and refugees, namely clinical commissioning groups (CCGs), mental health organisations and housing providers.

## **Acknowledgements**

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Project Steering Group members: Zemikael Habte-Mariam (chair), Dr Azim-el Hassan, Pete Fleischmann (SCIE), Henry Mumbi (Community Health Action Trust), Nadia Ahmed, Karen Newbigging and Professor Ajit Shah.

## Background: Introduction

### Asylum seekers and refugees in the UK

Asylum seekers and refugees are a highly heterogeneous group from a range of countries, united by their application for asylum in the UK under the 1951 United Nations Geneva Convention. As a group they include men and women of different ages with different educational backgrounds, including highly skilled professionals, who have experienced different circumstances in their own countries and arrived in the UK through different means. They face hardship before, during and after arrival in the UK and many commentators have remarked on the resilience, skills and strengths of asylum seekers and refugees and their networks as well as their social, cultural and economic contribution to life in the UK. It is important to emphasise the distinctions between refugees and asylum seekers because they have different legal status in the UK, which can affect their entitlement to services. An **asylum seeker** is a person who has asked for protection but has not received a decision on their application to become a refugee, or is waiting for the outcome of an appeal. A **refugee** is an individual to whom the UK government has offered protection in accordance with the Refugee Convention 1951 and granted leave to stay for a certain period of time. Refugees can, broadly speaking, access the same services as UK nationals, including social care provision. Asylum seekers and refused asylum seekers have different entitlements.

The numbers of asylum applications to the UK have fluctuated dramatically over recent decades. Asylum claims rose steadily throughout the late 1980's and 1990s, reaching a high of 84,130 in 2003. Numbers then declined to 25,710 in 2005, and fell further to 17,916 in 2010. The figure from 2013 shows an increase to 23,507 (excluding dependants). [1] The top 10 nationalities represented in applications in 2012 were Pakistan, Iran, Sri Lanka, Bangladesh, Syria, Albania, India, Nigeria Afghanistan and Eritrea. [2] The nationality of asylum seekers making application in the UK fluctuates as military and political conflicts around the world develop or are resolved. In 2013 1,265 unaccompanied asylum seeking children aged 17 or under applied for asylum in the UK. [2]

Some of the individuals who seek asylum in the UK are the victims of human trafficking. The victims may have been forced, coerced or deceived into migration to the UK or may have been given false information about the kinds of work they would be doing.

The majority of asylum seekers and refugees initially settle in London but since the Immigration and Asylum Act 1999 they have been dispersed to other areas of the country.

General information and statistics about asylum seekers and refugees can be found at:

[Analysis of asylum and refugee statistics \(Information Centre about Asylum and Refugees\)](#)

[Migration statistics \(HM Government\)](#)

[Data and resources \(The Migration Observatory at The University of Oxford\)](#)

[Chance or choice? Understanding why asylum seekers come to the UK \(The Refugee Council\)](#)

## **Links to International Conventions and relevant briefings**

[The 1951 Convention Relating to the Status of Refugees](#)

[The 1967 Protocol Relating to the Status of Refugees](#)

[United Nations Convention on the Rights of the Child](#)

[European Convention on Human Rights](#)

[Palermo Protocol: Article 3, paragraph \(a\) of the Protocol to Prevent, Suppress and Punish Trafficking in Persons](#)

[The Council of Europe Convention on Action against Trafficking in Human Beings 2005](#)

[EU Directive on Human Trafficking](#)

## **Links to UK legislation and briefings**

[Human Rights Act \(1998\)](#)

[Equality Act \(2006\)](#)

[Creating a fairer more equal society \(2014\)](#)

[Ministry of Justice \(2006\): Making sense of human rights](#)

[Immigration Bill \(2013\)](#)

## **Background: A rights-based approach for asylum seekers and refugees with social care needs**

A rights-based approach for asylum seekers and refugees with social care needs  
Adopting a rights-based approach to social care is the best way of ensuring that the principles of equality and respect identified by asylum seekers and refugees in the research review are met.

While such an approach recognises that asylum seekers and refugees with social care needs are vulnerable, it does so through the lens of human rights. Adopting a rights-based approach implies that statutory authorities have a responsibility and duty in relation to the social care needs of asylum seekers and refugees. Rights are universal and are codified in international conventions and national legislation. Equalities legislation in the UK is being brought together in order to streamline the existing law to promote equality, so that all individuals can fulfil their potential and for the creation of a cohesive society and for a strong economy.

## **Background: Relevant legislation and policy**

### **Relevant legislation and policy**

Here is the legislation providing the local framework for the assessment and access to social care for asylum seekers and refugees.

Once refugees have been granted leave to stay they are entitled to receive provision on the same basis as UK residents.

- Local authorities have a duty to assess all individuals (including refused asylum seekers) if they appear to be in need of care services under Section 47 of the NHS and Community Care Act 1990.

- Local authorities have a duty to provide care under Section 21 of the National Assistance Act 1948. The Slough judgement clarified local authorities' responsibilities under Section 21 of the National Assistance Act 1948. It clarified what care means in this context and ruled that to qualify for support, an individual has to have a care need above and beyond the provision of accommodation, such as personal care or household tasks.
- Schedule 3 of the Nationality, Immigration and Asylum Act 2002 prevents local authorities from routinely providing support to refused asylum seekers who are in the country unlawfully. There are some exceptions to these exclusions but they do not prevent local authorities providing assistance to refused asylum seekers if to do otherwise would be a breach of an individual's human rights under the Human Rights Act 1998. This means that local authorities should assess refused asylum seekers if care needs have been signalled, but it does not necessarily mean that they should provide support.
- Local authorities consider eligibility for care needs on a case by case basis, taking into account all the factors surrounding the individual's circumstances and seeking their own legal advice if necessary.
- In circumstances where an asylum seeker or refugee is eligible for support, direct payments or a personal budget may be the means by which support is provided rather than direct services.

Since 2009 the Department of Health has been reassessing the eligibility of refused asylum seekers to access NHS healthcare. The government's consultation on a policy of restricted access to free treatment for refused asylum seekers was subject to a judicial review in April 2008, and was initially overturned but the government successfully appealed against this verdict in the court of appeal 2009.

The Court of Appeal (CA) found that refused asylum seekers were not eligible for free care on the grounds that they 'cannot be said to be ordinarily resident in the UK, since their stay here is not 'ordinary''. The CA also found that failed asylum seekers cannot be considered exempt from charges by having resided lawfully in the UK for one year prior to treatment since they do not have the necessary 'leave to enter' in order to reside lawfully in the UK.

[The Immigration Bill 2013](#) outlines planned legislation to introduce surcharges for migrants accessing health and social care provision.

[Migrant Health Guide](#).

### **Links to UK legislation, guidance and Briefings**

#### **[Care Act 2014](#)**

The Care Act contains some rules which may affect refugees and asylum seekers. These rules relate to rights to residency and persons subject to immigration controls.

#### **[Immigration and Asylum Act 1999](#)**

#### **[Local Government Act 2000](#)**

#### **[Nationality, Immigration and Asylum Act 2002](#)**

[Asylum and Immigration \(Treatment of Claimants, etc.\) Act 2004](#)  
[Department of Health, Social Services and Public Safety \(2004\)](#)  
[Borders, Citizenship and Immigration Act 2009](#)  
[Equality Act 2010](#)

## Background: Children and young people

### Children and young people

The Children Act 1989 provides the basic framework for services to children and families. Section 17 gives local authorities a duty to provide support for children in need, and Section 20 gives them a duty to provide accommodation for children who require it. Section 31 gives local authorities a duty to investigate and take action if it is believed that children are in need of protection. All these duties apply to refugee and asylum-seeking children.

Children and young people who are accommodated under Section 20, or who are committed to the care of the local authority, are 'looked after children' in the terms of the Act and are entitled to formal planning and independent review of their care. Looked after children are also entitled to services under the Children (Leaving Care) Act 2000 and associated regulations, which define eligibility and entitlement to planning for leaving care and to support up to the age of 21 (or 25 if in full-time education). It is not normally appropriate to use Section 17 support to accommodate unaccompanied asylum-seeking children. In most cases they will need full support under Section 20 of the Children Act 1989, and entitlement to leaving care services under the Children (Leaving Care) Act 2000.

The Children Act 2004 now includes a duty on local authorities to improve the wellbeing of all children in their area and to make arrangements to safeguard and promote their welfare (Sections 10 and 11). Section 9 of the Asylum and Immigration (Treatment of Claimants, etc.) Act 2004 allows the withdrawal of support to families whose claim has been denied, and who are not 'co-operating with the removal process'. In the past, families with failed claims to asylum were routinely held in immigration removal centres. Following a sustained campaign from migrant rights groups and children's organisations the detention of children in the UK is now less common but not unlawful.

### Links to legislation regarding children

[Children and Families Act 2014](#)  
[The Children Act 1989](#)  
[The Children Act 2004](#)  
[Children \(Leaving Care\) Act 2000](#)  
[Safeguarding Vulnerable Groups Act 2006](#)

## Background: People detained under the Mental Health Acts

The 1983 and 2007 Mental Health Acts provide a legislative framework for the assessment and care of people who are detained under the 1983 Mental Health Act. Asylum seekers and refugees detained under Section 3 of the 1983 Act are entitled to after care services under Section 117. The 2007 Act made amendments to the 1983 Act and introduced the provision of independent mental health advocacy (IMHA) to ensure

that detained patients understand their rights under the Act and are supported to participate in decisions about their care and treatment.

### **Links to legislation and briefings regarding the Mental Health Acts**

[Mental Health Act 1983](#)

[Mental Health Act 2007](#)

[Mental Capacity Act 2005](#)

### **Guidance specific to asylum seekers and refugees**

Guidance is available on the UKBA website in [Policy Bulletin 82: Asylum Seekers with Care Needs](#).

The Separated Children in Europe Programme, a joint venture of Save the Children and the UNHCR, has produced a [Statement of good practice](#) (Separated Children in Europe Programme 2004) which includes principles for good practice and practice examples.

Concern at the treatment of children and young people in the asylum system has led to significant new proposals from the UKBA ([Code of Practice for Keeping Children Safe from Harm](#) and [Better outcomes: the way forward](#)). This includes policy in relation to age assessment, because of the crucial implications of age for entitlement to services:

Asylum Support Appeals Project has produced an 'at a glance' factsheet: [Local authority assistance for asylum seekers and refused asylum seekers](#).

The NRPF network provides practical guidance in relation to asylum seekers who have no recourse to public funds. Its practice guidance documents provide [information on adults, children and families and domestic violence](#).

NICE has produced a guidance document on the [health needs of unaccompanied asylum seeking children](#).

The Refugee Council produces information on the [special needs of refugee women](#)

The UKBA has produced guidance about the [needs of migrant victims of domestic violence](#).

Mind's research into the mental health needs of refugees and asylum seekers:

[Vulnerable migrants](#)

A briefing for refugee and migrant community organisations on how the equality act affects refugees and asylum seekers: [Refugees, Migrants and the Equality Act 2010](#)

### **Additional legislation and policy regarding local authority and social services**

Access to and provision of social care to asylum seekers and refugees needs to take place with regard to current legislation and policy for the provision of social care. In particular:

The Care Act 2014 reforms the law relating to care and support for adults and also legislation designed to support and protect carers. The Act aims to safeguard adults from abuse or neglect, and improve care standards. The Act is not yet fully implemented

and the policies below were the foundations of this new legislation and so remain relevant.

**Every Child Matters (ECM)** which incorporates the entitlement of every child to five key outcomes: be healthy; stay safe; enjoy and achieve; make a positive contribution; achieve economic wellbeing. The emphasis of the ECM strategy is on interagency working through Children's Trusts led by local authorities but including a range of statutory and non-statutory agencies providing, health, education, welfare and protection for children. A key part of this is the Common Assessment Framework (CAF), aimed at children and young people with 'additional needs' who are at risk of poor outcomes and incorporating multi-agency assessment based on three 'domains' of (i) the child, (ii) parents and carers, (iii) the family and wider environment. While Every Child Matters is no longer current policy, the principles it contains are still seen as relevant by, and useful to many in the sector.

Implementation of the **Safeguarding Vulnerable Groups Act 2006**, which reflects a commitment to protect vulnerable adults and children from harm. Consideration should be given to the inclusion of asylum seekers and refugees within relevant policies. Statutory duty to undertake a joint strategic needs assessment (JSNA): asylum seekers and refugees should be included as part of the JSNA, which should also involve consulting with asylum seekers and refugees about their needs. This provides an opportunity both to inform commissioning strategies and to plan for population changes.

Putting People First (HM Government 2007) outlines the elements of a personalised social care system. It advocates the provision of a 'first stop shop' to provide a universal information, advice and advocacy service for people needing services, and their carers, irrespective of their eligibility for public funding. Since 2010 this policy has been superseded by **Think Local, Act Personal**, a partnership agreement between local government and the provider sector which aims to deliver efficient, effective and integrated service delivery across health and social care.

**Transforming social care** (2008) sets out a vision for a personalised approach for social care working in partnership with other organisations to promote wellbeing and prevention.

**Implementation of public sector duties in relation to promoting equality and fairness** with consideration to race, disability, gender, age, sexual orientation, religion or faith.

**Responsibilities to promote community cohesion**: referred to in a range of policy and legislation, for example, guidance to local authorities on how to mainstream community cohesion within all their services.

**Working Together to Safeguard Children 2010** – This strategy outlines a method of joined-up working to better safeguard the interests of children. This is relevant in the context of refugee and asylum seeker children because of the complexity of their needs and the difficult child protection issues professionals may encounter while working with this group, especially in cases of trafficking.

**The National Carers' Strategy 2008** – sets out the vision and long-term strategy for carers.

[Caring for our future: reforming care and support 2012](#) – outlines proposed reforms to the ways that social care is delivered. A new approach which emphasises wellbeing, independence and personalisation.

[Welsh Assembly Government Circular 29/03](#) – Guidance on accommodating children in need and their families.

[Fulfilled lives, supportive communities: improving social services in Wales from 2008–2018](#) (Welsh Assembly Government). Outlines a 10-year strategy for social services in Wales.

## Background: Social care needs of asylum seekers and refugees

Much of the focus of this guide is necessarily on the social care needs of asylum seekers and refugees and how they can be met. However, it is important to appreciate the resilience and capacity for endurance shown by many people who have arrived in the UK seeking refuge, and the many positive contributions that they can bring to our society. It is important also to set a response to their needs in a context of understanding their human rights – first and foremost the right to be treated with respect and the rights set out in international conventions and treaties to which the UK is committed. Care needs arising from mental health problems are particularly common among asylum seekers. Mental health problems may pre-exist movement, be associated with the process of displacement or may arise following arrival in the UK. Post-arrival factors which might create mental strain in refugees and asylum seekers are: enforced poverty, social isolation and compulsory, routine detention alongside uncertainty about the future are serious post-migratory stressors.[3]

### Children

For unaccompanied asylum-seeking children the primary needs are likely to be:

- basic needs for a place to live and for assistance in destitution cases
- needs for security and belonging
- access to healthcare
- access to, and support with, education and career
- opportunities to develop social networks and to be active in the community
- legal advice and support with their asylum claim
- support with needs related to their refugee or asylum status
- support, and as appropriate, access to psychological interventions and social support in relation to experiences of forced migration, torture and/or trauma including bereavement
- Post-traumatic stress disorder may affect unaccompanied asylum seeking children [4]

Cultural and linguistic sensitivity in the way in which they are received, and in which services are planned and delivered.

For refugee or asylum-seeking children in families, the primary needs are likely to be:

- accommodation and maintenance
- a secure place in the neighbourhood and community
- access to healthcare
- access to, and support with, their education
- support with needs related to the family's refugee or asylum status
- support, and as appropriate, access to psychological interventions and social support in relation to experiences of forced migration, torture and/or trauma including bereavement
- access to help with other needs on the same basis as indigenous families – for example, day care, help with disability or illness
- legal advice and support with the family's asylum claim
- cultural and linguistic sensitivity in reception and provision of services

In addition, some children and young people may be caring for their parents or other family members and have needs related to this. See

[Supporting refugee young carers and their families: a toolkit for ALL practitioners](#). The Children's Society (2008).

[Separated Children in Europe Programme, Statement of Good Practice. Seeking support – a guide to the rights and entitlements of separated refugee and asylum seeking children](#).

### **Adults**

Adult refugees and asylum seekers may be experiencing complex health and social care needs including:

- health issues, such as HIV and long-term illnesses
- emotional and mental health problems, like depression and post-traumatic stress disorder are extremely common. Contributory factors include: experiences prior to arrival in this country; bereavement; and, harsh conditions after arrival in the UK, for example, detention.
- for disabled people, personal care needs, aids and adaptations and appropriate accommodation to enable independence
- older asylum seekers and refugees are more likely to be suffering from poor health, anxiety, hardship and despair.

### *Women*

- Women face gender-specific issues and vulnerabilities, particularly if they are pregnant or have young children. [5]
- They may have been subject to violence (including sexual violence) before, after or during migration leading to a variety of mental and physical care needs.

- They are vulnerable to exploitation or domestic violence. Asylum seeking women are often isolated and struggle to access services. This isolation can lead to mental distress. [3]
- Women may have less ability to support themselves due to childcare responsibilities, poor literacy and little professional experience. Leaving them at risk of poor living conditions and of isolation. [3]

Asylum Aid has produced a [charter on the rights of asylum seeking women](#).

#### *Lesbian, gay, bisexual and transgender migrants*

- Asylum cases on the basis of sexual orientation are increasingly common in the UK. Equality legislation in the UK is at odds with legislative discrimination against LGBT groups in various other countries. [6]
- Their claims for protection may be long and legally complicated.
- They may be experiencing mental and emotional problems as a result of persecution
- They may be experiencing physical problems due to torture or abuse.

#### *The victims of trafficking*

- Cases of human trafficking are on the rise in the UK.
- Men, women and children are trafficked to the UK for sexual exploitation, domestic servitude, forced labour, criminal activity and other forms of abuse.
- The victims of trafficking may have various social care needs linked to physical and mental health issues resultant from the experience of trafficking.

The Government has produced [guidance for professionals to help them recognise trafficking victims and take appropriate steps](#) to help them seek the appropriate assistance.

## Background: Identifying and responding to social care needs and the asylum process

There are several key points in the asylum seeking process that provide an opportunity for identifying and responding to social care needs, as illustrated below. There needs to be an emphasis on:

- screening and assessing social care needs as early in the asylum process as possible
- prompt and timely assessments in relation to the Children Acts or community care
- Ensuring continuity of care through the dispersal process, the process of becoming a refugee or leaving care. Support at the end of an asylum claim when individuals are facing return or are being held in immigration holding centres.



**Figure 1:**

1. Plans for unaccompanied asylum seeking children who have been given discretionary leave to remain in the UK involve considering three possible outcomes of a grant of status and leave to remain in the UK, return to the country of origin or remaining in the UK without any status being granted.

## Pointers for good practice

### Pointers for good practice: Principles for practice

From the research evidence, six principles to drive good practice in social care for asylum seekers and refugees have been identified. These are consistent with values and principles underpinning good practice in social care more broadly and a rights-based approach to meeting social care needs.

#### **1. A humane, person-centred, rights-based and solution-focused response to the social care needs of asylum seekers and refugees**

Asylum seekers and refugees should be seen as individuals first and foremost; with the same rights as UK nationals to be listened to and to have their needs identified and appropriately responded to, with understanding both of their current situation and of their future aspirations. In the case of children and young people this means viewing the child as a child first, acting in their best interests and taking account of their wishes and feelings. This will require an approach that is flexible, solution-focused and innovative in order to meet the complexity and diversity of needs.

#### **2. Respect for cultural identity and experiences of migration**

Asylum seekers and refugees are not a homogenous group; they come from a wide range of countries, in different circumstances, and have diverse abilities and skills. Providing good quality social care hinges on positive regard for cultural identity, the diverse experiences of migration, and the capacity of staff to translate this principle into practical action.

#### **3. Non-discrimination and promotion of equality**

To be treated positively, with regard to the possibility of discrimination, and to receive the same treatment as British citizens. This means that the role of social care services is to ensure that asylum seekers and refugees are properly supported and their social care needs met. It implies working within an equality and diversity framework and putting measures in place to ensure that asylum seekers and refugees receive a fair and just response.

#### **4. Decision-making that is timely and transparent and involves people, or their advocates, as fully as possible, in the process**

Unnecessary delays in decisions about the provision of social care are avoided and the process is transparent with a demonstrable commitment to involving asylum seekers and refugees and their advocates in the process. A clear process that details assessment, eligibility criteria, involvement of advocates and processes for appeal should be clearly laid out.

#### **5. Promotion of social inclusion and independence**

Working to promote inclusion and support the autonomy of asylum seekers and refugees within the UK or through the process of returning home is central to the task of social care. It implies working with different scenarios (staying in the UK/returning home) to plan for the future and facilitating self-organisation. It also means mainstreaming the needs of asylum seekers and refugees within organisational agendas.

## **6. A holistic approach**

Promoting the rights of asylum seekers and refugees is highly unlikely to be achieved by one organisation alone. The complexity of individual circumstances and histories demands robust and well developed partnership working across organisational boundaries at both strategic and operational levels.

### **Pointers for good practice: Organisational foundations**

#### **Pointers for good practice in social care for asylum seekers and refugees**

These pointers for good practice have been developed from a report that involved a systematic review of the literature and a practice survey, including the views of asylum seekers and refugees, social care providers and refugee and community organisations (see SCIE Report 31 [Good practice in social care for refugees and asylum seekers](#)).

#### **Organisational commitment**

Securing organisational commitment to promoting the wellbeing of asylum seekers and refugees, as an integral element of mainstream social care policies, is an important first step and will facilitate consideration of the specific needs of asylum seekers and refugees in policy and service developments.

#### **Development of strong multi-agency partnerships**

Multi-agency partnerships with a clear focus on asylum seekers and refugees, at both strategic and operational levels, will facilitate the development of access to appropriate social care provision. It is clear that the social care needs of asylum seekers and refugees are intertwined with needs in relation to health, housing, benefits, social support and, for children and young people, education and secure relationships.

#### **A strategic approach**

The development of a local strategy will enable local authorities, and their partners, to plan and develop services for current and future populations of asylum seekers and refugees, as well as other migrant populations. Strategy development should be based on a joint strategic needs assessment (JSNA), which local authorities and clinical commissioning groups have been under a statutory duty to produce since 1 April 2008. This will facilitate planning for changes in the population at a local, regional and national level and highlight the implications for staffing and service delivery (e.g. the development of culturally appropriate services or increasing numbers of older refugees). [Statutory guidance on joint strategic needs assessments and joint health and wellbeing strategies](#)

Consider the application of existing policies that provide a framework for the provision of social care – particularly equality and diversity policies, the safeguarding agenda and the implementation of personalisation and integration policies.

Be clear about the outcomes to be achieved so that they drive the commissioning process and aim toward outcomes related to promoting well-being and tackling inequalities.

Acknowledge the contribution of voluntary and community sector initiatives, and the importance of sustainable investment to enable these organisations to build capacity. Use evaluation tools to assess the impact of implementation on outcomes for asylum seekers and refugees

### **Involving asylum seekers and refugees**

Involving refugee and community organisations and asylum seekers and refugees in the JSNA and related processes for service development and for provision is acknowledged good practice and the outcome will be more appropriate provision. The methods for this need to:

- reflect an understanding of the diversity of asylum seekers and refugees, their communities and differing needs
- include specific efforts to outreach and engage with asylum seekers and refugees with specific social care needs, relating to physical disability, learning disability, mental health and age
- pay specific attention to good practice in translating and interpreting
- include investment in capacity-building to participate
- find appropriate methods for recognising the contribution of refugees and asylum seekers and reimbursing expenses incurred in participation.

### **Workforce development**

Workforce development is needed to ensure a focus on and expertise in relation to asylum seekers and refugees with specific social care needs. This includes:

- Local authority specialist teams with a focus on asylum seekers and refugees
- Engage specialist organisations for training and guidance
- Training and supervision for social care providers and practitioners, to strengthen the capacity to respond positively to the diverse needs of asylum users and refugees by ensuring an understanding of:
  - human rights and asylum seekers and refugees
  - legislation and policy
  - circumstances pre-and post-arrival
  - asylum seeker and refugee perspectives
  - processes of social exclusion
  - health and social care needs of asylum seekers and refugees
  - high-quality and culturally appropriate provision
  - the role and contribution of refugee and community organisations and advocacy.
- Training for senior officers, members and partners on Local Strategic Partnerships

- Training for refugee and community organisations ideally would be undertaken alongside social care providers to facilitate mutual understanding of roles and responsibilities. In addition there may be a need for training in relation to:
  - Social care needs of asylum seekers and refugees:
    - children and young people
    - mental health awareness and strategies to tackle community stigma
    - disabled people -older refugees
    - specific needs of women, LGBT groups
    - other specific needs (e.g. sensory impairment, learning disability), working with the victims of trafficking and working with the victims of torture.
  - Role and function of social services departments.
  - Eligibility for assessment and provision.
  - Referral pathways to health and social services.

### **Monitoring and review**

- Equalities monitoring is an essential component of performance monitoring and is required by equalities legislation, which includes a duty for public bodies to eliminate unlawful discrimination and promote equality of opportunity. Commissioners and social care providers need to ensure that current monitoring systems include asylum seekers and refugees to enable identification of inequalities in their access and experience of social care. For statutory providers, equalities monitoring will form part of an overarching strategy showing how it will progress the equalities and inclusion agenda.
- Assessing the extent to which positive outcomes are achieved will rest on having identified clear outcomes either for a service or for an individual. The assessment process could take the form of consultation with refugee organisations or other feedback methods, including the routine use of appropriate questionnaires.

## **Pointers for good practice: Ensuring access**

### **Providing accessible information**

There are many opportunities through the asylum process to provide information to asylum seekers about their rights and responsibilities of local authorities in relation to social care.

Information needs to be made available in appropriate formats – for example, in a child-friendly format for unaccompanied asylum-seeking children and young people. Refugee and community organisations play an invaluable role in terms of providing information

about rights and signposting and supporting asylum seekers and refugees to access appropriate services.

### **Ensuring effective communication**

Key elements for good practice in working with interpreters with asylum seekers and refugees are:

- Developing a good relationship between the interpreting service and the service provider. This means building up working relationships with local interpreting agencies in order to gain a better knowledge and understanding of each other's work.
- Ensuring that interpreters understand the situation of asylum seekers and refugees and the context for service delivery.
- Securing the help of the most appropriate bilingual co-worker in liaison with the interpreting agency.
- Negotiating and clarifying roles so that practitioners and interpreters work well together and build the confidence and trust of asylum seekers and refugees.
- Briefing and debriefing for the interpreter in order to clarify any issues and develop a better understanding of an individual's needs.
- Maintaining continuity of bilingual co-workers, to enable asylum seekers and refugees to feel safe, build up trust and avoid replication of information-giving.
- Reflective practice for both practitioners and co-workers to enable them to reflect on the emotional impact of working with asylum seekers and refugees.

Communication with asylum seekers and refugees, who have additional needs, for example sensory impairments or learning disabilities, will also need consideration. Interpreters are likely to have training needs in terms of understanding the service context and specific issues that asylum seekers and refugees may be experiencing and which may have implications for communication (e.g. domestic violence, abuse, or mental health issues).

See Raval, H. (2006). Mental health training for bilingual co-workers in the context of working with people seeking asylum and refugees. *Primary mental health care*, 4, 1, 37–44. This paper outlines training for bilingual co-workers (i.e. interpreters) and practitioners working with children and, families, adults and older adults.

Refugee Council offers training on working with interpreters.

### **Advocacy**

Advocacy is needed at both an individual level and a community level to:

- increase the understanding of the social care needs of asylum seekers and refugees
- increase choices and access to appropriate provision
- empower individuals and facilitate participation in the decision-making process.

The Children's Commissioner has recommended that all children should be appointed a guardian who is independent and can act as an advocate and enable children to participate effectively in reviews.

The Mental Health Act 2007 introduced the provision of IMHA to ensure that detained patients understand their rights under the Act and are supported to participate in decisions about their care and treatment.

Mind has developed a training programme for refugee and community organisations (RCOs) in mental health advocacy.

### **Timely and streamlined assessment of needs for social care**

- Screening assessment to identify social care, alongside healthcare needs as early as possible in the asylum process – ideally on arrival in the UK.
- Protocols to support referral for more thorough assessment and arrangements for the provision of social care services.

### **One-stop services**

These can be:

- universal gateways to social care (e.g. one-stop shops, primary care)
- organisations specifically geared to meeting the needs of asylum seekers and refugees
- organisations that are geared to meet the needs of specific client groups (e.g. disabled people's organisations, organisations for children and young people, people with mental health problems, women, older people or people experiencing specific health conditions such as HIV).

It is important that these services are:

- knowledgeable and sensitive to the needs of asylum seekers and refugees and the process of migration
- knowledgeable about social care and the local processes for accessing support
- able to signpost and refer people to appropriate social care services, providing them with the support to access services as necessary
- referral procedures and pathways, supported by protocols, in place to ensure access and that needs are appropriately assessed and met.

### **Clear and appropriate eligibility criteria for services**

- All asylum seekers and refugees are able to have their needs for social care assessed, whatever their circumstances.
- Assessment of asylum seekers and refugees should be primarily focused on needs for social care services.

- Local thresholds for services should be 'equality impact' assessed to establish whether they are appropriate in the context of the complexity of needs that asylum seekers and refugees may have.
- There needs to be clear guidance about what services asylum seekers and refugees of all ages and different circumstances can expect and are entitled to from their local authority.
- If asylum seekers are not eligible for social care services they should be assessed under the Human Rights Act to establish whether not providing appropriate services would be a breach of their human rights.
- For refused asylum seekers, detailed practice guidance on assessing and supporting children, families and adults is available from the [NRPF network](#).

## Pointers for good practice: High-quality culturally sensitive service provision

To provide services to the highest standards for social care, commissioners and providers will need to:

- ensure the service provided is culturally competent and enables asylum seekers and refugees to include culturally specific forms of support, including faith-based approaches
- ensure that services promote independence and wellbeing through greater consideration of direct payments and personal budgets for those in the asylum system and refugees
- protect, address abuse and neglect and take action against those who cause harm. Help people to recognise and cope with their vulnerability
- ensure access to counselling and culturally appropriate mental health interventions.

In addition, a commitment to secure a solution, the capacity to be innovative, flexibility, a desire to ensure parity with the UK population and an understanding of the system were identified as important characteristics of a positive response to individual needs by the knowledge review.

Community and refugee organisations are well placed to deliver social care interventions that are culturally appropriate and trusted by asylum seekers and refugees.

Perry, J. and El-Hassan, A. (2008) [More responsive public services? A guide to commissioning migrant and refugee community organisations](#), York: Joseph Rowntree Foundation.

## Pointers for good practice: Promoting social inclusion, integration and independence

Promoting social inclusion, integration and independence to enable achievement of full potential through recognising and building on the strengths of asylum seekers and refugees should be the focus for social care providers. This means:

- facilitating integration into the local community
- providing support at times of distress, vulnerability or illness
- access to peer support and mentoring
- volunteering, befriending, development of peer support networks.

Community and refugee organisations have a particular contribution to make in relation to facilitating self-organisation and the development of peer support networks as well as providing activities, such as English language classes, that will contribute towards promoting inclusion and wellbeing.

## Pointers for good practice: Good practice for children and young people

For children and young people additional pointers to good practice are:

- a positive approach to young people based on exchange and dialogue
- provision of safe age-appropriate accommodation under Section 20 of the 1989 Children Act. This includes:
  - adequate placement resources able to take young people at short notice
  - carers who have had appropriate training and have a positive approach to young people
  - good support for carers from the local authority, or other appropriate agency.
- support for refugee families, including:
  - a focus on child welfare as well as child protection
  - action to address child poverty as a result of the family having insufficient accommodation and means to support themselves
  - support for children who may be caring for a parent with social care needs.
- attention to emotional welfare as well as ensuring other needs are met including access to health services. This means recognition of the trauma and/or grief children and young people may have experienced and providing safe and stable relationships and access to support as appropriate.
- engagement in age-appropriate training and education and the provision of leisure activities, including links with community groups and voluntary organisations in relation to education, social and cultural networks

- dedicated teams with a sufficient level of commitment and expertise and readily available resources for support with language (ideally with relevant language speakers in the team)
- good use of the CAF and information-sharing across agencies with an assessment process led by qualified social workers
- preparation for independence and development of appropriate pathway plans, including planning for different scenarios, which might include a grant of status and leave to remain in the UK, return to the country of origin or remaining in the UK without any status being granted
- assessment and access to appropriate services for children and young people who have been trafficked.

**Broadbent, C. (2010). Safeguarding Children from Abroad, including private fostering and the use of interpreters**

**London Safeguarding Children Board. London Trafficked Children Toolkit 2011**

**Kane, S. Needs assessment and planning for asylum seeking refugee young people: a good practice note.**

**Kane, S. The ecological approach to the assessment of asylum seeking and refugee children.**

**The Children's Society. Supporting refugee young carers and their families.**

## Key messages from the research

This guide has been developed from a focused literature review and a practice survey to establish the evidence for good practice in meeting the social care needs of asylum seekers and refugees (see [SCIE Report 31](#))

### Focused literature review

The aim of the literature review was to examine the research evidence to identify positive outcomes and good practice in social care provision for asylum seekers and refugees. It involved a systematic search of published and unpublished material and web-based sources for the period 2000–2008. In 2013 this initial search was updated to include items from 2008 onwards.

### Practice survey

The aim of the practice survey was to explore what is currently happening in social care provision for asylum seekers and refugees. This included:

- exploring the views of asylum seekers and refugees on needs for social care and their suggestions for good practice in responding to these
- consulting with practitioners and third sector organisations on their experience and views of good practice in social care for asylum seekers and refugees
- Identifying practice examples.

[The full research report.](#)

### Key findings

- The literature identified was patchy, with only a small number of studies evaluating outcomes from social care provision. In relation to children and young people, there were a healthy number of studies but the majority concerned unaccompanied asylum seeking children, rather than refugee or asylum seeking families. For adults a reasonable number of studies were identified in relation to mental health, although these were predominantly focused on mental health needs. Few papers were identified looking at social care provision for disabled asylum seekers and refugees and only one paper considered older refugees. A small number of other papers identified relevant issues, such as training and advocacy. The updated search, for evidence from 2008 onwards also showed a very small number of papers concerning refugees and asylum seekers and social care specifically. Like the original search there were a higher number of studies looking at unaccompanied asylum seeking children than examining the situation for adults. There was some notable work concerning female refugees and asylum seekers, LGBT groups and the victims of human trafficking. The search identified several new

pieces of legislation and guidelines, and tool kits which may be of use to social care professionals.

Another issue that emerged from the 2013 search was concern surrounding the wellbeing of migrants detained under the UK Immigration Act in immigration removal centres (sometimes referred to as detention centres). The literature highlighted both the adverse effects of detention on detainees and also a lack of access health and social care services.

- The practice survey indicated that there are significant problems for asylum seekers and refugees accessing social care provision. For children and young people, the Children Acts provide a framework for provision and a number of practice examples illustrated how their needs could be met both by local authorities and refugee and community organisations, usually working in partnership to deliver positive outcomes. For adults, access to social care provision was more restricted with a lack of clarity about eligibility, language, lack of awareness of the function and nature of social services, limited understanding of the social care needs of asylum seekers and refugees, trust and an absence of culturally appropriate provision proving to be major barriers. Relatively scant evidence was found of a strategic approach in this area and few examples of aggregated needs assessments identified. The majority of good practice identified related to provision by refugee and community organisations, local authority children's services or immigration and asylum teams.
- The synthesis of the findings from the literature review and the practice survey indicated some broad principles that need to underpin the delivery of social care services for asylum seekers and refugees. These are:
  - a humane, person-centred, rights-based and solution-focused approach to the needs of asylum seekers and refugees
  - respect for cultural experiences and migration
  - non-discrimination and promotion of equality
  - decision-making that is timely and transparent and involves people, or their advocates, as fully as possible in the process
  - promotion of social inclusion and independence
  - A holistic approach.

There was strong agreement from both the literature review and the practice survey as to what good practice in social care should look like. The areas for suggested good practice are:

### **Improving access**

- Clarity regarding entitlement to social care and responsibilities for provision for refugees, asylum seekers and refused asylum seekers. There is a need to

review the appropriateness of thresholds for care and to ensure strategies are in place to increase access to social care. These include provision of accessible information and support, universal gateways, availability and use of interpreters and outreach via community organisations.

- A full and thorough assessment of needs for social care as early as possible in the asylum process.
- Early identification of and access to psychological and therapeutic support to address post-traumatic stress disorder (PTSD) and other mental health problems delivered within a holistic approach.

### **Effective communication**

- Effective communication, including readily available and effective interpretation services, with an understanding of both the cultural and service context.
- Advocacy, with the aim of increasing choices and access to appropriate provision and empowering individuals.

### **High-quality service provision**

- Focus on outcomes.
- Culturally sensitive and competent provision, with staff understanding the cultural context, and the issues pre-and post-arrival in order to respond appropriately to the diverse needs of refugees and asylum seekers.
- Provision of training and supervision for social care professionals.
- Engagement and working in partnership with community organisations that have specialist knowledge.

### **Facilitating self-organisation and innovation**

- Participation and involvement in service provision.
- Services that enable asylum seekers and refugees to self-organise and develop their own sources of support.
- Provision of services by community organisations and including asylum seekers and refugees.

### **Strong partnership working**

- Working across organisational boundaries to deliver services that respond to needs in a culturally appropriate way.
- Commissioning community and voluntary sector organisations to deliver social care.
- Co-location of services and multi-agency working.

Six critical steps were identified that provide a foundation for good practice:

- Securing organisational commitment to promoting the wellbeing of asylum seekers and refugees.
- The development of strong multi-agency partnerships with a clear focus on asylum seekers and refugees, at both strategic and operational levels.
- The development of a local strategy based on a joint strategic needs assessment to enable local authorities and their partners to plan and develop services for current and future populations of asylum seekers and refugees, as well as other migrant populations. This includes the application of existing policies that provide a framework for the provision of social care – particularly equality and diversity policies. It also includes a clear acknowledgement of the contribution of community and voluntary sector initiatives and sustainable investment in these to enable them to further build their capacity.
- Methods for engaging with and involving a diverse range of asylum seekers and refugees in the development of appropriate services.
- Workforce development, including training and supervision, to strengthen the capacity of staff to respond positively to the diverse needs of asylum seekers and refugees.
- Monitoring and review to assess the extent to which positive outcomes are achieved and equalities monitoring to assess access to, and experiences of social care by asylum seekers and refugees.

Local authorities need to be supported in their role of providing access to appropriate personalised provision for asylum seekers and refugees by recognition of their responsibilities to preserve the rights of asylum seekers and refugees. This support includes appropriate levels of funding to enable local authorities to discharge their responsibilities and clear guidance from the Department of Health (DH) and the Home Office.

The review identified significant gaps in the evidence base for good practice in social care. There is a need for further research in this area including:

- mapping access to community care assessment and access to personal social services
- focusing on the needs and service delivery options for children in families, disabled asylum seekers and refugees, older refugees, women and other groups that have also been identified as vulnerable
- evaluating outcomes for social care interventions for asylum seekers and refugees
- processes for mainstreaming the needs of asylum seekers and refugees within broader local authority agendas.

## Practice examples

### **Leeds Asylum Seekers Support Network (LASSN)**

The Befriending Project provides the opportunity for isolated asylum seekers and refugees to forge a relationship with a supportive adult for a period of six to 12 months. Volunteer befrienders are matched with clients for regular visits. The aim is to familiarise people with Leeds, help them integrate into the local community, gain access to other services and help alleviate the emotional stress caused by past trauma and the asylum process.

The English at Home Project matches volunteer tutors one-to-one, (Tuition in the home is offered for those for whom there are barriers to accessing ESOL classes in the community. Asylum-seeking women often cannot leave home due to cultural barriers and childcare responsibilities, and do not have the finances to make formal childcare arrangements. The aim is to help access mainstream services through improving their level of English, providing a minimum level of advocacy and interpreting and orientation into the UK.

The Grace Hosting Project aims to support the many refugees and asylum seekers who experience homelessness at some point during their asylum claim. Grace Hosting volunteers provide a hot meal and a bed for the night to people who have nowhere else to turn.

#### *Further information*

LASSN Ebor Court, Westgate, Leeds LS1 4ND

Tel: 0113 373 1759

<http://lassn.org.uk/>

### **Multi-agency for refugee integration in Manchester (MARIM)**

MARIM was created to support MAF (Multi-Agency Forum), local communities and the wide range of organisations engaged in working with asylum seekers, refugees and other migrants to:

- Engage in consultation with key organisations that provide services for asylum seekers, refugees, migrant workers and the Roma, to identify areas for improvement around access to and delivery of services.
- Support development of partnerships among service providers to facilitate the improvement of services in areas where gaps or potential improvements to those services have been identified.
- Engage with and inform citywide strategic planning to ensure that plans consider the needs of refugees and asylum seekers.
- Disseminate information about key changes in legislation and policy with regard to the migrant population.
- Raise awareness of the benefits of a multi-cultural society and promote good community relations in Manchester

MARIM is a unique provision within Manchester City Council with links and networks covering over 800 organisations across both Greater Manchester and the North West. It offers a diverse range of services including: facilitating and delivering multi agency forums at both a local and citywide level; providing support to organisations to ensure that they are able to respond to changing demands placed upon them and, disseminating key information via its extensive email networks.

MARIM ensures that agencies are able to respond effectively to changes in demand for their services caused by migration. Recent examples of the work that MARIM has undertaken includes organising training for service providers on communication skills with people for whom English is not first their language, translation and interpreting services, welfare reform and on domestic violence.

*Further information*

MARIM (Multi-Agency Refugee Integration in Manchester), Directorate for Families, Health and Wellbeing Manchester City Council  
Victoria Mill, 2nd Floor Lower Vickers Street, Miles Platting, Manchester M40 7LH  
Tel. 0161234 5590  
email: [e.araya@manchester.gov.uk](mailto:e.araya@manchester.gov.uk)  
<http://www.manchester.gov.uk>

**Migrant and Refugee Communities Forum (MRCF), Kensington and Chelsea**

The Forum is a user-led, community forum working to promote the rights of migrants and refugees in London. The Forum is a registered charity with membership consisting of over 40 migrant and refugee organisations.

The Forum's work addresses all aspects of the social exclusion of migrants and refugees with the aim of meaningful integration. It provides information, advice and support to individuals and community organisations, conducts research and works in partnership to influence policy and facilitate better understanding of migrants' needs and barriers to inclusion and integration.

The organisation also works in partnership with the statutory sector to ensure access to services, opportunities and to advocate and develop additional support based on the needs of the local migrant and refugee communities. For example, The Forum runs mentoring programme for isolated migrants and refugees with mental health problems who are often referred by NHS providers. Mentoring is intensive and practical (group activities and ESOL classes) and it is a lifeline for vulnerable people while they are waiting to receive treatment.

*Further information*

Migrant and Refugee Community Forum 2 Thorpe Close London W10 5XL. Tel: 02089644815  
email: [info@mrcf.org.uk](mailto:info@mrcf.org.uk)  
<http://migrantforum.org.uk/>

**NRPF (No Recourse to Public Funds) network**

Islington Council initiated the development of the NRPF network in 2006. It is a network of local authorities focusing on the statutory response to destitute people from abroad

with NRPF. The network works to share information and good practice among local authorities and other agencies; it works with government departments to raise the practical and policy issues of NRPF and facilitates reimbursement for local authorities of the costs of providing support to people with NRPF. The network develops strategic responses to managing the issue of NRPF and undertakes activities at a practice, policy and strategic level by providing guidance and information on service provision, legal obligations and entitlement to services, developments in case law, research and policy. The network researches and monitors the scale of the issue and the associated costs to local authorities and other agencies, facilitating information-sharing and providing training for local authorities.

*Further information*

NRPF Network C/o London Borough of Islington, Room G11, Islington Town Hall, London N1 2UD

Tel: 020 7527 7121

email: [nrpf@islington.gov.uk](mailto:nrpf@islington.gov.uk)

<http://www.nrpfnetwork.org.uk/Pages/Home.aspx>

**RASA (Refugee and Asylum Seeker Advocacy), Wakefield**

RASA provides interpreting, advocacy and information services for refugees and asylum seekers who are resident in the Wakefield district. RASA was established in 2001 as a result of local authority funding from the European Integration Fund, and was supported by this means until 2005. The aim had always been to make RASA self-funding, and this was achieved through Big Lottery Fund funding. The aims of RASA are to:

- provide a focus for support to enable refugees and asylum seekers to access the basic services to ensure their health, wellbeing and safety
- provide advocacy to build people's confidence to support themselves and promote their quality of life
- promote integration into mainstream society
- Provide a community focus where refugees from different cultures can meet to find friendship and share experiences.

Asylum seekers and refugees may be signposted to RASA from the Wakefield 'One-stop shop', a service for residents of Wakefield where they can access information and services. RASA refers clients to social services as appropriate, if specific needs are identified.

*Further information*

RASA 13 Upper York Street Wakefield West Yorkshire WF1 3LQ

Tel: 01924 368855

email: [Daniel@rasa-advocacy.org.uk](mailto:Daniel@rasa-advocacy.org.uk)

**Stockport Interpreting Unit (SIU) - Ethnic Diversity Service**

Stockport Council's Ethnic Diversity Service (EDS) supports refugees and asylum seekers by providing specialist English language teachers, bilingual teaching assistants and bilingual community learning mentors in schools and children's centres. In addition

to its support in educational settings, the Ethnic Diversity Service operates Stockport Interpreting Unit (SIU) which supplies interpreters to statutory and non-statutory organisations. EDS works in partnership with a range of practitioners from different sectors and community groups to help ensure that the needs of refugees and asylum seekers in Stockport are met, and is a key partner in the Gateway Protection Programme.

EDS works closely with the Council's Social Care Team, and has strong links with organisations that work with asylum seekers and refugees. Stockport Interpreting Unit, set up in 1986, plays an essential part in helping refugees and asylum seekers to access public services and integrate into the community. SIU runs an accredited interpreter training programme, and provides highly skilled interpreters for face-to-face and telephone interpreting in a range of settings such as health, education, housing, local government and legal. All interpreters are trained in safeguarding.

SIU will supply interpreters to any organisation in Stockport or its surrounding areas. There is a charge for services, but prices are competitive and the service is committed to delivering a high-quality service.

EDS offers a limited signposting service on behalf of Stockport Council for residents who are speakers of other languages.

#### *Further information*

Stockport Interpreting Unit Bann Street Stockport SK3 0EX  
Tel: 0161 477 9000  
email: [eds.admin@stockport.gov.uk](mailto:eds.admin@stockport.gov.uk)  
[www.stockport.gov.uk](http://www.stockport.gov.uk)

#### **Students and Refugees Together (START), Plymouth**

START was developed as a response to local need and concerns about isolation and racism in the local area. START's mission is to work in partnership with families, individuals and organisations to facilitate the transition of refugees from people in need to self-reliant contributors to their local communities. START recognises the skills and experience asylum seekers and refugees bring to Plymouth and START services include individual casework, a fortnightly 'cultural kitchen', an allotment, a women-only sewing group and other activities as needed.

Originating from an unfunded pilot, collaboration was established with the University of Plymouth which allowed the skills of students from social work and other backgrounds, to be used safely to support refugees, as part of their professional training. From these beginnings START has developed into a funded, staffed service as well as being a registered charity. They are a member of the Advice Transition consortium and the lead partner in the Refugee Housing Support Service (RHSS), as well as having a range of informal partnerships. As a learning organisation, START uniquely utilises the student placement as a resource which, together with the strengths and skills of people themselves, works out what is needed and how to achieve it. As well as providing advocacy and assisting refugees to settle within a new community or to move to new geographical locations of their choice, START seeks to advance the education of social work students in training by providing learning experiences which contribute to their personal and professional development.

Students offer a holistic, needs-led service to refugee families and individuals by:

- making assessments of the complex difficulties experienced by multi-generational families and individuals
- giving information and practical support to help them to access existing services and to integrate into the community
- identifying barriers in existing agency practice to this group
- addressing those barriers and reporting on the need for policy and procedural change
- working constructively with other resources in the city and nationally to promote cost-effective and integrated services.

START uses a 'practice based learning' approach, encouraging students to explore possibilities for themselves, and use their own initiative to find solutions for the needs of asylum seekers and refugees. The students are supervised and supported by qualified staff, who has received training in student support.

Individual students, programme panels and external examiners give feedback on the suitability of START as a placement for students. Work has been undertaken to produce video statements about student experiences of working for START for the website. An externally conducted service evaluation can also be found on the website.

#### *Further information*

START Unit 4 HQ Building, 237 Union Street Plymouth PL1 3HQ

Tel: 01752 255200

email: [info@studentsandrefugeestogether.com](mailto:info@studentsandrefugeestogether.com)

#### **UASC Team, Royal Borough of Kingston**

In the Royal Borough of Kingston the Unaccompanied Asylum Seeking Children (UASC) team provides a looked after and leaving care service to young people up until the age of 21 (24 if in education or training in compliance with the agreed pathway plan). All unaccompanied asylum seeking children under the age of 18 are 'looked after', under Section 20 of the Children Act 1989. Once reaching age 18 they can receive advice and support services under the Children Leaving Care Act 2000. The team consists of a manager, four social workers, two personal advisors and business support/administration and provides:

- A stable specialist team to work with the young people to identify and provide flexible support in response to their needs
- Good quality accommodation to young people with key work support, which is seen as essential to emotional and physical wellbeing
- Activities for young people over the school/college holiday period, using proactive use of grant funding. These activities include enrolling young people into English classes, activities such as ice skating, trips to the cinema and to attractions such as the London Eye or cultural events.

The team works in partnership with young people and views careful planning over a period of time and at critical transition points as essential. Young people's care is reviewed regularly and young people encouraged to give feedback through a document called 'Have your say'. The team provides ongoing support, including financial support as laid out in a policy for every care leaver.

The team is well linked with a range of organisations, particularly:

- benefit agencies to enable the young people to access appropriate benefits and support grants
- immigration Services
- housing services and accommodation providers
- health services (developing work in relation to emotional well-being, physical and sexual health)
- education, including the Refugee Education Service, colleges and university
- leisure providers

*Further information*

UASC Team Learning and Children's Services  
1st Floor Guildhall 2 Kingston upon Thames KT1 1EU  
Tel: 020 8547 5234  
email: [asylum@rbk.kingston.gov.uk](mailto:asylum@rbk.kingston.gov.uk)

**West Midlands Strategic Migration Partnership (WMSMP)**

WMSMP runs the following training course:

ASIRT - Birmingham - Training on access and entitlement to health care  
'Understanding local migrant populations and their access and entitlement to health care'

Immigration status and the reasons for migration to the UK play an increasing role in affecting individuals' rights and entitlements to health and social care. Guidance on entitlement to health care is not always clear and health professionals may struggle to understand the rules relating to GP registration and access to primary and secondary care for migrants.

Reports at a national and local level have highlighted the difficulties some new migrants have in registering with a GP practice and accessing other health services which they require. This course was developed in response to the need for training on migration and health for health and social care professionals identified within the West Midlands.

It was originally developed by Dave Newall (West Midlands Strategic Migration Partnership), in conjunction with colleagues from health and voluntary sector with extensive experience working with asylum seekers and new migrant communities. The course is now delivered by ASIRT, a local charity that provides free advice and advocacy to migrants in the West Midlands on immigration, asylum and related human rights matters. It has received accreditation from the Learning for Public Health

network and has been delivered to a number of primary care trusts, CCGs and voluntary sector organisations in the West Midlands since it was piloted in 2011.

**Aim:** The course aims to increase participants' understanding of the scale and types of migration, the effect this has on entitlements to health and social welfare and the barriers migrants may face in accessing health service. The course covers:

- An overview of migrant populations at a local level
- Understanding who the new migrants are, their reasons for coming to the UK and their rights and entitlements
- Attitudes to migrants – community and professional perspectives
- Entitlements to health care & social care and current Department of Health guidance
- Exploring barriers to accessing health for new migrants
- Developing solution to barriers which new migrants and health professionals may face
- Case studies which enable participants to explore access, rights and entitlements of specific migrant groups.

On completion participants will:

- Understand the complexity of migration and its impact at a local level.
- Have explored their own and the wider community's attitudes to migration.
- Be able to describe a range of different migratory routes and the effect on entitlement to health and social care.
- Be able to understand and respond appropriately to barriers new migrants may have to accessing health services in the area.

The course is interactive and designed to assist staff to reflect on their current practice; to consider how learning from the session will be applied in the workplace; and change the way they might work with patients from migrant backgrounds. It is aimed at health and social care professionals working in a frontline capacity with new migrants or who have responsibility for patient registration.

*Further information*

Dave Stamp – Project Manager ASIRT 0121 233 4295,  
email: [davestamp@asirt.org.uk](mailto:davestamp@asirt.org.uk)  
or Dave Newall 07514486515

## Resources

### Further reading

#### **Social care, asylum seekers and refugees**

Aspinall, P. and Watters, C. (2010). **Refugees and asylum seekers: a review from an equality and human rights perspective** Equality and Human Rights Commission.

British Institute for Human Rights: **Your human rights – a guide for refugees and asylum seekers.**

Patel, B. and Kelley, N. (2006) **SCIE race equality discussion paper 02: the social care needs of refugees and asylum seekers.**

Network, N. (2011). **Social Services Support to People with NRPF: A National Picture**

#### **Children and young people**

Border, G.B.H.O. and Immigration, A. (2008). **Better outcomes: the way forward: improving the care of unaccompanied asylum seeking children** Great Britain. Home Office. Border and Immigration Agency.

Broadbent, C. (2010). **Safeguarding Children from Abroad, including private fostering and the use of interpreters.**

Brownlees, L.F., Nadine. (2010). **Levelling the playing field - A UNICEF UK report into provision of services to unaccompanied or separated migrant children in three local authority areas in England**

Chase, E., Knight, A. and Statham, J. (2008) ***The emotional well-being of young people seeking asylum in the UK***, London, British Association for Adoption and Fostering.

Community Care (2011). **Research: Good practice when working with refugee and asylum-seeking children**

Cox, P. (2011). "Issues in safeguarding refugee and asylum-seeking children and young people: research and practice." ***Child Abuse Review, 20(5), September-October 2011, pp.341-360.***

Crawley, H. (2006) **Child first, migrant second: ensuring that every child matters**, London, Immigration Law Practitioners' Association.

Dorling, K. (2009). . (**Seeking Support - A Guide to the Rights and Entitlements of Separated Refugee and Asylum Seeking Children**

Dorling, K. (2010). "Care of former asylum-seeking children." ***Children and Young People Now, 9.11.10, pp.24-25.***

FRONTEX (2010). **Unaccompanied Minors in the Migration Process**

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## Guidance, toolkits, training resources and useful organisations

### **Good practice guidance and toolkits**

Burnett, A. (2002) ***Meeting the health needs of refugee and asylum seekers in the UK: an information and resource pack for health workers***. This resource pack on meeting health needs of refugees and asylum seekers contains practical information, details of useful contacts and resources and includes examples of good practice from around the UK.

Cooke, E. (ed.) and Phillips, I. (producer) (2005) ***On new ground: supporting unaccompanied asylum-seeking children and young people***(audio series), Dartington, Research in Practice. This CD provides an overview of key messages from research in relation to asylum-seeking children and young people, having experienced or witnessed traumatic events and been separated from their families.

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Aimed at professionals who carry out needs assessments and create pathway plans for asylum-seeking and refugee young people, this note also highlights additional areas to be considered when working with young people leaving care.

Kane, S. (2006) **[The ecological approach to the assessment of asylum seeking and refugee children](#)**.

A guide for social workers to looking at the asylum seeking and refugee child in context, using the Framework for the Assessment of Children in Need and their Families.

London Safeguarding Children Board (2009) ***London trafficked children toolkit***. Provides guidance for professionals and volunteers from all agencies involved in safeguarding and promoting the welfare of trafficked children.

NRPF network (2008) ***Practice guidance for local authorities: assessing and supporting children and families from abroad who have no recourse to public funds***(NRPF)

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**Families and former looked-after children who have no recourse to public funds (NRPF) for support from local authorities under the Children Act 1989.**

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NSPCC (2008) **Children from minority ethnic backgrounds**

Save the Children (2004) **Separated Children in Europe Programme. Statement of good practice.**

The Statement aims to provide a straightforward account of the policies and practices required to implement and protect the rights of separated children in Europe.

The Children's Society (2008) **Supporting refugee young carers and their families A toolkit for ALL practitioners**

A good practice resource designed to enable all service providers to stay informed about the needs, rights and entitlements of refugee and asylum seeker young carers and their families and to carry out effective and appropriate signposting and joint working.

## **Training**

**Refugee Councils in England, Wales and Scotland offer training courses for organisations working with refugees and asylum seekers.** The training courses are up to date and cover a wide range of topics including: An introduction to asylum support, the therapeutic casework model, working with unaccompanied minors, supporting women affected by sexual violence and more.

**NRPF Network** offers training for organisations working with migrants with no recourse to public funds.

**Freedom from Torture** offers training on working with the survivors of torture. The training is designed as an introduction for a variety of professionals which can build capacity within organisations to work effectively with torture survivors. They can also create bespoke training sessions.

## **Other Useful organisations**

*Association of Directors of Adult Social Services (ADASS)*

Local Government House, Smith Square London SW1P 3HZ

Tel 020 7072 7433

[www.adass.org.uk](http://www.adass.org.uk)

A member organisation described as 'the voice of adult social care'. The website provides up-to-date information on policy, press releases and consultation responses. Together with ADCS it has developed a Joint ADCS and ADASS Asylum Taskforce,

which provides an interface between central government and local authorities concerning the additional costs and duties involved in the care of asylum seekers and their families, while at the same time seeking to ensure that the rights of people seeking asylum are honoured.

*Association of Directors of Children's Services Ltd (ADCS)*

3rd Floor, the Triangle Exchange Square Manchester M4 3TR

Tel: 0161 838 5757 email: [info@adcs.org.uk](mailto:info@adcs.org.uk)

[www.adcs.org.uk](http://www.adcs.org.uk)

ADCS is the national leadership Association in England for statutory directors of children's services and other children's services professionals in leadership roles and members.

*British Institute of Human Rights (BIHR)*

British Institute of Human Rights, School of Law, Queen Mary University of London, Mile End Road, London, E1 4NS

Tel: 020 7882 5850 email: [info@bihr.org.uk](mailto:info@bihr.org.uk)

[www.bihr.org.uk](http://www.bihr.org.uk)

BIHR is a human rights organisation committed to challenging inequality and injustice in everyday life in the UK. It aims to bring human rights to life.

*Detention Action*

Leroy House, Unit 3R, 436 Essex Road, London N1 3QP

Tel: 020 7226 3114 email [admin@detensionaction.org.uk](mailto:admin@detensionaction.org.uk)

Detention Action supports migrants held in immigration removal centres around London, providing emotional support and assistance in accessing legal and medical care. Detention Action also campaigns for the rights of detainees.

*Eaves Poppy Project*

Unit 2.03 Canterbury Court, Kennington Business Park, 3 Brixton Road, London SW9 6DE

Tel: 020 7735 2062 email: [post@eavesforwomen.org.uk](mailto:post@eavesforwomen.org.uk)

[www.eavesforwomen.org.uk/about-eaves/our-projects/the-poppy-project](http://www.eavesforwomen.org.uk/about-eaves/our-projects/the-poppy-project)

The Poppy Project provides from line support, advice and advocacy to women who have been trafficked. They also provide advice to professional who suspect an individual may have been trafficked. The service provides specialist assistance for female trafficking victims, for other groups refer to The Salvation Army.

*Equalities and Human Rights Commission*

email: [info@equalityhumanrights.com](mailto:info@equalityhumanrights.com), [wales@equalityhumanrights.com](mailto:wales@equalityhumanrights.com)

[www.equalityhumanrights.com](http://www.equalityhumanrights.com)

The aim of the Commission is to protect individuals against discrimination, to enforce the laws on equality and to promote fairness and human rights for everyone through influencing the development of law and policy and promoting good practice. It has four offices: London, Manchester, Cardiff and Glasgow. Further contact details are available on the website. The website has resources relating to equalities legislation and its implementation.

*Freedom from Torture (Formerly Medical Foundation for the Care of Victims of Torture)*

111 Isledon Road Islington London N7 7JW

Tel: 020 7697 7777

[www.torturecare.org.uk](http://www.torturecare.org.uk)

MF, a registered charity established in 1985, is the only organisation in the UK dedicated solely to the treatment of torture survivors. The main treatment centre is in London, with branches in Manchester (covering the North West), Newcastle (covering the North East) and Birmingham (covering the West Midlands). There is also a centre in Glasgow covering the whole of Scotland. MF offers medical consultation, examination and forensic documentation of injuries, psychological treatment and support, and practical help. MF also aims to educate the public and decision-makers about torture and its consequences and undertakes advocacy work to ensure that the UK honours its international obligations towards survivors of torture, asylum seekers and refugees.

*Information Centre about Asylum and Refugees*

The Runnymede Trust, 7 Plough Yard, Shoreditch, London EC2A 3LP

Tel: 020 7377 9222

[www.icar.org.uk](http://www.icar.org.uk)

An academic research and information organisation, which aims to encourage understanding, public debate and policy-making about asylum.

*Medical Justice*

86 Durham Rd, London N7 7DU

Tel: 020 7561 7498 email: [info@medicaljustice.org.uk](mailto:info@medicaljustice.org.uk)

Medical Justice provides medical assistance to individuals in immigration removal centres. The organisation recruits volunteer doctors to privately assess detainees. Referral enquires can be directed to [med@medicaljustice.org.uk](mailto:med@medicaljustice.org.uk)

**Migrants Rights Network**

33 Corsham Street, London N1 6DR

Tel: 020 7336 9412 email: [info@migrantsrights.org.uk](mailto:info@migrantsrights.org.uk)

Migrants Rights Network is an NGO that campaigns for the rights of migrants in the UK. It supports activism, produces media output and organises events.

### **NICRAS (Northern Ireland Community of Refugees and Asylum Seekers)**

Northern Ireland Community of Refugees and Asylum Seekers, 143a University Street, Belfast BT7 1HP

Tel: 028 9024 6699

[www.nicras.org.uk](http://www.nicras.org.uk)

Represents and is led by refugees and asylum seekers in Northern Ireland. It aims to support the integration process, campaign and raise awareness, provide information about immigration law and respond to the changing needs of its members.

*NRPF (No Recourse to Public Funds) Network*

NRPF Network, G11 Islington Town Hall, Upper Street, London, N1 2UD

Tel: 020 7527 7121 email: [nrpf@islington.gov.uk](mailto:nrpf@islington.gov.uk)

[www.nrpfnetwork.org.uk](http://www.nrpfnetwork.org.uk)

The NRPF Network was developed by Islington Council in 2006 and is a network of local authorities focusing on the statutory response to destitute people from abroad with NRPF. It shares information and good practice (see the practice guides in the previous section) among local authorities and other agencies; works with government departments to raise the practical and policy issues of NRPF; facilitates reimbursement for local authorities of the costs of providing support to people with NRPF; and develops a strategic response to managing the issue of and RPF.

### **Refugee Action**

Victoria Charity Centre 11 Belgrave Road, London SM1V 1RB

Tel 020 7952 1511 email [info@refugee-action.org.uk](mailto:info@refugee-action.org.uk)

[www.refugee-action.org.uk](http://www.refugee-action.org.uk)

Refugee Action is an independent national charity, which has over 25 years' experience in the reception, resettlement, development and integration of asylum seekers and refugees. In the north of England Refugee Action's asylum advice teams provide a reception service for newly arrived asylum seekers, as well as advice and advocacy. In Southern England Refugee Action administers an Assisted Voluntary Returns scheme for refused asylum seekers and irregular migrants to return to countries of origin.

*Refugee Council*

Head Office, PO 68614, London, Greater London E15 9DQ

Tel: 020 7346 6700

[www.refugeecouncil.org.uk](http://www.refugeecouncil.org.uk)

The Refugee Council is the largest organisation in the UK working with asylum seekers and refugees and has offices in London as well as in Birmingham, Ipswich and Leeds. The Refugee Council provides direct help and support and also works with asylum seekers and refugees to ensure their needs and concerns are addressed and to enable them to build new lives. As an independent human rights charity, the Refugee Council works to ensure that asylum seekers and refugees are treated with respect and

understanding and that they have access to the same rights, opportunities and responsibilities as other members of society.

*Salvation Army Anti-Human Trafficking Victim Support Programme*

99–101 Newington Causeway, London, Greater London SE1 6BN

24hr Referral Helpline: 0300 3038151

The Salvation Army runs the UK trafficking victim support programme in the UK they operate a **24-hour confidential Referral Helpline**. The programme supports victims to find safety and access legal advice, accommodation and medical help.

*Welsh Refugee Council*

Phoenix House 389 Newport Road Cardiff CF24 1TP

Tel: 029 2048 9800 email: [info@welshrefugeecouncil.org](mailto:info@welshrefugeecouncil.org)

[www.welshrefugeecouncil.org](http://www.welshrefugeecouncil.org)

The Welsh Refugee Council is an independent charity and has four offices in Cardiff, Newport, Swansea and Wrexham. The Council aims to empower refugees and asylum seekers to rebuild their lives in Wales and provides advice, information and support for asylum seekers and refugees. The Council offers specialist services in areas such as housing, health and employment and is also actively involved in policy development and campaigning for refugee rights.

*Women for Refugee Women*

4th Floor, Tindlemanor, 52–54 Featherstone Street, London EC1Y 8RT

Tel: 020 7250 1239 email: [admin@refugeewomen.co.uk](mailto:admin@refugeewomen.co.uk)

[www.refugeewomen.com](http://www.refugeewomen.com)

Women for Refugee Women work to raise awareness of the injustices experienced by women who seek refugee status in the UK. Women who come to the UK fleeing gender-related persecution (such as rape, honour crimes, female genital mutilation and trafficking for forced prostitution) are too often turned down for asylum. The group campaigns for better recognition of women's rights in the asylum process and seeks to support and empowers asylum seeking women through social events and group.

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## Glossary and abbreviations

### Terms used in this guide

**Age assessment** is the process and methods by which the UK Border Agency (UKBA) or social services assess the age an asylum seeker says they are. No method can precisely determine age and so ages are usually given within a range of two years.

**Age dispute** is the situation where the UKBA or social services do not accept the age that the asylum seeker says they are.

An **asylum seeker** is a person who has asked for protection but has not received a decision on their application to become a refugee, or is waiting for the outcome of an appeal.

**Discretionary leave to remain** is temporary permission to stay in the UK and is unlikely to exceed three years.

The **Hillingdon judgement** established that normally unaccompanied asylum-seeking children will need full support under Section 20 of the Children Act 1989, as opposed to section 17 of the Act.

**Human Trafficking**, can be defined as, 'the recruitment, transportation, transfer, harbouring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation'[1]

**Humanitarian Protection**, which replaced **Exceptional Leave to Remain** in 2003, is the permission to stay on humanitarian grounds, when an application for asylum has been refused.

**Indefinite leave to remain** is permission to stay in the UK indefinitely.

**Looked after children** refers to people under the age of 18 who are in the care of a local authority or provided with accommodation by them under the Children Act 1989 or related legislation.

**No recourse to public funds (NRPF)** refers to people from abroad who are subject to immigration control and have no entitlement to welfare benefits, Home Office support for asylum seekers or public housing.

A **refugee** is an individual to whom the UK government has offered protection in accordance with the Refugee Convention 1951 and granted leave to stay.

A **refused asylum seeker** is someone whose asylum application has been unsuccessful and is waiting to go to their home country or has decided to stay without permission.

**Section 17** of the Children Act 1989 gives local authorities a duty 'to safeguard and promote the welfare of children within their area who are in need; and so far as is consistent with that duty, to promote the upbringing of such children by their families, by providing a range and level of services appropriate to those children's needs'.

**Section 20** of the Children Act 1989 gives local authorities a duty to provide accommodation for any child in need who appears to require it 'as a result of (a) there being no person who has parental responsibility for him; (b) his being lost or having been abandoned; or (c) the person who has been caring for him being prevented (whether or not permanently, and for whatever reason) from providing him with suitable accommodation or care'.

The **Slough judgement** redefined the interpretation of local authorities' responsibilities to provide support under Section 21 of the National Assistance Act 1948.

**Social care** is defined by SCIE as 'the provision of social work, personal care (but not nursing or medical care), protection or social support services to children in need or at risk and their families and carers, or adults at risk or with needs arising from illness, disability, old age or poverty and their families or other carers. That provision may have one or more of the following aims: to protect service users, to preserve or advance physical or mental health, to promote independence and social inclusion, to improve opportunities and life chances, to strengthen families and protect human rights in relation to people's social needs'.

**UKBA** was, until 2012, responsible for securing the UK borders and controlling migration in the UK. The agency was scrapped and replaced by two separate units within the Home Office: a visa and immigration service and an immigration law enforcement division. In this guide references made to UKBA are in reference to actions made by this agency during its existence.

**Unaccompanied asylum-seeking children (UASC)** are children and young people, the majority of whom are aged 14 to 17, who have travelled independently to the UK to seek asylum.

## Abbreviations

- ADASS Association of Directors of Adult Social Services
- ADCS Association of Directors of Children's Social Services
- BVCS black voluntary and community sector
- CAF Common Assessment Framework
- DH Department of Health
- DRE delivering race equality
- ECM Every Child Matters
- ESOL English for speakers of other languages
- NICE National Institute for Health and Care Excellence
- NRPF No recourse to public funds
- PTSD post-traumatic stress disorder
- RCOs refugee and community organisations
- UASC unaccompanied asylum-seeking children
- UKBA UK Border Agency
- UNHCR United Nations High Commissioner for Refugees

## **Good practice in social care for refugees and asylum seekers**

The purpose of this guide is to support commissioners and providers of social care services to work effectively with refugees and asylum seekers. It is based on the fact that refugees and asylum seekers have rights, including the right to a high quality of assessment and provision in response to their social care needs. The guide will help practitioners to understand policy and practice relevant to asylum seekers and refugees.

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