

Refugee Council submission to the Home Affairs Select Committee: Asylum Accommodation Inquiry

September 2016

Submission on the issue of women in asylum accommodation.

About the Refugee Council

The Refugee Council is a human rights charity, independent of government, working to ensure refugees are given the protection that they need, are treated with the respect and understanding that they are entitled to, and that they are assured the same rights, opportunities and responsibilities as other members of society.

1. We welcome the Committee's much needed scrutiny of Home Office contracted accommodation for asylum seekers. G4S, Serco and Clearel are contracted by the Home Office to provide housing to asylum seekers under section 98, section 95 and section 4 of the Immigration and Asylum Act 1999. Where and how asylum seekers are housed while they wait for a decision on their asylum claim is fundamental to their health and well-being during this time. Not allowed to work and with no access to mainstream benefits the asylum support system is usually the only support available and is often all that is preventing someone from becoming street homeless. Asylum seekers are usually dependant on the asylum support system for months or sometimes years.¹
2. This submission will look specifically at the provision of accommodation provided under section 98 of the Immigration and Asylum Act 1999, known as 'initial accommodation' (IA), which provides support on a full board basis, usually in hostels, during the period when the Home Office is examining the application for longer term (section 95) support. This submission will particularly focus on the provision for women. A significant proportion of refugee and asylum seeking women in the UK have experienced violence, including rape or sexual violence, in their country of origin and/or during their journey to safety. Even after arrival in the UK asylum seeking women may be at heightened risk of violence or exploitation and they face additional barriers in finding help. They may be fearful of authorities because of their experiences in their home countries and therefore less likely to report violence, they may not speak the language or understand that what they have experienced is illegal in this country and there are specialist support services available to them.
3. With no other state-support available to them, the asylum support system is critical to their safety. It is all the more surprising therefore that the contract, known as Compass, is a gender and equality blind contract. For example, the 100+ page statement of requirements mentions women just four times, all in the context of pregnancy and it says nothing about women's safety or protection from violence. Nor are there any references to the distinct needs of LGBT asylum seekers. This reflects a wider asylum support system that by and large fails to cater for a population with complex and varied needs.

¹ The Home Office aims to decide applications for asylum within 6 months but many asylum seekers wait much longer. As of the latest published Asylum and Immigration statistics, more than 6,000 people had been waiting for more than 6 months for an initial decision on their claim. For more on this, see:

http://www.refugeecouncil.org.uk/assets/0003/8866/Asylum_Backlogs_August_2016.pdf

4. There are seven initial accommodation centres in the UK and they are usually large full board hostels with shared living and social areas. People will be required to share their room with strangers; even, pregnant women who will live there until after the birth of their child, and some IAs have nowhere for children to play. Those in full board hostels will, in the main, have no access to cash, vouchers or any type of credit. Applicants are expected to spend on average 19 days in initial accommodation but in practice may find they stay there for much longer.
5. In recent years, women have made up 21-28% of asylum applications so inevitably at times some of these centres are overwhelmingly dominated by men and we are not aware of any guidance for accommodation providers on what the male/female ratio should be. Communal and eating areas are mixed and bathrooms are usually unisex. Several of the centres have no women-only or safe spaces, potentially further exposing women who have experienced violence to additional trauma and/or risk. Anecdotally we have heard reports of women who are anxious about using the bathroom at night and/or going hungry because they feel intimidated or fearful of being sexually harassed in the corridors or the canteen.
6. The Istanbul Convention on combatting and preventing violence against women and girls, which has been signed but not ratified by the UK, requires signatories to develop gender-sensitive reception procedures that take into account women's and men's differences in terms of experiences and specific protection needs to ensure their right to safety. The Convention cites as an example of gender sensitive reception procedures, the separate accommodation of men and women.
7. It should be a requirement that all initial accommodation centres have clear policies and procedures in place specifying measures to guarantee the safety of women residents. As a priority, this should include **the implementation of women and children only corridors (including bathroom facilities) and social areas**. Where provision includes meals, these should be organised so that **women and children are able to access the canteen without feeling intimidated** (i.e. the option of women and children only meal-times).

Pregnant women and new mothers

8. The conditions in initial accommodation centres will disproportionately impact on pregnant women due to the Home Office's policy of not dispersing women in the late stages of pregnancy or during early motherhood (defined by the Home Office as six weeks before due date until after post natal checks, usually six weeks after birth), unless requested in writing by the woman.² This means that some pregnant women will stay in initial accommodation centres for months.
9. Those in full board initial accommodation have little control over what they eat and complaints about the food in IAs are fairly common. This is particularly concerning in the case of pregnant women as pregnancy is the most nutritionally demanding time in a woman's life and asylum seeking women are often already nutritionally deficient because of their experiences in their countries of origin or during flight.

²

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/496911/new_Healthcare_Needs_and_Pregnancy_Dispersal_Policy_EXTERNAL_v3_0.pdf (page 40)

10. NICE guidance says that pregnant women should eat five portions of fruit and vegetables a day and one portion of oily fish (for example, mackerel, sardines, pilchards, herring, trout or salmon) a week. While providers are required to provide a food service with “complete and adequate provisions for pregnant women”,³ midwives treating asylum seeking women staying in IAs have expressed concern to us about whether pregnant women’s nutritional needs are being met by the food provided. An inadequate diet for a prolonged period risks impacting on the health of the pregnancy. As with all the concerns cited in this paper, we have raised this with the Home Office and suggested they **ask an independent expert to do a spot check of the food available to pregnant women in all full-board initial accommodation centres.**
11. All pregnant women receiving asylum support receive an additional £3 a week intended to allow them to purchase healthy foods. Pregnant women in full-board accommodation will also receive this payment. However, £3 a week will offer them little possibility to improve their diet. Furthermore, they may have other needs that are not being provided for.
12. Pregnant women whether in short term ‘initial accommodation’ or longer term ‘dispersal accommodation’, may struggle to attend medical appointments, particularly ‘same day’ appointments. The Home Office requires its contractors to provide transport for medical appointments however the process in place to request a taxi to attend an appointment requires women in practice to provide at least 24hours notice, sometimes more, before the appointment.
13. Pregnant women are more likely than other groups to be required to attend a same-day medical appointment. This often arises when at a routine appointment there is concern about the pregnancy and the woman is booked for a scan the same day in a hospital. In these circumstances it is difficult and sometimes impossible for pregnant women in Home Office contracted accommodation to organise a taxi paid for by the Home Office. The lack of a mechanism to facilitate travel for a woman to attend a same-day medical appointment is putting the health of the pregnancy at risk. Furthermore, requests for taxis to attend ante natal education and baby banks are routinely refused. **The shortcomings in the system for requesting transportation for medical and other appointments need addressing as a matter of urgency.**
14. Our recommendations above are concrete actions that the Home Office and its accommodation providers could take tomorrow to begin to make the asylum support and accommodation systems more gender sensitive. However, they represent only small steps in a system that is largely oblivious to the complex needs of women and others seeking asylum. In the longer term, **the Home Office should work to place gender (and other equalities) at the centre of its asylum and accommodation systems.**

Summary of Refugee Council recommendations

15. **The Home Office should:**

³ See Compass Statement of Requirements

- a. Require its contractors to provide a women and children only area in all initial accommodation. In full board hostels this would include a women only corridor (including bathroom facilities) and a communal women and children only space.
- b. Require its contractors to ensure that full board hostels provide ‘women and children’ only mealtimes in the canteen.
- c. Ask an independent expert to do a spot check of the food available to pregnant women in all full-board initial accommodation centres.
- d. Require its contractors to ensure that transportation is available for all pregnant women to attend all medical appointments, including same day medical appointments. Transportation should also be provided so that women can attend the baby bank or ante-natal education.
- e. Require its contractors to provide pregnant women in the late stages of pregnancy with their own bedroom.
- f. Require its contractors to provide play areas for children in all initial accommodation centres.
- g. Work to place gender (and other equalities) at the centre of its asylum and accommodation systems.

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